

Affidavit of Disclosure of Connections to Elected Officials and City of Jacksonville Executives

(Pursuant to Section 118.107(b)(2) of the Jacksonville Ordinance Code)

Purpose

This affidavit is designed for use by nonprofit organizations to disclose any relationships with elected officials and City Executives. Such disclosure is essential for transparency and to avoid conflicts of interest.

Affidavit of Disclosure

I, Kimberly Banks, being duly sworn, do hereby state as follows:

1. Personal Information

- Name: Kimberly Banks
- Position/Title within Nonprofit: CFO/SVP Financial & Facilities Management
- Name of Nonprofit Organization: Jacksonville University
- Address of Nonprofit: 2800 University Blvd. N, Jacksonville, FL 32211

2. Disclosure of Connections

Please answer the following questions:

A. Does your organization employ any of the following persons:

The Mayor or her/his spouse or children

Any of the 19 City Council Members or their spouse or children

Any of the Mayor's Executive Staff or their spouse or children*

Any of the City's Department or Office heads or their spouse or children*

☐ Yes ☒ No

If yes, list the name of the employee(s) and their position with your agency.

B. Are any members of your Board of Directors in one of these categories?

The Mayor or her/his spouse or children

Any of the 19 City Council Members or their spouse or children

Any of the Mayor's Executive Staff or their spouse or children*

Any of the City's Department or Office heads or their spouse or children*

☐ Yes ☒ No

If yes, please list the name of the Board Member and the connection to the City of Jacksonville.

Name of Board Member: _____

Nature of relationship: _____

3. Certification

I certify that the above information is true and complete to the best of my knowledge. I understand that failure to accurately disclose relevant connections shall cause any monetary award to be voidable by the City.

Signed by:

Kim Banks

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Print Name: Kimberly Banks

STATE OF FLORIDA

COUNTY OF Duval

The foregoing instrument was acknowledged before me, by means of [] physical presence or [X] online notarization, this 11 day of Sept. 2025, by Kimberly Banks as CFO/SVP Financial & Facilities Management for Jacksonville University, who is [X] personally known to me or [] has produced identification and who took an oath.

Type of identification produced: personally know

DocuSigned by:

Beverly Reid

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Notary Public, State of Florida

Print Name: Beverly A. Reid

Commission No. HH 574597

My Commission Expires: August 10, 2028

*A list of persons in this category will be supplied upon request.