

EXHIBIT B

STATE OF TEXAS

COUNTY OF _____

AFFIDAVIT OF EXECUTIVE DIRECTOR

Before me, the undersigned, on this day personally appeared

(Enter Full Name and Credentials)

I _____ am Executive Director of the North Texas Behavioral Health Authority (NTBHA) located in _____, Texas.

- I have read and am familiar with the current NTBHA contract with DSHS.
- I have read and am familiar with the current behavioral health organization statement of work with DSHS.
- I have read and am familiar with the current memorandum of understanding between NTBHA and the behavioral health organization.
- I affirm that I nor my spouse owns or controls, directly or indirectly, more than ten (10%) interest in a business entity or other organization receiving funds from NorthSTAR or be employed by such a business entity or other organization or service on the governing board of any BHO which is under a contractual obligation to NTBHA or the State.
- I affirm that I have not participated in the hiring, nor will I participate in the hiring of a person who is related to any member of the Board by affinity within the second degree or by consanguinity within the third degree.
- I agree to report immediately in writing to the DSHS Contract Manager for the DSHS-NTBHA contract any conflict of interest that occurs during the Contract term.

By my signature below, I certify that I have read and understand this document and that the statements that I make herein are correct and complete.

Signature of Executive Director

Date

ACKNOWLEDGED, SWORN TO AND SUBSCRIBED BEFORE ME, the undersigned Notary Public, on this _____ day of _____, 20_____.

Notary Public for the State of Texas

My Commission expires: _____

INSTRUCTIONS FOR THE AFFIDAVITS

The Contractor's Executive Director must complete the affidavit and must have a Notary Public notarize the affidavit as indicated.

On the "Affidavit of Executive Director" form, the county at the top of the affidavit in the right-hand corner should reflect the county *where the affidavit is being notarized*.

This form will be made available to you electronically.