



Levine Act Subcontractor Form:

Identification of Agents

Completed form submitted to the County of Santa Clara is a public record.

This Section to be completed by County Staff after Form is completed by Subcontractor:

Date of Board of Supervisors Meeting
When Agreement/Amendment Will Be Considered: 4/16/24

Legislative File No.: 24-5253

Instructions to Subcontractor for Completion of Form:

For any contract or grant/sponsorship agreement (including amendments) with the County of Santa Clara ("Agreement") that will be submitted to the County of Santa Clara Board of Supervisors for consideration, this form must be separately filled out by any subcontractor identified in the solicitation/grant/sponsorship proposal or in the Agreement with the County ("Subcontractor"). Upon completion, return this form to the Agreement contractor or grant/sponsorship recipient ("Contractor") for submission to the County.

NOTE: This form is for the identification of Subcontractor's agents only. If a Subcontractor or their agents have any campaign contributions they are required to disclose pursuant to the Levine Act, they must separately disclose those contributions. They may make such disclosures at <https://www.sccgov.org/levineact>.

Subcontractor Legal Name
(include d/b/a if applicable): Crosby Group

Title or Short Description of Agreement: County of Santa Clara- Mechanical, Electrical, and Plumbing (MEP) Engineering Services for Various Projects

Provide list of Subcontractor's Agents (as that term is defined under Government Code section 84308 and California Code of Regulations section 18438.3¹) for this Agreement:

	Name of Agent(s):
1.	
2.	
3.	
4.	

If there are more than four Agents, please submit a supplemental form. If attaching a supplemental form, check this box: ☐

If no Agents, check this box: ☒

The undersigned declares that they are a representative of Subcontractor and are empowered to represent, bind, and execute contracts on behalf of the firm or individual. The undersigned declares that all statements in this Form are true and correct.

Patrick Crosby

Printed Name

Subcontractor's Authorized Representative Signature

Principal

Title

Date

3/18/24