



CITY OF OAKLAND

# SCHEDULE S

## Slavery Era Disclosure Affidavit

I, \_\_\_\_\_ [Name], the undersigned, a \_\_\_\_\_ of \_\_\_\_\_ [Title] of \_\_\_\_\_ [Business Entity] (hereinafter referred to as Business Entity am duly authorized to attest on behalf of the business Entity)

Please check either (1), (2), or (3) below. If the contractor checks (3), the contractor must disclose below or in an attachment to this all information required by (3).

1. \_\_\_\_\_ I declare that the Business Entity does **not** provide insurance or financial services or that the Business Entity is **not** a textile, tobacco, railroad, shipping, rice and/or sugar company doing business with the City.
2. \_\_\_\_\_ I declare that the Business Entity has found **no** records after searching through any and all records in the possession, control and/or knowledge of the Business Entity, its parent entities, subsidiaries and any predecessors in interest, for records that the contractor, its parent entities, subsidiaries and any predecessors in interest bought or sold people subjected to slavery, used people subjected to slavery as collateral, provided loans to purchase people subjected to slavery, insured such transactions or the people subjected to slavery during the slavery era and/or provided related or other services to aid and abet such transactions, including insurance policies issued to slaveholders that provided coverage for damage to or injury or death of enslaved Africans.
3. \_\_\_\_\_ I verify that, as a result of conducting the search in step (2) above, the Business Entity has found records of investments or profits from slavery or slaveholder insurance policies. I verify that the following constitutes full disclosure of all such records, including the names of each slave and slaveholder described in those records and/or evidence of transactions that benefited/profited from American slavery.

\_\_\_\_\_ I understand that completed affidavits and disclosure reports shall be made publicly available to the public upon request after consultation with the City Attorney and any contractor who willfully or recklessly files a false affidavit or other statement or fails to file the required disclosure shall be subject to termination of the contract with the City. I understand that the City Administrator may take action to terminate the contract, and the City Attorney or any Oakland resident may bring action to mandate disclosure or correct any misstatement as well as reasonable attorney's fees and costs.

\_\_\_\_\_ I understand that I can make voluntary contributions to the established Fund 2422, the Slavery Era Disclosure Fund to promote healing and assist the City in rectifying and remedying some of the legacies of the shameful commerce in slavery. Contributions of up to \$50,000 may be accepted by the City Administrator on behalf of the City without City Council action, pursuant to Administrative Instruction No. 1052, effective February 14, 2008.

\_\_\_\_\_ I declare that I understand the Slavery Era Disclosure Ordinance No. 12686 C.MS. (2005). Based on my understanding, the above is true and correct to the best of my knowledge.

\_\_\_\_\_  
(Signature of Business Owner)

\_\_\_\_\_  
(Printed Name of Business Owner)

\_\_\_\_\_  
(Date)