## FWC 18/19-49

## Confidentiality Form

I acknowledge that the information I am requesting is exempt from public disc to §119.071(3)(b) Fla. Stat I further acknowledge that all officers, employee	s, servants, and
agents of (Business name) share exempt status of the requested information as required by §119.071(3)(b)4 I	all maintain the
exempt status of the requested information as required by §119.071(3)(b)4 I	Fla. Stat In the
event that(Business name) anticipates sub-	contracting any
part or all of the work to any third party and as such a potential subcontra	ctor requests to
see the exempt material,(Busine	ss name) shall
require the subcontractor to acknowledge the exemption and provide writter	
all officers, employees, servants, and agents of the subcontractor will main	tain the exempt
status of the information as well.	
Contractor:	_
Address:	
Titul Coo-	_
Talanhana'	
Telephone:	_
Name: (Print):	
Title:	
City/State/Zip:	
Fax:	
rax.	_
Name (Sign):	
Traine (bigh).	_