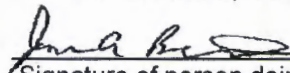


Insert Conflict of Interest Form here

The blank form is located in "General Comments and Attachments" in the iStar Sourcing Module under Event RFP # 0000263.

| CONFLICT OF INTEREST QUESTIONNAIRE FORM CIQ For vendor or other person doing business with local government entity | |
|--|---|
| This questionnaire reflects changes made to then law by H.B. 1491 80 th Leg., Regular Session. This questionnaire is being filed in accordance with Chapter 176, Local Government Code by a person who has a business relationship as defined by Section 176.001(1-a) with a local government entity and the person meets the requirements under Section 176.006(a). By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7 th business day after the date the person becomes aware of facts that require the statement to be filed. See Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor. | <u>OFFICE USE ONLY</u> Date Reviewed |
| 1. Name of person who has a business relationship with local government entity. <i>Siemens Medical Solutions USA, Inc.</i> | |
| 2. <input type="checkbox"/> Check this box if you are filing an update to a previously filed questionnaire. (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7 th business day after the date the originally filed questionnaire becomes incomplete or inaccurate). | |
| 2. Name of local government officer with whom filer has employment or business relationship. <div style="text-align: center;"> <u>None</u> Name of Officer </div> <p>This section (item 3 including subparts A, B, C & D) must be completed for each officer with whom the filer has an employment or other business relationship as defined by Section 176.001(1-a), Local Government Code. Attach additional pages to this Form CIQ as necessary.</p> A. Is the local government officer named in this section receiving or likely to receive taxable income, other than investment income, from the filer of the questionnaire? _____ Yes _____ No B. Is the filer of the questionnaire receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer named in this section AND the taxable income period is not received from the local governmental entity? _____ Yes _____ No | |
| C. Is the filer of this questionnaire employed by a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership of 10 percent or more? _____ Yes _____ No D. Describe each employment or business relationship with the local government officer named this section. | |
| 4 <i>James Bertrand, Vice President and Zone General Manager</i> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 60%;">  _____ Signature of person doing business with the governmental entity </div> <div style="width: 35%; text-align: right;"> <u>October 21, 2013</u> Date </div> </div> | |

| CONFLICT OF INTEREST QUESTIONNAIRE FORM CIQ For vendor or other person doing business with local government entity | |
|---|---|
| This questionnaire reflects changes made to then law by H.B. 1491 80 th Leg., Regular Session. This questionnaire is being filed in accordance with Chapter 176, Local Government Code by a person who has a business relationship as defined by Section 176.001(1-a) with a local government entity and the person meets the requirements under Section 176.008(e). By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7 th business day after the date the person becomes aware of facts that require the statement to be filed. See Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor. | OFFICE USE ONLY Date Reviewed |
| 1. Name of person who has a business relationship with local government entity. <p style="text-align: center;"><i>NONE</i></p> | |
| 2. <input type="checkbox"/> Check this box if you are filing an update to a previously filed questionnaire. (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7 th business day after the date the originally filed questionnaire becomes incomplete or inaccurate). | |
| 2. Name of local government officer with whom filer has employment or business relationship. <p style="text-align: center;">_____</p> <p style="text-align: center;">Name of Officer</p> <p>This section (item 3 including subparts A, B, C & D) must be completed for each officer with whom the filer has an employment or other business relationship as defined by Section 176.001(1-a), Local Government Code. Attach additional pages to this Form CIQ as necessary.</p> <p>A. Is the local government officer named in this section receiving or likely to receive taxable income, other than investment income, from the filer of the questionnaire? _____ Yes _____ No</p> <p>B. Is the filer of the questionnaire receiving or likely to receive taxable income other than investment income, from or at the direction of the local government officer named in this section AND the taxable income period is not reported from the local government entity? _____ Yes _____ No</p> <p>C. Is the filer of the questionnaire employed by or a proprietor or sole proprietorship with respect to which the local government officer serves as an officer, or director, or holds an ownership of 10 percent or more? _____ Yes _____ No</p> <p>D. Describe such employment or business relationship with the local government officer named this section. _____</p> | |

[Signature] 7/2/2012

* ~~NO~~ NO CONFLICTS
NOT APPLICABLE

RIT #275

Conflict of Interest Questionnaire (CIQ)

GE Healthcare is a large company with a sizeable employee base. With the diversified nature of GE Healthcare's business, there are no centralized databases to permit GE Healthcare to access information on a world-wide basis, or even across divisions of GE Healthcare to determine whether conflicts exist.

GE Healthcare does, however, have its own corporate conflict of interest policy that GE Healthcare enforces, and GE Healthcare requires that all employees notify GE Healthcare if they have another job that might present a conflict of interest.

