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| **Appendix F**  **Request for Municipal Improvement** | | | |
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| **Section 1: Government Entity Information and Background** *(to be completed by Responsible Business Unit)* | | | |
| 1. Name of Government Entity:   Click here to enter text.  Address of Government Entity:  Click here to enter text.  Government Entity Telephone Number: Click here to enter text.  Name of Primary Contact: Click here to enter text.  Title of Primary Contact: Click here to enter text.  Telephone of Primary Contact: Click here to enter text.  Email Address of Primary Contact: Click here to enter text. | | | |
| 1. Does the Government Official requesting the Municipal Improvement have close family or personal relationships with anyone at the Company?   Yes  No  If **YES**, please identify the Company employee(s) and the type of relationship below.  Click here to enter text. | | | |
| 1. Identify the intended recipient of the Municipal Improvement, ***if different*** from the requesting entity:   Click here to enter text. | | | |
| **Section 2: Information on the Municipal Improvement** *(to be completed by Responsible Business Unit)* | | | |
| 1. Type of Municipal Improvement (check all that apply)   Requested by Government Entity  Required by Law  Involves Payment to a Government Entity  If **Requested by Government Entity**, provide evidence of the request from the Government Entity, if any.  If a **payment to a Government Entity** is involved in completing the Municipal Improvement, provide the following, as applicable:  all related communication with the Government Entity  comparison between RBU calculation of the value of the work to be performed against the proposed price of work or regulated price for work to be conducted  statement on difficulties in complying with the scope of the Municipal Improvement Required by Law  legal opinion  law or regulation that requires payment to the Government Entity | | | |
| 1. Description and purpose of the requested Municipal Improvement:   Click here to enter text. | | | |
| 1. Cost of Municipal Improvement:   Click here to enter text. | | | |
| 1. Describe the circumstances under which the Municipal Improvement request arose:   Click here to enter text. | | | |
| 1. Outside Vendors or Service Providers.   **Outside vendors may not commence work on an approved Municipal Improvement without the prior approval of A/C Compliance.**  List all vendors or service providers that will be used or engaged to complete the Municipal Improvement and the service(s) that each of those vendors or service providers will be providing. TPIs and Government Entities to be engaged by the Company to perform work on the Municipal Improvement should be included.   |  |  |  |  | | --- | --- | --- | --- | | **Name of Vendor/Service Provider** | **Type of Service** | **Standard Selection Process** | **TPI / Government Entity / Non-TPI** | |  |  |  |  | |  |  |  |  |   If the Standard Selection Process was not followed, explain why.  Click here to enter text.  If no third party will be used, please indicate “None.”  None. | | | |
| 1. Has a Government Official (or a Family Member or Close Business Associate of a Government Official) recommended or suggested any specific vendor, supplier, or service provider to be used in connection with this Municipal Improvement?   Yes  No  If **YES**, provide the name, job title, and affiliated Government Entity of the Government Official who is recommending the vendor, supplier, or service provider, and explain the details of the recommendation:  Click here to enter text. | | | |
| **Section 3: Responsible Business Unit Authorization** *(to be completed by Responsible Business Unit)* | | | |
| 1. Do you have any reason to believe that the Municipal Improvement will be used to benefit any Government Official in his or her individual capacity or any Family Member or Close Business Associate of a Government Official?   Yes  No  If **YES**, please explain:  Click here to enter text. | | | |
| 1. Do you have any reason to believe that the Municipal Improvement will be used for any purpose other than that stated by you in this request form?   Yes  No  If **YES**, please explain:  Click here to enter text. | | | |
| 1. Financial information related to Municipal Improvement.   GL Account: Click here to enter text.  Cost-Center or Project Number: Click here to enter text. | | | |
| 1. Acknowledgement   I confirm that the information provided above is true and complete as of the date shown below, and I agree to promptly notify the Anti-Corruption Compliance Department of any changes to that information. In addition, if I become aware of material changes to scope of work related to the requested Municipal Improvement, I will promptly notify the Anti-Corruption Compliance Department.  I understand and acknowledge that work on the Municipal Improvement may not commence and no outside vendor may be engaged by the Company to work on the Municipal Improvement until: (a) the Municipal Improvement and the outside vendor(s) have been approved by the Anti-Corruption Compliance Department; (b) written contracts with the Government Entity and approved outside vendors that contain appropriate Anti-Corruption Clauses has been executed, as applicable; and (c) a vendor number has been issued to the approved outside vendors.  Signature:  Name and Title:  Business Unit:  Today’s Date: | | | |
| **Section 4: Legal Verification** *(to be completed by Legal Department)* | | | |
| 1. Is the Municipal Improvement prohibited, permitted or Required by Law?   Prohibited  Permitted  Required by Law  If **Required by Law**, specify the law, statute, regulation, or the decision of the Government Entity pursuant to an approval process required by law and summarize the general requirements:  Click here to enter text. | | | |
| 1. Is the Government Entity requesting and/or authorizing the Municipal Improvement the same Government Entity that will be completing work on the Municipal Improvement?   Yes  No  If **YES**, is the payment to the Government Entity for the Municipal Improvement prohibited or permitted by law or regulation?  Prohibited  Permitted | | | |
| 1. Is the Responsible Business Unit requesting a payment to a Government Entity in lieu of completing a Municipal Improvement Required by Law?   Yes  No  If **YES**, has a formal legal opinion on the legality, including the parameters and existing financial controls related to the payment, been provided to the Legal Department for review?  Yes  No  Based on the information contained in this Request for Municipal Improvement, the formal legal opinion, the laws and regulations surrounding payment to the Government Entity for the Municipal Improvement and any other relevant information, is the payment to a Government Entity in lieu of completing a Municipal Improvement Required by Law prohibited or permitted by law or regulation?  Prohibited  Permitted | | | |
| 1. Verification.   Signature:  Name of Legal Employee Providing Verification: Click here to enter text.  Title: Click here to enter text.  Today’s Date: Click here to enter text. | | | |
| **Section 5: A/C Compliance Authorization** *(to be completed by A/C Compliance)* | | | |
| 1. The requested Municipal Improvement is:   Rejected  Approved  Required by Law | | | |
| 1. A/C Compliance Authorization of the Municipal Improvement (*mark which applies*):  |  |  | | --- | --- | | Requested by Government Entity | Name of A/C Compliance Employee Completing the Form: Click here to enter text.  Title: Click here to enter text.  Signature:  Date: Click here to enter text. | | Required by Law | Name of A/C Compliance Employee Completing the Form: Click here to enter text.  Title: Click here to enter text.  Signature:  Date: Click here to enter text. | | Involves Payment to a Government Entity  For the Engagement of Services  Required by Law  Instead of completing the Municipal Improvement Required by Law | Signature:  Title:  A/C Compliance Director  Global A/C Compliance Officer  Date: Click here to enter text. | | | | |
| 1. A/C Compliance Authorization of the Outside Vendors: | | | |
| **Name of Vendor/Service Provider** | **A/C Compliance Decision** |
|  | Rejected  Approved  Subject to Due Diligence  Agreement/Contract Required  Other Click here to enter text. |
|  | Rejected  Approved  Subject to Due Diligence  Agreement/Contract Required  Other Click here to enter text. |
|  | Rejected  Approved  Subject to Due Diligence  Agreement/Contract Required  Other Click here to enter text. |
| A/C Compliance Signature:  Title:  Date: Click here to enter text. | |

*Note: A/C Compliance may document its authorization and any other requirements separately as long as it is written and retained in accordance with the Document Retention requirements of the International Giving Procedures.*