

# CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.  
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

## OFFICE USE ONLY CERTIFICATION OF FILING

**1 Name of business entity filing form, and the city, state and country of the business entity's place of business.**  
Arthur J. Gallagher Risk Management Services, Inc.  
Dallas, TX United States

Certificate Number:  
2016-108969

Date Filed:  
09/07/2016

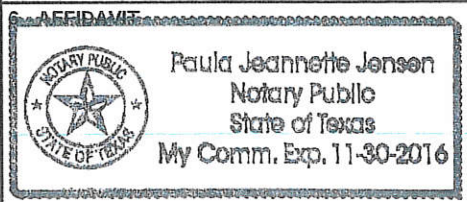
**2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.**  
Fort Bend County

Date Acknowledged:

**3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.**  
RFP 14-046  
Aviation Insurance

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Arthur J. Gallagher Risk Management Services, Inc.	Dallas, TX United States		X
	QBE Insurance Corporation	Harrisburg, PA United States	X	

5 Check only if there is NO interested Party.



I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

*[Handwritten Signature]*  
\_\_\_\_\_  
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Daniel M. Tropp, this the 7<sup>th</sup> day of September, 20 16, to certify which, witness my hand and seal of office.

*[Handwritten Signature]* Paula Jeannette Jensen Notary  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath