

# 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.

Fort Bend Women's Center  
Richmond, TX United States

Certificate Number:  
2016-146296

Date Filed:  
12/14/2016

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.

21071  
Counseling Services

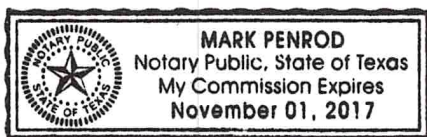
4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.



### 6 AFFIDAVIT

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



AFFIX NOTARY STAMP / SEAL ABOVE

Peggy Wright  
Signature of authorized agent of contracting business entity

Sworn to and subscribed before me, by the said PEGGY WRIGHT, this the 15<sup>TH</sup> day of DECEMBER  
20 16, to certify which, witness my hand and seal of office.

Mark Penrod  
Signature of officer administering oath

MARK PENROD  
Printed name of officer administering oath

EMPLOYEE  
Title of officer administering oath