

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.
 Harco Insurance Services
 Houston, TX United States

Certificate Number:
 2020-664686

Date Filed:
 09/04/2020

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 Toll Road Authority

Date Acknowledged:
 09/08/2020

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.
 FBCTRA 10/01/2020 - INS
 Insurance – Proposal

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 UNSWORN DECLARATION

My name is Gerri Rougeau, and my date of birth is [REDACTED].

My address is 10777 Northwest Freeway, Suite 700, Houston, TX, 77092, USA.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Harris County, State of Texas, on the 4th day of September, 2020.
(month) (year)

Gerri Rougeau

 Signature of authorized agent of contracting business entity
 (Declarant)