

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

Certificate Number:
 2017-260756

Date Filed:
 09/14/2017

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Grainger
 Harahan, LA United States

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

Ft Bend County

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.

10903
 National IPA Contract 141003

| 4 Name of Interested Party | City, State, Country (place of business) | Nature of interest (check applicable) | |
|----------------------------|--|---------------------------------------|--------------|
| | | Controlling | Intermediary |
| Garcia, Robert | Austin, TX United States | | X |
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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.

[Handwritten Signature]

 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Robert Garcia, this the 14th day of Sept., 2017, to certify which, witness my hand and seal of office.



OFFICIAL SEAL
 JAMES F. EZELL
 NOTARY PUBLIC - LOUISIANA
 NOTARY #53735
 PARISH OF JEFFERSON
 My Commission Is For Life

[Handwritten Signature]

 Signature of officer administering oath

James Ezell

 Printed name of officer administering oath

 Title of officer administering oath

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Grainger
Harahan, LA United States

Certificate Number:
2017-260756

Date Filed:
09/14/2017

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

Date Acknowledged:
09/26/2017

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.
10903
National IPA Contract 141003

| 4 | Name of Interested Party | City, State, Country (place of business) | Nature of interest (check applicable) | |
|---|--------------------------|--|---------------------------------------|--------------|
| | | | Controlling | Intermediary |
| | Garcia, Robert | Austin, TX United States | | X |
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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.

Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath