## **CERTIFICATE OF INTERESTED PARTIES FORM 1295** 1 of 1 **OFFICE USE ONLY** 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.

**CERTIFICATION OF FILING** 1 Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2018-352935 LexisNexis Risk Solutions FL Inc. Date Filed: Alpharetta, GA United States 05/14/2018 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Date Acknowledged: Fort Bend County District Attorney's Office 05/23/2018

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.

**DIR-LGL-CALIR-01A** 

Legal Assistance Subscription

4				Nature of interest (check applicable)		
Name of Interested Party		City, State, Country (place of business)		Controlling		
RELX U.S. Holdings Inc.		Newton, MA United S	States	X	mtermediar	
NEEX 0.0. Floridings inc.				ļ · ·		
			•			
5 Check only if there is NO Interested Party.	]					
UNSWORN DECLARATION						
My name is		and my date of birth is				
My address is			,	.•		
My address is(street)		(city)	(state)	(zip code)	(country)	
I declare under penalty of perjury that the foregoing is tr	rue and correct.					
Executed in	County,	State of	, on the	_day of	, 20	
				(month)	(year)	
	<del></del>	Signature of authorized	agent of contracti	ng business entity		
orms are ided by Tayes Ethics Commission		an atata tu un			raian V/1 O FE'	