

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 2

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:
2023-1091983

Date Filed:
11/07/2023

Date Acknowledged:
12/05/2023

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

Core & Main LP
Houston, TX United States

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

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.

B23-023
Purchase of Culverts

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Core & Main Intermediate GP, LLC	St. Louis, MO United States	X	
	Zrebiec, J.L.	St. Louis, MO United States	X	
	Witkowski, Mark R.	St. Louis, MO United States	X	
	Sleeper, Nathan	St. Louis, MO United States	X	
	Schaller, John	St. Louis, MO United States	X	
	Rorick, Ian	St. Louis, MO United States	X	
	Newman, Margaret	St. Louis, MO United States	X	
	Mazzarella, Kathleen	St. Louis, MO United States	X	
	LeClair, Stephen O.	St. Louis, MO United States	X	
	Kimbrough, Orvin	St. Louis, MO United States	X	
	Gipson, Dennis	St. Louis, MO United States	X	
	Cowles, Bradford A.	St. Louis, MO United States	X	
	Castellano, James	St. Louis, MO United States	X	
	Berges, James	St. Louis, MO United States	X	

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			Controlling	Intermediary

5 Check only if there is NO Interested Party.

☐

6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

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

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)