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. MGT of America Consulting LLC Tallahassee, FL United States		Certificate Number: 2017-164008 Date Filed:			
2	Name of governmental entity or state agency that is a party to the contract for which the form is being filed. City of Corpus Christi		02/08/2017 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. 980 Cost Allocation Plans and User Fee Study Agreement (Consulting Services)					
4	Name of Interested Party City, Stat	City, State, Country (place of business		Nature of interest (check applicable) Controlling Intermediary		
			Control	ing	intermediary	
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5 Check only if there is NO Interested Party.						
6	I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct. CHERYL SPARKS Commission # FF 61732 My Commission Expires October 10, 2017 Signature of authorized agent of contracting business entity					
	Sworm to and subscribed before me, by the said A. TYLY TYANISO , this the day of Lorwary 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					
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