

# CERTIFICATE OF INTERESTED PARTIES

FORM 1295

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**

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

*Lamed facility maintenance* *San Antonio, TX*  
*USA*

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

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 goods or services to be provided under the contract.

*Contract 757*

4 Name of Interested Party	City, State, Country (place of business)	Nature of Interest (check applicable)	
		Controlling	Intermediary
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
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		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

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.



*Eduardo Tijerina*  
 Signature of authorized agent of contracting business entity

Sworn to and subscribed before me, by the said *Eduardo Tijerina*, this the *1st* day of *Jan.*, 20 *16*, to certify which, witness my hand and seal of office.

*Manuel Perez*  
 Signature of officer administering oath

*manuel Perez*  
 Printed name of officer administering oath

*NOTARY PUBLIC*  
 Title of officer administering oath

**ADD ADDITIONAL PAGES AS NECESSARY**