

# 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.**

Advanced Data Processing, Inc., a subsidiary of Intermedix Corporation  
Fort Lauderdale, FL United States

**Certificate Number:**  
2017-182490

**Date Filed:**  
03/24/2017

**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 (TX) a Texas Municipal Corporation

**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.**

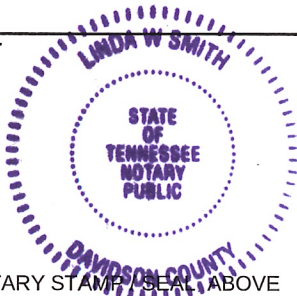
Contract #984  
EMS billing, collection and related consulting services and equipment.

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

**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 SVP and General Counsel, this the 24th day of March, 2017, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Linda W. Smith

Printed name of officer administering oath

Office Coordinator, Notary Public

Title of officer administering oath