Γ	CERTIFICATE OF INTERESTED PAR	RTIES			1205	
				FO	RM 1295	
F	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.  A.T. Staffing/Advance'd Temporaries, Inc.			Certificate Number: 2017-230341		
2	Corpus Christi, TX United States  Name of governmental entity or state agency that is a party to the contract for which the form is being filed.			Date Filed: - 08/28/2017		
	City of Corpus Christi			Date Acknowledged:		
3	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. 1096 Temporary Staffing Services					
4	Name of Interested Party	City, State, Country (place of business)		Nature of Interest (check applicable)		
				Controlling	Intermediary	
					77.77.1.4	
_						
;	Check only if there is NO Interested Party.	***************************************	1	1		
i	AFFIDAVITY OF TEXT AND VE  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 NOTATION FLAMPY SEAL MOVE					
Sworn to and subscribed before me, by the said Marky Goode this the 28 day of June 2011, to certify which, witness my hand and seal of office.					ne.	
Huse Holder Kvisti Holder Pacyol Supervisor Synature of officer administering oath Printed name of officer administering oath Supervisor						