## **CERTIFICATE OF INTERESTED PARTIES**

FORM **1295** 

1 of 1

			1 01 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	
Name of business entity filing form, and the city, state and country of the business entity's place of business.		Certificate Number: 2016-46344		
Shawnee Mission Tree Service, Inc. DBA/ Arbor Masters Tree Service Grand Prairie, TX United States		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 Fort Worth		04/27/2016	O4/27/2016  Date Acknowledged:	
		Date Acknowledg		
3 Provide the identification number used by the description of the services, goods or other pro	governmental entity or state agency to track or identi	ify the contract, and	provide a	
RFP 16-0132 Disaster Debris Co Disaster Debris Collection and Processing				
4 Name of Interested Party	City, State, Country (place of business)	Nature of interes	Nature of interest (check applicable)	
		Controlling	Intermediary	
Keith, Ron	Shawnee, KS United States	X		
5 Check only if there is NO Interested Party.				
6 AFFIDAVIT	I swear, or affirm, under penalty of perjury, that t	he above disclosure is	s true and correct.	
SEREDIA D. TILLMON Nother Public in and for the State of Commission Contraction Commission Contraction Commission Contraction				
AFFIX NOTARY STAMP / SEAL ABOVE			:	
Sworn to and subscribed before me, by the said _20, to certify which, witness my hand an	Terry Day-Presiduat, this the diseal of office.	274 day of	Apric.	
Suedu A Till	SEREDIA D. TICCHON	Notar	7	
Signature of officer administering oath	Printed name of officer administering oath	Title of officer admir	istering oath	