

# 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.**  
 Trion a Marsh & McLennan Agency  
 King of Prussia, PA United States

Certificate Number:  
 2016-121446

Date Filed:  
 10/07/2016

**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

Date Acknowledged:

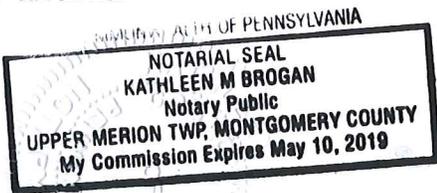
**3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.**  
 16-0294  
 This supercedes certificate 2016-121250 Pharmacy Consulting

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
Gray, Marybeth	King of Prussia, PA United States	X	

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.



*Andrew Neary*  
 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Andrew Neary, this the 7<sup>th</sup> day of October, 2016, to certify which, witness my hand and seal of office.

*Kathleen M Brogan*  
 Signature of officer administering oath

Kathleen M. Brogan  
 Printed name of officer administering oath

Notary  
 Title of officer administering oath