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.		Certificate Number:		
	YMCA of Metropolitan Fort Worth		2016-138726		
	Fort Worth, 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.		11/18/2016		
	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. TBD Neighborhood and Community services in Southeast Fort Worth				
4	Name of Interested Party City, State, Country (place of busing	ess)			
	ACA of Matropoliton Fort World		Controlling	Intermediary	
1	MCA of Metropolitan Fort Worth Fort Worth, TX United States	Ì	X		
				·	
_					
		-			
			· .		
5	Check only if there is NO Interested Party.		<u></u>		
6	AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.				
	CAROLINE D. ROPER Notary Public, State of Texas Comm. Expires 11-19-2017 Notary ID 1104487-1 Signature of authorized agent of contracting business entity				
	AFPIX NOTARY STAMP / SEAL ABOVE Charling H. Riper Sworn to and subscribed before me, by the said				
	Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath				