

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

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

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Bodycote Thermal Processing, Inc., Fort Worth, Texas

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, Texas

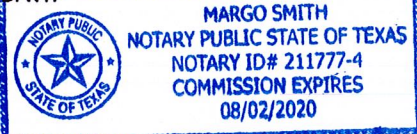
3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

RE Condemnation Relocation Expense Reimbursement

| 4 Name of Interested Party | City, State, Country (place of business) | Nature of Interest (check applicable) | |
|----------------------------|--|---------------------------------------|--------------|
| | | Controlling | Intermediary |
| <i>Bodycote USA, Inc.</i> | <i>Dallas, Texas</i> <i>Dallas County, USA</i> | <input checked="" type="checkbox"/> | |
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5 Check only if there is NO Interested Party. ☐

6 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

[Signature]
Signature of authorized agent of contracting business entity

Sworn to and subscribed before me, by the said *John Orleans*, this the *6th* day of *December*, 20*16*, to certify which, witness my hand and seal of office.

Margo Smith
Signature of officer administering oath

Margo Smith
Printed name of officer administering oath

Notary Public
Title of officer administering oath

ADD ADDITIONAL PAGES AS NECESSARY