

# 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

Certificate Number:  
2017-184037

Date Filed:  
03/28/2017

Date Acknowledged:

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

Stifel, Nicolaus & Company, Incorporated  
San Antonio, TX United States

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.

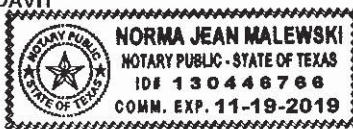
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Investment Banking and Underwriting Services associated with the Rock Creek Public Improvement District

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Kruszewski, Ronald J.	St. Louis, MO United States	X	
	Zemlyak, James M.	St. Louis, MO United States	X	
	Himelfarb, Richard J.	Baltimore, MD United States	X	
	Imhoff, Michael F.	Denver, CO United States	X	
	Kendrick IV, Thomas R.	St. Louis, MO United States	X	
	Mulroy, Thomas P.	Baltimore, MD United States	X	
	Sliney, David D.	St. Louis, MO United States	X	
	Warns III, Hugo J.	Baltimore, MD 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.

*Dan P. Kopinski*  
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said DAN P. Kopinski, this the 28th day of MARCH, 2017, to certify which, witness my hand and seal of office.

*Norma Jean Malewski*  
Signature of officer administering oath

NORMA JEAN MALEWSKI  
Printed name of officer administering oath

Admin. Assistant  
Title of officer administering oath