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: 2017-231946		
	Thompson Consulting Services, LLC		2017 201040			
_	ake Mary, FL 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.		07/05/2017			
	City of Forth 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.					
	Bid Number 17-0282 Disaster Debris Monitoring Services					
4	Name of Indonesia I Burt			Nature of interest		
	Name of Interested Party	ity, State, Country (place of business)		(check ap		
Thompson Holdings, Inc.		Mobile, AL United States		Controlling X	Intermediary	
Hoyle, Jon		Lake Mary, FL United States		Х		
Counsell, Nathaniel		Lake Mary, FL United States		х	*-	
Baker III, John		Mobile, AL United States		X		
Manning, Michael		Mobile, AL United States		Х		
Shumock, James		Mobile, AL United States		×	_	
_					,	
5	Check only if there is NO Interested Party.					
o official of the first of the						
6	6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.					
	KRISTINE CLISBY Notary Public - State of Florida Commission # FF 923726 My Comm. Expires Oct 1, 2019 Bonded through National Notary Assn. Signature of authorized agent of contracting business entity					
AFFIX NOTARY STAMP / SEAL ABOVE						
Sworn to and subscribed before me, by the said <u>for Hoyle</u> , this the <u>Leth</u> day of <u>fully</u> , 20_1, to certify which, witness my hand and seal of office.						
	Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					
	Signature of officer administering oath Printed name of officer administering oath Title bf officer administering oath					