## CERTIFICATE OF INTERESTED PARTIES

FORM 1295

L					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: 2018-390363		
	Safe City Commission Fort Worth, TX United States			Date Filed:		
2	ame of governmental entity or state agency that is a party to the contract for which the form is eing filed.			08/09/2018		
	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.  FY2019 CCPD Advocacy  Advocacy Programs of Safe City Commission					
4	Name of Interested Party	City, State, Country (place of business)		Nature of interest (check applicable)		
				Controlling	Intermediary	
				ę		
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
ı	ty name is Grant Summers , and my date of birth is 01/13/198					
1	dress is 100 Hemphil , Fort Worth , TX , 7604 , USA . (street) (city) (state) (zip code) (country)					
1	I declare under penalty of perjury that the foregoing is true and correct.					
	Executed in					
	Signature of authorized agent of contracting business entity (Declarant)					