## **CERTIFICATE OF INTERESTED PARTIES**

FORM 1295

F					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:		
	Air Evac Ems Inc			2018-417745		
l	Naxahachie, TX United States			Date Filed:		
2	lame of governmental entity or state agency that is a party to the contract for which the form is eing filed.			10/22/2018		
	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.					
	CFW-ELL-CSA Radio OPS					
4			Nature of interest			
	Name of Interested Party City, State, Country (pl	City, State, Country (place of business)			(check applicable)	
				Controlling Intermediary		
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5 Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION					
	y name is, and my date of birth is					
	My address is					
	(street) (city)	(stat	e)	(zip code)	(country)	
declare under penalty of perjury that the foregoing is true and correct.						
	Executed in E//: S County, State of					
	Alexander					
	Signature of authorized agent of contracting business entity (Declarant)					
forms provided by Texas Ethics Commission www.othics.ctata.by us						