CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 1

| | | | | | 1011 | |
|---|--|--|------------|---|----------------------------|--|
| | 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 | lame of business entity filing form, and the city, state and country of the business entity's place | | | Certificate Number: | | |
| | of business. McClendon Construction Company, Inc | | | 2018-424472 | | |
| | Burleson, TX United States | | | Date Filed: | | |
| 2 | Name of governmental entity or state agency that is a party to the contract for which the form is | | 11/12/2018 | | | |
| | being filed. 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 description of the services, goods, or other property to be provided under the contract. | | | | | vide a | |
| | 02706 Westport Parkway Improvements Phase I | | | | | |
| 4 | | | | Nature of interest | | |
| | Name of Interested Party | city, State, Country (place of business) | | (check ap | oplicable) Intermediary | |
| ы | air, Justin | Burleson, TX United States | | X | intermediary | |
| Blair, Byron | | Burleson, TX United States | | X | | |
| McClendon, Dan | | Burleson, TX United States | | Х | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 5 Check only if there is NO Interested Party. | | | | | | |
| 6 UNSWORN DECLARATION | | | | | | |
| | My name is | | | | | |
| | My address is | | | | | |
| | (street) | (city) (st | ate) | (zip code) | (country) | |
| | I declare under penalty of perjury that the foregoing is true and correct. | | | | | |
| | Executed in Tolanson County, State of Tx, on the 12 day of Nov, 2018. | | | | | |
| | (month) (year) | | | | | |
| | Signature of authorized agent of contracting business entity | | | | | |
| | (Declarant) | | | | | |