

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.
XL Specialty Insurance Company
Stanford, CT United States

Certificate Number:
2016-10123

Date Filed:
02/08/2016

Date Acknowledged:

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
City Of San Antonio

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 goods or services to be provided under the contract.

UM00033493MA15A
Inland Marine Insurance Policy

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	XL Reinsurance America, Inc.	Stamford, CT 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.

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
Peggy K. Valihura, Notary Public
Uwchlan Twp., Chester County
My Commission Expires Oct. 10, 2018
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES



Signature of authorized agent of contracting business entity

FFELX NOTARY STAMP SEAL ABOVE


Sworn to and subscribed before me, by the said Sarah B. Mims, this the 8th day of February 20 16, to certify which, witness my hand and seal of office.

Peggy Valihura Peggy Valihura Assistant Secretary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath