

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.

LexisNexis Claims Solutions
Alpharetta, GA United States

Certificate Number:
2016-108558

Date Filed:
09/07/2016

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

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.

6100008014
Annual Contract for LexisNexis Desk Officer Reporting System

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

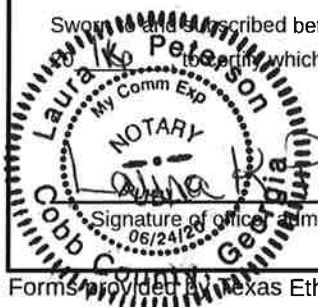
5 Check only if there is NO Interested Party.

6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.


Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn and subscribed before me, by the said William S. Madison, this the 8th day of September
to which, witness my hand and seal of office.




Signature of officer administering oath
Laura K. Peterson Notary Public
Printed name of officer administering oath Title of officer administering oath