

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.

Catholic Life Insurance Building
San Antonio, TX United States

Certificate Number:
2016-115415

Date Filed:
09/22/2016

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.

1635
Lease

4	Name of Interested Party	City, State, Country (place of business)	Nature of Interest (check applicable)	
			Controlling	Intermediary
	CATHOLIC LIFE INSURANCE BLDG	SAN ANTONIO TX 78209 1635 NIELSON 17410		

5 Check only if there is NO interested party. *NO.*

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



Ramiro A. Flores
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ramiro A. Flores, this the 22 day of September 2016, to certify which, witness my hand and seal of office.

Manuel Jimenez Shanna Smith Executive Asst.
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath