

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.

Bob Wells Nursery
 Lindale, TX United States

Certificate Number:
 2016-107809

Date Filed:
 09/02/2016

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 Texas

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.

IFB6100007515
 annual contract for 5-15 gal trees

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Wells, Bob	Lindale, TX 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.



Bob Wells

Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE



Jeannie Tomlinson 9-2-16

Sworn to and subscribed before me, by the said _____
 20_____, to certify which, witness my hand and seal of office.

Jeannie Tomlinson
 Signature of officer administering oath

Jeannie Tomlinson
 Printed name of officer administering oath

Operations Manager
 Title of officer administering oath