|   | CERTIFICATE OF INTERES   | FORM <b>1295</b>   |   |                    |  |
|---|--|--|---|--------------------|--|
| L |  |  |   | 1 of 1             |  |
|   | Complete Nos. 1 - 4 and 6 if there are interested parties.<br>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.   |  | Certificate Number:<br>2016-14296       |                    |  |
|   | Due Amicis, Inc. DBA Green Landscaping San Antonio, 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 being filed.   |  | 02/16/2016  Date Acknowledged:          |                    |  |
|   | 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.  6100007027 |  |   |                    |  |
|   | Annual Contract for DHS Landscaping Services   |  |   |                    |  |
| 4 | Name of Interested Party   | City, State, Country (place of business)   | Nature of interest                      | (check applicable) |  |
|   |  |  | Controlling                             | Intermediary       |  |
| G | reen III, Robert P.  | San Antonio, TX United States  | Х                                       |                    |  |
|   |  |  |   |                    |  |
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| Ļ | Ohaali aulu if thays is NO Intersected Party   |  |   |                    |  |
| 3 | 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. |   |                    |  |
|   | JAMES K SWINDLE NOTARY PUBLIC STATE OF TEXAS MY COMM. EXP. 06-20-2018  | Signature of authorized agent of contracting business entity                                 |   |                    |  |
|   | AFFIX NOTARY STAMP / SEAL ABOVE  |  |   |                    |  |
|   | vorn to and subscribed before me, by the said Robert Po Wahl, this the 16th day of February, 16_, to certify which, witness my hand and seal of office.  |  |   |                    |  |
|   | Signature of Officer administering oath  Tames K Swindle Notary Public  Printed name of officer administering oath  Title of officer administering oath  |  |   |                    |  |