

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.
 AXA ~~Art~~ Insurance Company
 New York, NY United States

Certificate Number:
 2016-12346

Date Filed:
 02/11/2016

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 goods or services to be provided under the contract.
 01-334-42-12-00107
 Inland Marine Policy

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
AXA Art Insurance	New York, NY 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 s true and correct.

Linda Gross
 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Linda Gross, this the 16 day of February, 2016, to certify which, witness my hand and seal of office.

ANN MARIE TESORIERO
 Notary Public, State Of New York
 No.01TE4773969
 Qualified In Richmond County

Ann Marie Tesoriero
 Signature of officer administering oath

Commission Expires
 Printed name of officer administering oath

Title of officer administering oath

7/31/2018