CERTIFICATE OF INTER		F(	10f1
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	
Name of business entity filing form, and the city, state and country of the business entity's place of business. Goodwill Industries of San Antonio		Certificate Number: 2016-11556	
San Antonio, TX United States  Name of governmental entity or state agency that is a party to the contract for which the form is		Date Filed: 02/10/2016	
City of San Antonio		Date Acknowledged:	
description of the goods or services to be 6100006195	the governmental entity or state agency to track or ident provided under the contract.	ify the contract, and	provide a
Name of Interested Party	City, State, Country (place of business)	Nature of interest Controlling	(check applicable
Keever, Mark	San Antonio, TX United States	х	
		<u> </u>	
Check only if there is NO Interested Party.			
DIANA TREVINO My Commission Expires April 25, 2019	Mar street	~	
Sworn to and subscribed before me, by the sa	aid Mark McKeever, this the _	O day of	Februar
	Complete Nos. 1 - 4 and 6 if there are interes Complete Nos. 1, 2, 3, 5, and 6 if there are not Name of business entity filing form, and the of business.  Goodwill Industries of San Antonio San Antonio, TX United States  Name of governmental entity or state ager being filed.  City of San Antonio  Provide the identification number used by description of the goods or services to be 6100006195  Landscape Services (BES)  Name of Interested Party  Keever, Mark  Check only if there is NO Interested Party.  AFFIDAVIT  DIANA TREVINO My Commission Expires April 25, 2019  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the sales.	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.  Name of business entity filing form, and the city, state and country of the business entity's place of business.  Goodwill industries of San Antonio San Antonio, TX United States  Name of governmental entity or state agency that is a party to the contract for which the form is being filled.  City of San Antonio  Provide the identification number used by the governmental entity or state agency to track or ident description of the goods or services to be provided under the contract.  6100006195  Landscape Services (BES)  Name of Interested Party  City, State, Country (place of business)  Keever, Mark  San Antonio, TX United States  Check only if there is NO Interested Party.  I swear, or affirm, under penalty of perjury, that is swear, or affirm, under penalty of perjury, that is signature of authorized agent of contracts.  Signature of authorized agent of contracts and subscribed before me, by the said  MACK Country (this the Swort on and subscribed before me, by the said  MACK Country (this the Swort on and subscribed before me, by the said	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.  Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Colorolling in the parties of parties and country of the business entity's place of parties and parties and parties and parties and parties.  City of San Antonio in the contract, and description of the goods or services to be provided under the contract.  City, State, Country (place of business)  Name of interest Controlling  Check only if there is NO interested Party.  Check only if there is NO interested Party.  I swear, or affirm, under penalty of perjury, that the above disciosure is support to the parties and partie

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath