	CERTIFICATE OF INTERES	FC	DRM 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.  TEXAS WILSON OFFICE FURNITURE & SERVICES San Antonio, TX United States		Certificate Number: 2016-6853 Date Filed:	
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		01/28/2016 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. 6100006733 Office Furniture			
4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (	(check applicable) Intermediary
Lu	una, Michael	San Antonio, TX United States	Х	
				=
5	Check only if there is NO Interested Party.			
6	AFFIDAVIT			
	GEORGIA CANTU MY COMMISSION EXPIRES July 1, 2018  I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.  Signature of authorized agent of contracting business entity			
	AFFIX NOTARY STAMP / SEAL ABOVE			
	Sworn to and subscribed before me, by the said			
	Signature of officer administering oath  Printed name of officer administering oath  Title of officer administering oath			