| | CERTIFICATE OF INTERESTED PAR | FORM 1295 | | | | |
|---|---|---|---|---------------------------|--------------|--|
| L | | | | | 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. COWBOY DODGE | | Certificate Number: 2017-189869 | | | |
| | SILSBEE, TX United States | | | Date Filed: 04/10/2017 | | |
| 2 | being filed. | | | 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. 6100008711 | | | | | |
| | FIRST RESPONDER TRUCK | | | | · | |
| - | Nature of Interest | | | | | |
| 4 | Name of Interested Party | City, State, Country (place of business | | (check ap | | |
| L | | | | Controlling | Intermediary | |
| М | DORE, TOMMY | SILSBEE, TX United States | | x | | |
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| 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. | | | | | |
| | SHIRLEY IRENE PAYNE My Commission Expires April 16, 2019 Signature of authorized agent of contracting business entity | | | | | |
| | Sworn to and subscribed before me, by the said () by by this the day of, to certify which, witness my hand and seal of office. | | | | | |
| | Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath | | | | | |
| | | | | | | |