#### FORM 1295

1 of 1

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	Complete Nos. 1 - 4 and 6 if there are interested parties.       OFFICE USE ONLY         Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.       CERTIFICATION OF FIL				
1	Name of business entity filing form, and the city, state and cour of business.	ntry of the business entity's place		ficate Number:	
	Alamo Architects, Inc.		2017	-262915	
	San Antonio, TX United States		Date I	Filed:	
2	Name of governmental entity or state agency that is a party to the	he contract for which the form is	09/20	)/2017	
	being filed. City of San Antonio TCI		Date /	Acknowledged:	
3	Provide the identification number used by the governmental ent description of the services, goods, or other property to be provi	tity or state agency to track or identify ided under the contract.	the co	ntract, and pro	vide a
	KY050917B Architectural Services for the 2017-2022 General Obligation	Bond Program			
4					f interest
	Name of Interested Party	City, State, Country (place of busine	ess)	and the second se	pplicable) Intermediary
Hi	phtower, Jr., Albert Irby	San Antonio, TX United States		Controlling X	Intermediary
Ľ		Surryinonio, TX Onice States		^	
La	nmers, Gerald	San Antonio, TX United States		х	
Lanford, Michael L. San Antonio, TX United States X					
La	Lawrence, Billy San Antonio, TX United States X				
McGlone, Bobby Michael San Antonio, TX United States X					
5	Check only if there is NO Interested Party.			I	
6	AFFIDAVIT I swear, or	affirm, under penalty of perjury, that the a	above d	disclosure is true	and correct.
	JENNY C. LABELLE. Notary Public, State of Texas Comm. Expires 02-15-2020 Notary ID 126413656 Signature of authorized agent of contracting business entity				
	AFFIX NOTARY STAMP / SEAL ABOVE				
	Sworn to and subscribed before me, by the said				
	Jany Babela Jenny 1,	aBelle			
	Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath				

Forms provided by Texas Ethics Commission

FORM 1295

	1 of 1
JSE	ONLY
ON	OF FILING

	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.		CEF	OFFICE USE	Secret Contraction and Contraction
1	Name of business entity filing form, and the city, state and count of business.	Name of business entity filing form, and the city, state and country of the business entity's place of husiness		Certificate Number: 2017-224310	
	Beaty Palmer Architects Inc.		2011	224010	
	San Antonio, TX United States		Date	Filed:	
2	Name of governmental entity or state agency that is a party to th	e contract for which the form is	06/1	5/2017	
	being filed.				
	City of San Antonio, Transportation & Capital Improvements [	Department	Date	Acknowledged:	
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provide		the co	ontract, and prov	vide a
	RFQ #KY050917B				
	Architectural Services for the 2017-2022 General Obligation E	Bond Program			
4				Nature of	f interest
-	Name of Interested Party	City, State, Country (place of busin	ess)	(check ap	oplicable)
				Controlling	Intermediary
На	awkins, Cory	San Antonio, TX United States		х	
w	'atson, Sarah	San Antonio, TX United States		х	
Be	eaty, Michael	San Antonio, TX United States		х	
Pa	almer, Terry	San Antonio, TX United States		х	
5	Check only if there is NO Interested Party.				
6	AFFIDAVIT			P 1	
I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.					
DEBORAH STANGONI Notary Public, State of Texas Comm. Expires 05-21-2020 Notary ID 10353789 Signature of authorized agent of contracting business entity					
	Sworn to and subscribed before me, by the said, this the				
	Signature of officer administering oath Printed name of officer	officer administering oath T	itle of c	officer administeri	ng oath

#### FORM 1295

1 of 1

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	Complete Nos. 1 - 4 and 6 if there are interested parties.       OFFICE USE ONLY         Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.       CERTIFICATION OF FILING					
1	Name of business entity filing form, and the city, state and coun of business.	Name of business entity filing form, and the city, state and country of the business entity's place of business.		Certificate Number: 2017-221710		
	Chesney Morales Partners, Inc.		2017-2	21/10		
	San Antonio, TX United States		Date Fi	led:		
2	Name of governmental entity or state agency that is a party to the being filed.	e contract for which the form is	06/09/2	2017		
	City of San Antonio - Transportation and Capital Improvemen	ts Department	Date Ac	cknowledged:		
3	Provide the identification number used by the governmental enti description of the services, goods, or other property to be provide	ity or state agency to track or identify ded under the contract.	the con	tract, and prov	ide a	
	KY050917B Architecture and Interior Design Services					
4	Nome of Interacted Destry			Nature of	CALL AND A DECEMBER	
	Name of Interested Party	City, State, Country (place of busin		(check ap		
				Controlling	Intermediary	
Bı	ıba, Elizabeth	San Antonio, TX United States			х	
CI	nesney, Malcolm	San Antonio, TX United States			×	
M	orales, Richard	San Antonio, TX United States	3	×		
	-					
5	Check only if there is NO Interested Party.	L				
6	AFFIDAVIT I swear, or	affirm, under penalty of perjury, that the	above di	sclosure is true	and correct.	
	PATRICIA A. SCHULTE MY COMMISSION EXPIRES March 4, 2019 Signature of authorized agent of contracting business entity					
	AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said <u>RICHARD G. MORALES</u> , this the <u>15</u> <sup>th</sup> day of <u>JUNE</u> , 20 <u>17</u> , to certify which, witness my hand and seal of office.					
	Patricia Q- Schler Park Signature of officer administering oath Printed name of o		SECH itle of offici	cer administerir	ng oath	

					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.		CEF	OFFICE USE	
1	Name of business entity filing form, and the city, state and countr	ry of the business entity's place		ficate Number:	
-	of business.	.,		-262984	
	Debra J. Dockery, Architect, P.C.				
	San Antonio, TX United States			Filed:	
2	Name of governmental entity or state agency that is a party to the being filed.	e contract for which the form is	09/20	0/2017	
	City of San Antonio		Date	Acknowledged:	
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provide		the co	ontract, and prov	vide a
	RFQ#KY050917B 2017-2022				
	Architectural Services				
_				Natura	f interest
4	Name of Interested Party	City, State, Country (place of busin	(229	(check ap	
	hane of merestea r ary	ony) orace, opanny (prace of public	,	Controlling	Intermediary
-					
5	Check only if there is NO Interested Party.				
6		2027 BA 7 10 AV 10 AV 10			
0	AFFIDAVIT I swear, or a	affirm, under penalty of perjury, that the	above	disclosure is true	and correct.
	DINAH ELSA LEADFORD Notary Public, State of Texas Comm. Expires 01-14-2020 Notary ID 11251744	Signature of authorized agent of cont	tracting	business entity	
	AFFIX NOTARY STAMP / SEAL ABOVE				
	Sworn to and subscribed before me, by the said <u>DIDERS</u> 20_1, to certify which, witness my hand and seal of office.	J. Dockery_, this the a	ot	h day of <u>5</u> C	pt_
	Signature of officer administering oath Printed name of o	E, Leadford De	ta itle of d	Cy Publ	ing oath

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	CERTIFICATE OF INTERESTED PA	ARTIES		FOF	ам <b>1295</b> 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.		CE	OFFICE US	
1	Name of business entity filing form, and the city, state and c of business. Douglas Architects, Inc. San Antonio, TX United States	ouglas Architects, Inc.		CERTIFICATION OF FILI Certificate Number: 2017-222903	
2	Name of governmental entity or state agency that is a party to being filed. City of San Antonio - Transpotation & Capital Improvement		Date Filed: /hich the form is 06/13/2017 Date Acknowledged:		
3	Provide the identification number used by the governmental description of the services, goods, or other property to be pr RFQ #KY050917B Architectural Services	entity or state agency to track or identif rovided under the contract.	y the co	ontract, and pro	vide a
4	Name of Interested Party	City, State, Country (place of busi	ness)		f interest pplicable) Intermediary
Do	buglas, Andrew T.	San Antonio, TX United States		Controlling	X
Do	buglas, Melissa M.	San Antonio, TX United States		x	
6	RICHARD L. SCHOFF Notary Public, State of Texas My Commission expires November 12, 2018 ID # 12438937-6	r, or affirm, under penalty of perjury, that the second se			e and correct.
	AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said	SSL Dargue, this the	15	day of	lune.

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	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.		CEI	OFFICE USE	
1	Name of business entity filing form, and the city, state and coun of business.	try of the business entity's place		ificate Number: 7-261502	
	H Munoz and Company, Inc.		2011	-201302	
	San Antonio, TX United States		Date	Filed:	
-		a contract for which the form is		5/2017	
2	Name of governmental entity or state agency that is a party to the being filed.	te contract for which the form is	00/1	5,2011	
	City of San Antonio/Transportation and Capital Improvements	5	Date	Acknowledged:	
3	Provide the identification number used by the governmental entidescription of the services, goods, or other property to be provided RFQ #KY050917B	ity or state agency to track or identify ded under the contract.	/ the co	ontract, and pro	vide a
	Architectural services for the 2017-2022 General Obligation E	Bond Program			
4	Name of Interested Party	City, State, Country (place of busin	10000	Nature o (check ar	f interest
	Name of interested Party	City, State, Country (place of busin	(55)	Controlling	Intermediary
н	Munoz and Company, Inc.	San Antonio, TX United States		X	Internetitary
1					
_					
5	Check only if there is NO Interested Party.				
6	AFEIDAVIT ALICIA RAMIREZ Notary Public State of Texas My Comm. Exp. 02-20-2018	affirm, under penalty of perjury, that the	~		e and correct.
	Sworn to and subscribed before me, by the said Geof Edwards 20, to certify which, witness my hand and seal of office	ards, this the _1		day of _ <u>Se</u>	
		Ramirez		FO, Principa	

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## FORM 1295

			1 of 1		
Complete Nos. 1 - 4 and 6 if there are interested parties.		OFFICE USE	and a second second		
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.		CERTIFICATION	OF FILING		
1 Name of business entity filing form, and the city, state and coun of business.	try of the business entity's place	Certificate Number: 2017-263771			
Marmon Mok, LP		Data Ellada			
San Antonio, TX United States 2 Name of governmental entity or state agency that is a party to th	as contract for which the form is	Date Filed: 09/21/2017			
being filed.		1			
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 services, goods, or other property to be provided under the contract.				
RFQ #KY050917B					
Architectural Services					
4			finterest		
Name of Interested Party	City, State, Country (place of busine	ess) (check ap Controlling	pplicable) Intermediary		
	Con Antonio TV United States		Intermediary		
Souter, Stephen	San Antonio, TX United States	X			
Reeves, William	San Antonio, TX United States	x			
Houston, Gregory	San Antonio, TX United States	х			
5 Check only if there is NO Interested Party.	/				
6 AFFIDAVIT	affirm, under penalty of perjury, that the	above disclosure is true	e and correct.		
DEBORAH K. RIVERA Notary Public, State of Texas Comm. Expires 04-05-2020 Notary ID 128946765 Signature of authorized agent of contracting business entity					
AFFIX NOTARY STAMP / SEAL ABOVE					
Sworn to and subscribed before me, by the said $\underline{Snisnt}$ 20, to certify which, witness my hand and seal of office.	Harkiepicz, this the	<u>2</u> day of <u>5</u>	ptember.		
Signature of officer administering oath Printed name of		dministrative itle of officer administeri	Assistant ing oath		

## FORM 1295

		1 of 1		
Complete Nos. 1 - 4 and 6 if there are interested parties.	OFFIC	E USE ONLY		
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.	CERTIFICA	TION OF FILING		
<ol> <li>Name of business entity filing form, and the city, state and country of the of business.</li> </ol>	business entity's place Certificate Nui 2017-229526			
Piwonka Sturrock Architects, LLC	2011-529250			
San Antonio, TX United States	Date Filed:			
2 Name of governmental entity or state agency that is a party to the contract	ct for which the form is 06/27/2017			
being filed.	Data Aaknowl	,		
City of San Antonio	Date Acknowl	eagea:		
3 Provide the identification number used by the governmental entity or stat description of the services, goods, or other property to be provided unde	e agency to track or identify the contract, a r the contract.	nd provide a		
RFQ#KY050917B Architectural Services for the 2017-2022 General Obligation Bond Pro	ogram			
	-			
4 Name of Interested Party City, St		ature of interest heck applicable)		
	Contro			
Piwonka, Victoria San A	Antonio, TX United States X			
Sturrock, Barry San A	Antonio, TX United States X			
	N			
5 Check only if there is NO Interested Party.				
6 AFFIDAVIT I swear, or affirm, un	der penalty of perjury, that the above disclosur	e is true and correct.		
ANGIE ESPINOZA Notary Public STATE OF TEXAS My Comm. Exp. 10-14-18 Notary Public STATE OF TEXAS				
AFFIX NOTARY STAMP / SEAL ABOVE BODDUL TUKKACK OQL				
Sworn to and subscribed before me, by the said	$\frac{1}{2}$ , this the $2000$ day of $\frac{1}{2}$	or <u>vmn</u> ,		
Angie Espinoza	Re/ationship	Manazos		
Signature of officer administering oath Printed name of officer adm	ministering oath Title of officer adm			
BCKar (ounty, STATEOFTEXAS	_	-		

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Version V1.0.883

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 CERTIFICATION		
<ol> <li>Name of business entity filing form, and the city, state and cour of business.</li> <li>Rehler Vaughn &amp; Koone, Inc.</li> <li>San Antonio, TX United States</li> </ol>	of business. Rehler Vaughn & Koone, Inc.			
<ul> <li>Name of governmental entity or state agency that is a party to the being filed.</li> <li>City of San Antonio</li> </ul>	Date Filed: 09/21/2017 Date Acknowledged:			
Provide the identification number used by the governmental end description of the services, goods, or other property to be provin KY050917B Architectural Services	tity or state agency to track or identify ded under the contract.	the contract, and prov	vide a	
4 Name of Interested Party	City, State, Country (place of busine	Nature of ess) (check ap Controlling		
Wolf, Kimberley	San Antonio, TX United States	X	· · · ·	
Zimmerman, Judith	San Antonio, TX United States	х		
Bomersbach, David	San Antonio, TX United States	х		
Vaughn, George	San Antonio, TX United States	x		
Charle and Mitchens in NO Internet of Darts				
5 Check only if there is NO Interested Party.				
6       AFFIDAVIT         Image: Subscribed before me, by the said       I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.         Image: Subscribed before me, by the said       I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.         Image: Subscribed before me, by the said       I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.				
20, to certify which, witness my hand and seal of office.	Janysek	Boo K Kee De itle of officer administeri	27	

Forms provided by Texas Ethics Commission

Version V1.0.3337

#### **CERTIFICATE OF INTERESTED PARTIES TEC FORM 1295**

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 FIL CERTIFICATION OF FIL CERTIFICATION OF FIL CERTIFICATION OF FIL Certificate Number: 2017-222919         1 Name of business entity filing form, and the city, state and country of the business entity's place of business. Robey Architecture, Inc. San Antonio, TX United States       OFFICE USE ONLY CERTIFICATION OF FIL Certificate Number: 2017-222919         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's Transportation and Capital Improvements       Date Filed: 06/13/2017         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. RFQ #KY050917B Professional Architectural Services       Nature of interest (check applicable)         4       Name of Interested Party       City, State, Country (place of business)       Nature of interest (check applicable)	CERTIFICATE OF INTERESTED	PARTIES	FOR	м 1295
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Certificate Number: Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Certificate Number: Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Certificate Number: Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Certificate Number: Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Certificate Number: Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Certificate Number: Certificate Number: Certificate Number: Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Certificate Number: Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Certificate Number: Certificate N				1 of 1
of business.       2017-222919         Robey Architecture, Inc.       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.       Date Filed:         City of San Antonio's Transportation and Capital Improvements       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.       RFQ #KY0509178         Professional Architectural Services       City, State, Country (place of business)       Nature of interest (check applicable)         4       Name of Interested Party       City, State, Country (place of business)       Controlling         5       Check only if there is NO Interested Party.       X       S         5       AFFIDAVIT       I swear, or affirm, under penalty of perjury. Hat the above disclosure is true and corr         JOYCE VANESSA SOFELI       State of Baxes       Mature of City, State of Baxes		arties.		
Name of governmental entity or state agency that is a party to the contract for which the form is     De/13/2017     Date Acknowledged:     Ob/13/2017     Date Acknowledged:     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.     RFQ #KY050917B     Professional Architectural Services     Name of Interested Party     City, State, Country (place of business)     (check applicable)     Controlling Interest     (check applicable)     Controlling Interest     (check applicable)     S     Check only if there is NO Interested Party.     I swear, or affirm, under penalty of perjury, that the above disclosure is true and corr     Morry Public, State of Barky     I swear, or affirm, under penalty of perjury, that the above disclosure is true and corr     May or mission Explore	of business. Robey Architecture, Inc.	and country of the business entity's place	2017-222919	
being filed.     City of San Antonio's Transportation and Capital Improvements     Date Acknowledged:     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.     RFQ #KY0509178     Professional Architectural Services     Name of Interested Party     City, State, Country (place of business)     Nature of interest     Controlling Interme     Controlling Interme     Description     S Check only if there is ND Interested Party.     S     AFFIDAVIT     I swear, or affirm, under penalty of periury, that the above disclosure is true and corr     My Corminison Explore     JoyCE VANESSA SOEL     My Cormission Explore     JoyCE VANESSA SOEL		norty to the contract for which the form is	and the second second second second	
description of the services, goods, or other property to be provided under the contract. RFQ #KY050917B Professional Architectural Services      Aname of Interested Party      City, State, Country (place of business)     Controlling Interme      Controlling Interme      Description      Source of the services of the services      Source of the services of t	being filed.			:
Name of Interested Party     City, State, Country (place of business)     (check applicable)     Controlling     Interme	description of the services, goods, or other property to RFQ #KY050917B		y the contract, and pro	ovide a
City, State, Country (place of business)     (check applicable)     Controlling     Interme     I	4		Nature o	of interest
	* Name of Interested Party	City, State, Country (place of busin	ness) (check a	pplicable)
6 AFFIDAVIT I swear, or affirm, under penalty of perjury that the above disclosure is true and corr JOYCE VANESSA SOELL Notary Public, State of Texas My Commission Expires January 30, 2019	-		Controlling	Intermediary
6 AFFIDAVIT I swear, or affirm, under penalty of perjury that the above disclosure is true and corr JOYCE VANESSA SOELL Notary Public, State of Texas My Commission Expires January 30, 2019	(* ) ) - 92			
6 AFFIDAVIT I swear, or affirm, under penalty of perjury that the above disclosure is true and corr JOYCE VANESSA SOELL Notary Public, State of Texas My Commission Expires January 30, 2019				
6 AFFIDAVIT I swear, or affirm, under penalty of perjury that the above disclosure is true and corr JOYCE VANESSA SOELL Notary Public, State of Texas My Commission Expires January 30, 2019				
6 AFFIDAVIT I swear, or affirm, under penalty of perjury that the above disclosure is true and corr JOYCE VANESSA SOELL Notary Public, State of Texas My Commission Expires January 30, 2019				
6 AFFIDAVIT I swear, or affirm, under penalty of perjury that the above disclosure is true and corr JOYCE VANESSA SOELL Notary Public, State of Texas My Commission Expires January 30, 2019				
6 AFFIDAVIT I swear, or affirm, under penalty of perjury that the above disclosure is true and corr JOYCE VANESSA SOELL Notary Public, State of Texas My Commission Expires January 30, 2019				
6 AFFIDAVIT I swear, or affirm, under penalty of perjury that the above disclosure is true and corr JOYCE VANESSA SOELL Notary Public, State of Texas My Commission Expires January 30, 2019				
JOYCE VANESSA SOELL Notary Public, State of Texas January 30, 2019	5 Check only if there is NO Interested Party.			
	JOYCE VANESSA SOELL Notary Public, State of Texas My Commission Expites		~	>
AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said Poper Archotrestruk, this the <u>1.3</u> day of <u>June</u> 20_17_, to certify which, witness my hand and seal of office.	Sworn to and subscribed before me, by the said		1.3 day of	<u>line</u> .
Ocicle         Oppendix         Oppendix         Oppendix         Oppendix         Oppendix         Title of officer administering oath         Title of officer administering oath         Title of officer administering oath         Version VI	00			ring oath ersion V1.0.883

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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			
<ol> <li>Name of business entity filing form, and the city, state and country of the business entity's place of business.</li> <li>Seventh Generation Design, Inc.</li> <li>San Antonio, TX United States</li> </ol>		Certificate Number: 2017-224785 Date Filed:			
<ul> <li>Name of governmental entity or state agency that is a party to the being filed.</li> <li>Clty of San Antonio</li> </ul>	06/16/2017 Date Acknowledged:				
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. RFQ#KY050917B Architectural Services					
4 Name of Interested Party	City, State, Country (place of busine	Nature of interest (check applicable) Controlling Intermediary			
Carpenter, Scott	San Antonio, TX United States	X			
Pam, Carpenter	San Antonio, TX 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 is true and correct.         I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.         I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.         I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.         I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.         I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.         I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.         I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.         I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.         I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.         I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.         I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.         I swear, or affirm, under penalty of perjury.         I swear, or affirm, under penalty of perjury.         I swear, or affirm, under penalty of perjury.         I swear.         I swear.         I swear.         I swear.         I swear.					
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath Title of officer administering oath					

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Version V1.0.883

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FORM 1295

L					1 of 1	
Γ	Complete Nos. 1 - 4 and 6 if there are interested parties.			OFFICE US	EONLY	
	Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.		CE	<b>CERTIFICATION OF FILING</b>		
1	1 Name of business entity filing form, and the city, state and country of the business entity's place of business.			ficate Number: 7-263143		
	Madeline Anz Slay Architecture, LLC (dba SLAY Architecture	e)				
	San Antonio, TX United States			Filed:		
2	2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.			09/20/2017		
				Date Acknowledged:		
3	Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a lescription of the services, goods, or other property to be provided under the contract.					
	KY050917B Arch Srvcs Bond 2017					
	Full Architectural Design Service, Project Management, Cons	struction Observation				
4				Nature o	f interest	
[	Name of Interested Party	City, State, Country (place of business			oplicable)	
┝				Controlling	Intermediary	
S	ay, Madeline	San Antonio, TX United States		х		
Γ						
F						
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-						
-						
L	Chaste only if there is NO Interests of Destry					
5	Check only if there is NO Interested Party.					
6	AFFIDAVIT I swear, or a	affirm, under penalty of perjury, that the	above	disclosure is true	e and correct.	
	MYRA A. RODRIGUEZ Notary Public, State of Texas Comm. Expires 08-22-2020 Notary ID 126637656 AFFIX NOTARY STAMP / SEAL ABOVE					
	Sworn to and subscribed before me, by the said <u>WADELINE SLAY</u> , this the $20^{HH}$ day of <u>SEPTEMBER</u> .					
	20, to certify which, witness my hand and seal of office.					
h	Mya Rodin MYRAA.R	ODRIGUEZ ADI	MIN	. ASST.		
	Signature of officer administering oath Printed name of o	officer administering oath Ti	tle of o	officer administeri	ng oath	
Foi	ms provided by Texas Ethics Commission www.eth	lics.state.tx.us		Ver	sion V1.0.3337	

Forms provided by Texas Ethics Commission

	CERTIFICATE OF INTERESTED PART	IES	FOR	м 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 FILI			
1	L Name of business entity filing form, and the city, state and country of the business entity's place of business. WestEast Design Group, LLC		Certificate Number: 2017-210311		
	San Antonio, TX United States		Date Filed: 05/19/2017 Date Acknowledged:		
2	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 - Transportation & Capital Improvements				
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.				
	RFQ #KY050917B Architectural Services for the 2017-2022 General Obligation Bo	ond Program			
4	Name of Interested Party City, State, Country (place of business)			Nature of interest (check applicable)	
		, , , , , , , , , , , , , , , , , , ,	Controlling	Intermediary	
5	Check only if there is NO Interested Party.				
6		ffirm, under penalty of perjury, that the	above disclosure is true	e and correct.	
	MICHELLE TREMBLAY Notary ID #131108576 My Commission Expires April 28, 2021 Signature of authorized agent of contracting business entity				
	AFFIX NOTARY STAMP / SEAL ABOVE	)	<b>04</b>		
	Sworn to and subscribed before me, by the said CHRISTOPHER KIMM this the 19 day of May, 20 , 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				
For	Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.0.883				