## **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	nuoo t	itry of the business entity's place	Certificate Number:			
	of business.  Clark Construction of Texas, Inc.	of business.			2017-261613		
	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			09/18/2017			
being filed.			a				
City of San Antonio, Texas				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.						
	23-01760-02-05-0201						
	2018 Asphalt Overlay Contract Package 2						
4					Nature o	f interest	
4	Name of Interested Party		City, State, Country (place of business)				
					Controlling	Intermediary	
Clark, David		San Antonio, TX United States		×			
CI	lark, Corey		San Antonio, TX United States		×		
					-		
				1			
5	Check only if there is NO Interested Party.					-	
6	AFFIDAVIT I swe	ear. or	affirm, under penalty of perjury, that the	ahove	disclosure is true	and correct.	
	CORE D		And the second s				
	THEONA RICHARDS Notary ID # 128270780		Salana an				
My Commission Expires							
	May 14, 2018	Signature of authorized agent of cent	cacmio	Province entity	AND DESCRIPTION OF THE PARTY OF		
				The second second	and the same		
	AFFIX NOTARY STAMP / SEAL ABOVE						
Sworn to and subscribed before me, by the saidSIDNEY_HOUNG, this theI97Hday of _SEP 20I, to certify which, witness my hand and seal of office.						EPT	
						2 2	
					* *		
	200						
	Theorem	m.	Richards	lota	in Dihl	10	
		DESIGNATION DESIGNATION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACT	Marin	tle of of	ffice administeria	ng oath	
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