| CERTIFICATE OF INTERESTED PAR  | TIES                                    | FOR                                | м 1295       |
|--|---|------------------------------------|--------------|
|  |   |                                    | 1 of 1       |
| Complete Nos. 1 - 4 and 6 if there are interested parties.<br>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.   |   | Certificate Number:<br>2017-256250 |              |
| Credit Human Federal Credit Union<br>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<br>being filed.  |   | 09/01/2017                         |              |
| City of San Antonio  |   | 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.  0064400000jgIR7  Application for a tay shatement and Chapter 380 Grant to assist with the cost of cubic improvements associated with a project.   |   |                                    |              |
| Application for a tax abatement and Chapter 380 Grant to assist with the cost of public improvements associated with a project.  |   |                                    |              |
| Name of Interested Party City, State, Country (place o   |   |                                    | f interest   |
|  |   | Controlling                        | Intermediary |
| Martin & Drought, P.C.   | San Antonio, TX United States           |                                    | Х            |
| Silver Ventures, Inc.  | San Antonio, TX United States           |                                    | ×            |
|  |   |                                    |              |
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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.   |   |                                    |              |
| KIMBERLY M. HERNANDEZ Notary Public STATE OF TEXAS My Comm. Exp. 07/11/2018  AFFIX NOTARY STAMP / SEAL ABOVE   |   |                                    |              |
| Sworn to and subscribed before me, by the said \( \left\) \( \left |   |                                    |              |
| Signature of officer administering oath  Manual 2  Printed name of officer administering oath  Title of officer administering oath   |   |                                    |              |