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 | | |
| Name of business entity filing form, and the city, state and country of the business entity's place of business. | | | | Certificate Number: | | |
| Southwest Erosion Control, Inc. | | | | 2016-72230 | | |
| McKinney, TX United States | | | | | | |
| 2 Name of governmental entity or state agency that is a party to the contract | | | | Date Filed: | | |
| | | | | 06/16/2016 | | |
| Collin County | | | | Date Acknowledged: | | |
| | | | 1 | | | |
| 3 Provide the identification number used description of the services, goods, or or | OV the governmental en | tibl or ctota cooperate | | | | |
| | her property to be provi | ided under the contract. | dentify the | contract, and pro | vide a | |
| 1FB 2016-021 Renewal 1 | | | | | | |
| Service, Erosion Control & Hydromulc | n | | | | | |
| | | | | | | |
| 4 | | | W | Nature of interest | | |
| Name of Interested Party | | City, State, Country (place of business) | | (check applicable) | | |
| | | | • | Controlling | Intermediary | |
| | | | · · · · · · · · · · · · · · · · · · · | 1 | intermediary | |
| | | | | | | |
| | | | | | | |
| | W.1. | | | | | |
| | | | | | | |
| | | | | } | | |
| | | | · · · · · · · · · · · · · · · · · · · | | | |
| | | | | | | |
| | | | ······································ | | | |
| | | | | | | |
| | | | ······ | | | |
| | | | İ | | | |
| | | | | | | |
| | | | | ĺ | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Charle and italy | | | | | | |
| Check only if there is NO Interested Party. | X | | | | | |
| AFFIOA | <u> </u> | | | | | |
| AFFIDAVIT | swear, or a | ffirm under nepalty of porture the | | | | |
| | -73 | iffirm, under penalty of perjury, that | at the above | disclosure is true | and correct. | |
| CAROLYN J. WILLIAMS | | | | | | |
| History Public, Store of Texa My Commission Expres | 5 | 18415/ | onoration. | |] | |
| November 10, 2018 | | 7200 | | | ļ | |
| The state of the s | | Signature of authorized agent of | Contracting | business earity | | |
| AFFIX NOTATION | | | · somacing | pasiness entity | l | |
| AFFIX NOTARY STAMP / SEAL ABOVE | | | | | ĺ | |
| | | | | | | |
| Sworn to and subscribed before me, by the said MATTHEW EDGIEMON, this the 16 day of JUNE, | | | | | | |
| 20 16 to certify which, witness my hand and seal of office. | | | | | | |
| | | | | | I | |
| | | | | | 1 | |
| - Clarit and in | 0 | . 7 (.) | | | 1 | |
| Signature of office Identity | - CAROLY. | DJ. WILLIAMS | 20 p | UTROLLER | _ | |
| Signature of officer administering oath | Printed name of off | icer administering oath | Title of off | icer administering | oath | |
| ms provided by Texas Ethics Commission | | | | g | | |
| Provided by Texas Ethics Commission | MANNA ethic | e etato ty ue | | | | |