CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 1

| L | | | | | 1011 | |
|---|---|--|--|--|---------------------------|--|
| | 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. | | | Certificate Number: | | |
| | EDALCO - Fort Worth, TX | | | 2025-1312713 | | |
| | ort Worth, TX United States | | | Date Filed: | | |
| 2 | lame of governmental entity or state agency that is a party to the contract for which the form is | | | 05/20/2025 | | |
| ľ | eing filed. | | | | | |
| | n County | | | Date Acknowledged: | | |
| 3 | vide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a cription of the services, goods, or other property to be provided under the contract. | | | | | |
| | 2023-398 CCADF Medical Mental | | | | | |
| | Added scope to Construction project. | | | | | |
| 4 | No. | Oite State On the City | | Nature of interest | | |
| | Name of Interested Party | City, State, Country (place of business) | | (check applicable) | | |
| \vdash | | | | Controlling | Intermediary | |
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| 5 Check only if there is NO Interested Party. | | | | | | |
| 6 | UNSWORN DECLARATION | | | | | |
| | | | | | | |
| | My name is Will Burgess | Will Burgess, and my date of birth is | | | | |
| | My address is | | | | | |
| | (street) | (city) | (state) | (zip code) | (country) | |
| | I declare under penalty of perjury that the foregoing is true and correct. | | | | | |
| | Everyted in Tarrant Count | ty, State of, on the | . 20 | May | 25 | |
| | Executed in Count | y, State of, on the | ne <u>∠U</u> | day of(month) | , 20 <u></u> 5. (year) | |
| | V | Vill Burgess | lly signed by Wi =US, E=wburge truction, OU=SE 2025.05.20 16: | ess@sedalco.com, O=SEDA EDALCO Construction, CN=\ | ALCO Will Burgess | |
| | Signature of authorized agent of contracting business entity (Declarant) | | | | | |
| | (Decoration) | | | | | |