

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**

Certificate Number:
 2019-450044

Date Filed:
 02/07/2019

Date Acknowledged:
 04/15/2019

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Lina T. Ramey and Associates, Inc.
 Farmers Branch, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas

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.

PBW-2019-00009464
 Professional Design Services for Wheatland Road from City Limits to University Hills (PB17V145)

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Ramey, Lina	Farmers Branch, TX United States	X	

5 Check only if there is NO Interested Party.
☐
6 UNSWORN DECLARATION

My name is _____, 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.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
 (month) (year)

 Signature of authorized agent of contracting business entity
 (Declarant)

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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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.

Refugee Services of Texas
Dallas, TX United States

Certificate Number:
2020-649969

Date Filed:
07/28/2020

Date Acknowledged:
09/23/2020

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas

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.

HOU-2020-00014210

Cares Act Funding Rental Assistance

[illegible]

5 Check only if there is NO Interested Party.

--	--

6 UNSWORN DECLARATION

My name is _____, 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.

Executed in _____ County, State of _____, on the ____ day of _____, 20____.

(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

CERTIFICATE OF INTERESTED PARTIES**FORM 1295**

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**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.**

United Way of Metropolitan Dallas, Inc.
 Dallas, TX United States

Certificate Number:

2020-650251

Date Filed:

07/28/2020

Date Acknowledged:

09/23/2020

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas

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.

HOU-2020-00014211

Short-term Rental Assistance 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 UNSWORN DECLARATION**

My name is _____, 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.

Executed in _____ County, State of _____, on the _____ day of _____, 20_____
 (month) (year)

 Signature of authorized agent of contracting business entity
 (Declarant)

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CERTIFICATION OF FILING**

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Voice of Hope Ministries
Dallas, TX United States

Certificate Number:

2020-651158

Date Filed:

07/30/2020

Date Acknowledged:

09/23/2020

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas

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.

HOU-2020-00014212

Residential Rental Assistance

[illegible]

5 Check only if there is NO Interested Party.



6 UNSWORN DECLARATION

My name is _____, 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.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.

(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

CERTIFICATE OF INTERESTED PARTIES**FORM 1295**

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**OFFICE USE ONLY
CERTIFICATION OF FILING**

Certificate Number:
 2019-520075

Date Filed:
 07/23/2019

Date Acknowledged:
 10/28/2019

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

THALLE CONSTRUCTION CO., INC
 ALVARADO, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

CITY OF DALLAS

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.

DWU-2019-00010964

DWU Contract 19-399/400 Part I Water and Wastewater Improvements and Part II and Stormwater Improvements

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 UNSWORN DECLARATION**

My name is _____, 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.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
 (month) (year)

 Signature of authorized agent of contracting business entity
 (Declarant)

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**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.

Camino Construction, LP
Lewisville, TX United States

Certificate Number:
2018-434639

Date Filed:
12/17/2018

Date Acknowledged:
10/14/2019

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas Texas

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.

PBW-2019-00009022

Street Group 12-465 - Water, Wastewater, Drainage, and Paving Rehabilitation

[illegible]

5 Check only if there is NO Interested Party.

☐

6 UNSWORN DECLARATION

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My address is _____, _____, _____, _____, _____.

(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.

(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

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**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.

Ford Audio-Video Systems, LLC
Oklahoma City, OK United States

Certificate Number:
2020-657167

Date Filed:
08/14/2020

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas

Date Acknowledged:
09/23/2020

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.

BHZ1501

Maintenance services and inspections for the Dallas Love Field Airport

[illegible]

5 Check only if there is NO Interested Party.

☒

6 UNSWORN DECLARATION

My name is _____, 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.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.

(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

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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.

OH MAPLEWOOD, LP
Austin, TX United States

Certificate Number:
2020-575192

Date Filed:
01/08/2020

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas

Date Acknowledged:
09/23/2020

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.

DEV-2020-00012486

Contract Description: ABAN – Utility, Avigation and Wastewater Easement - LOG NO. 46395- OH Maplewood, LP (CITY BLOCK 5706)

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Hughes, Craig	Austin, TX United States	X	
	Oden, Steve	Austin, TX United States	X	

5 Check only if there is NO Interested Party.

☐
6 UNSWORN DECLARATION

My name is _____, 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.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

CERTIFICATE OF INTERESTED PARTIES

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**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.

Frito-Lay, Inc.
Plano, TX United States

Certificate Number:
2019-556041

Date Filed:
10/28/2019

Date Acknowledged:
09/23/2020

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas

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.

DEV-2020-00011790

ABAN-LOG#48576- BLOCK#2/8018 Date Requested: 10/1/2019 Requested by: Norma Morales

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 UNSWORN DECLARATION

My name is _____, 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.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

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1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

6070 NCX LLC
 Dallas, TX United States

Certificate Number:
 2020-622271

Date Filed:
 05/21/2020

Date Acknowledged:
 09/23/2020

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas

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.

DEV-2019-00011427
 Easement Abandonment

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 UNSWORN DECLARATION**

My name is _____, 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.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
 (month) (year)

 Signature of authorized agent of contracting business entity
 (Declarant)

CERTIFICATE OF INTERESTED PARTIES**FORM 1295**

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 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.**

Presbyterian Village North
 Dallas, TX United States

Certificate Number:
 2020-594640

Date Filed:
 03/03/2020

Date Acknowledged:
 09/23/2020

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas

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.

DEV-2020-00012723
 Abandonment of two waste water easements

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 UNSWORN DECLARATION**

My name is _____, 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.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
 (month) (year)

 Signature of authorized agent of contracting business entity
 (Declarant)

CERTIFICATE OF INTERESTED PARTIES

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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**

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Worth Trinity LLC
Dallas, TX United States

Certificate Number:
2020-633786

Date Filed:
06/18/2020

Date Acknowledged:
09/23/2020

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas

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.

49361

DEV-2018-00006207 Partial Winnetka Avenue Abandonment

[illegible]

5 Check only if there is NO Interested Party.

☐

6 UNSWORN DECLARATION

My name is _____, 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.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.

(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

CERTIFICATE OF INTERESTED PARTIES**FORM 1295**

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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**

Certificate Number:
2019-565432

Date Filed:
11/27/2019

Date Acknowledged:
09/23/2020

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Big Outdoor Texas, LLC
 Dallas, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas

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.

None Given
 ROW License

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Santos, Martinez	DALLAS, TX United States		X
	Erin, Watkins	DALLAS, TX United States	X	
	Bradley, Berkley	DALLAS, TX United States	X	
	Big Outdoor Opco, LLC	DALLAS, TX United States	X	

5 Check only if there is NO Interested Party.
☐
6 UNSWORN DECLARATION

My name is _____, 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.

Executed in _____ County, State of _____, on the _____ day of _____, 20____
 (month) (year)

 Signature of authorized agent of contracting business entity
 (Declarant)

CERTIFICATE OF INTERESTED PARTIES**FORM 1295**

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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**

Certificate Number:
 2020-624240

Date Filed:
 05/27/2020

Date Acknowledged:
 09/23/2020

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Regional Black Contractors Association of North TX
 Dallas, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas

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.

BR20-00012921
 City of Dallas-TDCJ Re-entry Services Program (Workforce Training & Placement)

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Bailey-Jackson, Monica	Dallas, TX United States		X
	Regional Black Contractors Association Community	Dallas, TX United States		X
	Law Offices of Charles A. Caldwell, PLLC	Dallas, TX United States		X
	First Step Community Empowerment, Inc.	Dallas, TX United States		X
	Proctor, John	Dallas, TX United States	X	
	Shaw, Kimberly	Dallas, TX United States	X	

5 Check only if there is NO Interested Party.
☐
6 UNSWORN DECLARATION

My name is _____, 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.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
 (month) (year)

 Signature of authorized agent of contracting business entity
 (Declarant)

CERTIFICATE OF INTERESTED PARTIES

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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.

Kimley-Horn and Associates, Inc.
Dallas, TX United States

Certificate Number:
2020-633774

Date Filed:
06/18/2020

Date Acknowledged:
09/23/2020

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas

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.

FHO-2019-00011518

ADA Transition Plan – Phase 2

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	McEntee, David L	Dallas, TX United States	X	
	Lefton, Steve	Dallas, TX United States	X	
	Cook, Richard N	Dallas, TX United States	X	
	Atz, John	Dallas, TX United States	X	

5 Check only if there is NO Interested Party.

9

6 UNSWORN DECLARATION

My name is _____, 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.

Executed in _____ County, State of _____, on the ____ day of _____, 20____.

(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

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Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

**OFFICE USE ONLY
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1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

CND-West Davis II, LLC
Dallas, TX United States

Certificate Number:
2020-608208

Date Filed:
04/15/2020

Date Acknowledged:
09/23/2020

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas

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.

Dev-2019-00010429
Easement Abandonment

[illegible]

5 Check only if there is NO Interested Party.

☒

6 UNSWORN DECLARATION

My name is _____, 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.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.

(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

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Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

**OFFICE USE ONLY
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1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Southwestern Medical District
Dallas, TX United States

Certificate Number:
2019-533949

Date Filed:
08/28/2019

Date Acknowledged:
09/23/2020

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas

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.

DEV-2019-00011158

Survey work and installation of fiber optics between medical buildings

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Southwestern Medical District	Dallas, TX United States	X	
	Mitchell, Steve	Dallas, TX United States		X
	Kennedy, Russell	Frisco, TX United States		X
	Ponton, CJ	Frisco, TX United States		X
	Prejean, Robert	Dallas, TX United States		X

5 Check only if there is NO Interested Party.

☐

6 UNSWORN DECLARATION

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My address is _____, _____, _____, _____, _____.

(street) (city) (state) (zip code) (country)

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Executed in _____ County, State of _____, on the ____ day of _____, 20 ____.

(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

CERTIFICATE OF INTERESTED PARTIES

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**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.

Bracewell LLP
Houston, TX United States

Certificate Number:
2020-648512

Date Filed:
07/24/2020

Date Acknowledged:
10/05/2020

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas, Texas

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 #BQZ20-00013089
Bond and Disclosure Counsel

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Brooks, Ben	Dallas, TX United States		X
	Bopp, Gregory	Houston, TX United States	X	
	Bailey, Brock	Dallas, TX United States	X	
	Rhebergen, Constance	Houston, TX United States	X	
	Hutt, Jason	Washington D.C., DC United	X	
	Crain, Stephen	Houston, TX United States	X	
	Lewis, Mark	Washington D.C., DC United	X	
	Anderson, William	Houston, TX United States	X	

5 Check only if there is NO Interested Party.

1

6 UNSWORN DECLARATION

My name is _____, 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.

Executed in _____ County, State of _____, on the ____ day of _____, 20____.

(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

CERTIFICATE OF INTERESTED PARTIES**FORM 1295**

1 of 2

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**

Certificate Number:
 2020-648411

Date Filed:
 07/23/2020

Date Acknowledged:
 10/05/2020

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Norton Rose Fulbright US LLP
 Dallas, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas

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.

2020-00013089
 legal services

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Braden, Paul	Dallas, TX United States		X
	Cody, Jeff	Dallas, TX United States	X	
	Giaccia, Andrew	Washington, DC United States		X
	Archer, Judith	New York, NY United States		X
	Clark, Shauna	Houston, TX United States		X
	Martinez, Stacy	Austin, TX United States		X
	Price, Andrew	Houston, TX United States		X
	Rosenberg, Larry	New York, NY United States		X
	Shishima, Gina	Austin, TX United States		X
	Weber, Paul	New York, NY United States		X
	Krumholz, Richard	Dallas, TX United States		X
	Lewis, Gene	Denver, CO United States		X
	Repass, James	Houston, TX United States		X
	Scofield, George	San Antonio, TX United States		X

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 country of the business entity's place of business.

Neel-Schaffer, Inc.
Fort Worth, TX United States

Certificate Number:
2018-429271

Date Filed:
11/29/2018

Date Acknowledged:
03/14/2019

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas

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.

PBW-2019-00008827
Engineering Design

[illegible]

5 Check only if there is NO Interested Party.

☐

6 UNSWORN DECLARATION

My name is _____, 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.

Executed in _____ County, State of _____, on the ____ day of _____, 20____.

(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

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 country of the business entity's place of business.
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AZTEC Engineering Group, Inc.
Phoenix, AZ United States

Certificate Number:
2019-463693

Date Filed:
03/14/2019

Date Acknowledged:
06/18/2019

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Dallas Department of Public Works

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.

PBW-2019-00009477

Professional Civil Engineering Services

[illegible]

5 Check only if there is NO Interested Party.

☒

6 UNSWORN DECLARATION

My name is _____, 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.

Executed in _____ County, State of _____, on the ____ day of _____, 20____.

(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)