	CERTIFICATE OF INTERESTED PART	TIES		FOR	м 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.		CE	OFFICE USE	
1	Name of business entity filing form, and the city, state and count of business.	try of the business entity's pla		ificate Number: 0-612211	
	Bridgefarmer & Associates, Inc. Dallas, TX United States		0.4/0	Filed:	
2	Name of governmental entity or state agency that is a party to the being filed.	e contract for which the form	15	7/2020	
	City of Dallas, Texas			Acknowledged: 5/2020	
3	Provide the identification number used by the governmental enti description of the services, goods, or other property to be provided in the services of the services.		identify the c	ontract, and prov	/ide a
	PBW-2020-00013542 Design Services: Prairie Creek Road at UPRR				
4				Nature of	
•	Name of Interested Party	City, State, Country (place o	of business)	(check ap	<u> </u>
				Controlling	Intermediary
Al	nsan, Mansoor	Dallas, TX United States		Х	
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)			(7in anda)	,
	V	(city)	(state)	(zip code)	(country)
	I declare under penalty of perjury that the foregoing is true and correct				
	Executed inCounty	y, State of	, on the	day of(month)	, 20 (year)
				(month)	(year)
İ		Signature of authorized ager		g business entity	

	CERTIFICATE OF INTERESTED PART	ΓIES		FOR	м 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.		CEI	OFFICE USE		
1	Name of business entity filing form, and the city, state and count of business.	try of the business entity's place		ficate Number: 0-450044		
	Lina T. Ramey and Associates, Inc. Farmers Branch, TX United States		Date	Filed:		
2	Name of governmental entity or state agency that is a party to th	e contract for which the form is		7/2019		
	being filed. City of Dallas			Acknowledged: 5/2019		
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 busin	ness)	Nature of (check ap		
R	amey, Lina	Farmers Branch, TX United Sta	tes	Х	intermediary	
F						
H						
L						
L						
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) (s	itate)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct	t.				
	Executed inCounty	/, State of, on the		day of(month)	, 20 (year)	
		Signature of authorized agent of cor	ntracting	g business entity	====	

CERTIFICATE OF INTERESTED PARTIES FORM 1295 1 of 1 **OFFICE USE ONLY** 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. **CERTIFICATION OF FILING** Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2020-631214 Human Rights Initiative of North Texas Dallas, TX United States Date Filed: 06/12/2020 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Date Acknowledged: City of Dallas 09/23/2020 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-2020-00013748 Rental Assistance to underserved individuals Nature of interest 4 City, State, Country (place of business) (check applicable) Name of Interested Party Controlling Intermediary 5 Check only if there is NO Interested Party. X **6 UNSWORN DECLARATION** and my date of birth is ______, and my date of birth is _ My name 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 ______, on the ____day of _ (month) (year)

CERTIFICATE OF INTERESTED PARTIES FORM 1295 1 of 1 **OFFICE USE ONLY** 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. **CERTIFICATION OF FILING** Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2020-649969 Refugee Services of Texas Dallas, TX United States Date Filed: 07/28/2020 2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Date Acknowledged: City of Dallas 09/23/2020 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 Nature of interest Name of Interested Party City, State, Country (place of business) (check applicable) Controlling Intermediary Х Х Refugee Services of Texas Dallas, TX United States 5 Check only if there is NO Interested Party. **6 UNSWORN DECLARATION** _____, and my date of birth is _____ My name is ____ My address is _____ (city) (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 _ (month) (year) Signature of authorized agent of contracting business entity (Declarant)

•	CERTIFICATE OF INTERESTED PAR	I IE2		FOR	м 1295
					1 of 1
C	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.		CEI	OFFICE USE	
	lame of business entity filing form, and the city, state and coun f business.	try of the business entity's place		ificate Number: 0-650251	
	United Way of Metropolitan Dallas, Inc. Dallas, TX United States		Date	Filed:	
2 N	lame of governmental entity or state agency that is a party to the leing filed.	e contract for which the form is	07/2	8/2020	
	City of Dallas			Acknowledged: 3/2020	
Č	Provide the identification number used by the governmental enti lescription of the services, goods, or other property to be provide		fy the c	ontract, and prov	vide a
	HOU-2020-00014211 Short-term Rental Assistance Program				
4	Name of Interested Party	City, State, Country (place of busi	ness)	Nature of	
	,			Controlling	Intermediary
5 (Check only if there is NO Interested Party.				
6 L	INSWORN DECLARATION				
١	fly name is	, and my date o	of birth is	S	·
N			,	<u> </u>	
	(street)	(city)	(state)	(zip code)	(country)
ı	declare under penalty of perjury that the foregoing is true and correct	ct.			
E	Executed inCount	y, State of, on the	=	day of(month)	, 20 (year)
				•	
	0	Signature of authorized agent of co	ntractin	g business entity	

CERTIFICATE OF INTERESTED PARTIES FORM 1295 1 of 1 **OFFICE USE ONLY** 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. **CERTIFICATION OF FILING** Certificate Number: Name of business entity filing form, and the city, state and country of the business entity's place of business. 2020-651158 Voice of Hope Ministries Date Filed: Dallas, TX United States 07/30/2020 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Date Acknowledged: City of Dallas 09/23/2020 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 Nature of interest 4 (check applicable) City, State, Country (place of business) Name of Interested Party Controlling Intermediary 5 Check only if there is NO Interested Party. X **6 UNSWORN DECLARATION** _____, and my date of birth is _ My name is My address is _____ (city) (state) (zip code) (country) (street) I declare under penalty of perjury that the foregoing is true and correct. Executed in ______, on the ____ (month) (year) Signature of authorized agent of contracting business entity (Declarant)

CERTIFICATE OF INTERESTED PARTIES **FORM 1295 OFFICE USE ONLY** 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. **CERTIFICATION OF FILING** 1 Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2019-520075 THALLE CONSTRUCTION CO., INC ALVARADO, TX United States Date Filed: 07/23/2019 2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Date Acknowledged: CITY OF DALLAS 10/28/2019 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 Nature of interest City, State, Country (place of business) (check applicable) Name of Interested Party Controlling Intermediary 5 Check only if there is NO Interested Party. |X|**6 UNSWORN DECLARATION** ______, and my date of birth is ______ My name is ____ My address is ____ (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 _

(year)

(month)

	CERTIFICATE OF INTERESTED PART	ΓIES		FOR	м 1295
L					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.		CE	OFFICE USE	
1	Name of business entity filing form, and the city, state and count of business.	try of the business entity's place		ificate Number: 8-434639	
	Camino Construction, LP Lewisville, TX United States		0.652.58(0)	Filed: 7/2018	
2	Name of governmental entity or state agency that is a party to th being filed. City of Dallas Texas	e contract for which the form is		: Acknowledged:	
	City of Dallas Texas			4/2019	
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provided PBW-2019-00009022		entify the c	ontract, and pro	vide a
	Street Group 12-465 - Water, Wastewater, Drainage, and Pa	ving Rehabilitation			
4					f interest
	Name of Interested Party	City, State, Country (place of t	iusiness)	(check ap	oplicable) Intermediary
A	yala, Rogelio	Lewisville, TX United States		X	interniediary
l					
L				<u></u>	
5	Check only if there is NO Interested Party.				
6	UNSWORN DECLARATION				
	My name is, and my date of birth is				
l	My address is				·
	(street)	(city)	(state)	(zip code)	(country)
	I declare under penalty of perjury that the foregoing is true and correct	et.			
l	Executed inCount	y, State of, or	the	day of	, 20
				(month)	(year)
	-	Signature of authorized agent o	f contractin	g business entity	

Version V1.0.6711

CERTIFICATE OF INTERESTED PARTIES **FORM 1295** 1 of 1 OFFICE USE ONLY 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. **CERTIFICATION OF FILING** Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2020-657167 Ford Audio-Video Systems, LLC Oklahoma City, OK United States Date Filed: 08/14/2020 Name of governmental entity or state agency that is a party to the contract for which the form is Date Acknowledged: City of Dallas 09/23/2020 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 Nature of interest 4 City, State, Country (place of business) (check applicable) Name of Interested Party Controlling Intermediary 5 Check only if there is NO Interested Party. X **6 UNSWORN DECLARATION** _, and my date of birth is _ My name is ____ My address is ___ (street) (city) (country) I declare under penalty of perjury that the foregoing is true and correct. Executed in ______, on the ____ Signature of authorized agent of contracting business entity (Declarant)

CERTIFICATE OF INTERESTED PARTIES FORM 1295 **OFFICE USE ONLY** 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. **CERTIFICATION OF FILING** 1 Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2016-38437 BAR Constructors, Inc. Lancaster, TX United States Date Filed: 04/11/2016 2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Date Acknowledged: City of Dallas 10/05/2020 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. TWM-2016-00000639 Levee Drainage System Sump A Improvements Nature of interest 4 City, State, Country (place of business) (check applicable) Name of Interested Party Controlling Intermediary 5 Check only if there is NO Interested Party. \square **6 UNSWORN DECLARATION** My name is _ __, and my date of birth is _ My address is (state) (zip code) (country) I declare under penalty of perjury that the foregoing is true and correct. County, State of _____, on the ____day of _ Executed in (month) (year) Signature of authorized agent of contracting business entity

(Declarant)

CERTIFICATE OF IN	NTERESTED PAR	RTIES		FOR	м 1295
					1 of 1
Complete Nos. 1 - 4 and 6 if there at Complete Nos. 1, 2, 3, 5, and 6 if the			CE	OFFICE USE	
		tificate Number: 20-575192			
OH MAPLEWOOD, LP Austin, TX United States				e Filed: 08/2020	
 Name of governmental entity or st being filed. City of Dallas 	ate agency that is a party to t	ne contract for which the form	Date	Acknowledged:	
				23/2020	
3 Provide the identification number description of the services, goods			identify the c	ontract, and pro	vide a
DEV-2020-00012486 Contract Description: ABAN – U 5706)	tility, Avigation and Wastewa	ater Easement - LOG NO. 46	395- OH Ma	ıplewood, LP (C	TY BLOCK
4 Name of Interes	tod Dorty	City, State, Country (place o	f huciness)		f interest oplicable)
Name of interes	ted Party	City, State, Country (place o	i business)	Controlling	Intermediary
Hughes, Craig		Austin, TX United States		×	
Oden, Steve		Austin, TX United States		х	
				_	
5 Check only if there is NO Intereste	ed Party.				
6 UNSWORN DECLARATION					
My name is	My name is, and my date of birth is				
My address is	(street)	(city)	, (state)	(zip code)	(country)
I declare under penalty of perjury tha			(sidie)	(21) 0006)	(sound)
			on the	day of	20
Executed in	Coun	nry, State of,	on the	day of(month)	, 20 (year)
	7	Signature of authorized agen (Declarar		ng business entity	

l	CERTIFICATE OF INTERESTED PAR	TIES		FOR	м 1295
L		=			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.		CE	OFFICE USE	
1	Name of business entity filing form, and the city, state and coun of business.	try of the business entity's place		ificate Number: 9-556041	
	Frito-Lay, Inc. Plano, TX United States		Date	Filed:	
2	Name of governmental entity or state agency that is a party to the being filed.	e contract for which the form is	10/2	8/2019	
	City of Dallas	·		Acknowledged: 3/2020	
3	Provide the identification number used by the governmental ent description of the services, goods, or other property to be provided in the services.		y the c	ontract, and pro	vide a
	DEV-2020-00011790 ABAN-LOG#48576- BLOCK#2/8018 Date Requested: 10/1/2	019 Requested by: Norma Morale:	3		
4					finterest
ı	Name of Interested Party	City, State, Country (place of busi	ness)	(check ap	pplicable) Intermediary
r				Controlling	intermediary
r					
H					
-					
H					
r					
-					
F					
-					
5	Check only if there is NO Interested Party.	Į.			
6	UNSWORN DECLARATION				
	My name is	, and my date o	f birth is	3	-
	My address is(street)		state)	(zip code)	(country)
	declare under penalty of perjury that the foregoing is true and correct	, , ,	naic)	(zip code)	(country)
		y, State of on the		day of	20
l	Count	y, oldic of, on the		(month)	
		Signature of authorized agent of co (Declarant)	ntracting	g business entity	

CERTIFICATE OF INTERESTED PARTIES **FORM 1295** 1 of 1 **OFFICE USE ONLY** 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. **CERTIFICATION OF FILING** Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2020-611258 Westwood Financial Corp Dallas, TX United States Date Filed: 04/23/2020 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Date Acknowledged: City of Dallas 09/23/2020 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-2020-00012939 Ground Up 7-Eleven Convenience Store and Gas Station. See attached site plan for more details. Nature of interest Name of Interested Party City, State, Country (place of business) (check applicable) Controlling Intermediary Dallas, TX United States Westwood Financial Corp 5 Check only if there is NO Interested Party. **6 UNSWORN DECLARATION** My name is ___ _____, and my date of birth is ____ My address is _____ (zip code) (country) I declare under penalty of perjury that the foregoing is true and correct. ______county, State of ______, on the ____day of _ Executed in ___ (year) Signature of authorized agent of contracting business entity (Declarant)

	CERTIFICATE OF INTERESTED PART	TIES		FOR	м 1295
l					1 of 1
Ī	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.		CEI	OFFICE USE	
1	Name of business entity filing form, and the city, state and count of business. 6070 NCX LLC	try of the business entity's place		ificate Number: 0-622271	
	Dallas, TX United States			Filed:	
2	Name of governmental entity or state agency that is a party to th being filed.	e contract for which the form is	705/2	1/2020	
	City of Dallas			Acknowledged: 3/2020	
3	description of the services, goods, or other property to be provided	ity or state agency to track or identified under the contract.	fy the c	ontract, and prov	/ide a
	DEV-2019-00011427 Easement Abandonment				
4				Nature of	
ľ	Name of Interested Party	City, State, Country (place of busi	ness)	(check ap	
H				Controlling	Intermediary
L					
L					
L					
L					
L					
L					
L					
L					
L					
5	Check only if there is NO Interested Party.				
6	UNSWORN DECLARATION				
	My name is	, and my date o	f birth is		
	My address is	<u> </u>			,
	(street)	(city)	state)	(zip code)	(country)
	I declare under penalty of perjury that the foregoing is true and correct	et.			
	Executed inCounty	y, State of, on the	;		
				(month)	(year)
		Signature of authorized agent of co	ntracting	g business entity	

CERTIFICATE OF INTERESTED PARTIES FORM 1295 1 of 1 **OFFICE USE ONLY** 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. **CERTIFICATION OF FILING** 1 Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2020-594640 Presbyterian Village North Dallas, TX United States Date Filed: 03/03/2020 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 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 Nature of interest Name of Interested Party City, State, Country (place of business) (check applicable) Controlling Intermediary 5 Check only if there is NO Interested Party. X **6 UNSWORN DECLARATION** My name is ___ ___, and my date of birth is __ My address is _____ (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 _ (month) (year) Signature of authorized agent of contracting business entity (Declarant)

	CERTIFICATE OF INTERESTED PART	TES		FORI	м 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.		CE	OFFICE USE	
1	Name of business entity filing form, and the city, state and country of business. Worth Trinity LLC	y of the business entity's pla		ificate Number: 0-633786	
2	Dallas, TX United States Name of governmental entity or state agency that is a party to the	contract for which the form	00/4	Filed: 8/2020	
	being filed. City of Dallas	contract for which the form	Date	Acknowledged: 3/2020	
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provided 49361 DEV-2018-00006207 Partial Winnetka Avenue Abandonment	y or state agency to track or ed under the contract.	dentify the c	ontract, and prov	ride a
4				Nature of	interest
"	Name of Interested Party	City, State, Country (place o	f business)	(check ap	
H				Controlling	Intermediary
W	orth Trinity LLC	Dallas, TX United States		Х	
_					
_					
_					
_					
_					
_					
_					
L					
5	Check only if there is NO Interested Party.				
6	UNSWORN DECLARATION				
	My name is	, and my	date of birth is	<u> </u>	
	My address is(street)	(city)	,, (state)	(zip code)	(country)
	I declare under penalty of perjury that the foregoing is true and correct				
	Executed inCounty,	State of,	on the	day of	. 20
	County.	, 3.000		(month)	(year)
		Signature of authorized agen (Declarar		g business entity	

CERTIFICATE OF INTERESTED PAR	TIES	FOF	км 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 USI CERTIFICATION			
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		Date Filed:			
 Name of governmental entity or state agency that is a party to the being filed. 	he contract for which the form is	11/27/2019			
City of Dallas		Date Acknowledged 09/23/2020			
3 Provide the identification number used by the governmental end description of the services, goods, or other property to be provi		y the contract, and pro	vide a		
None Given	ded under the contract.				
ROW License					
4	I	Nature o	of interest		
Name of Interested Party	City, State, Country (place of busin		pplicable)		
	DALLAC TV Heitard Ctatas	Controlling	Intermediary		
Santos, Martinez	DALLAS, TX United States		X		
Erin, Watkins	DALLAS, TX United States	Х			
Bradley, Berkley	DALLAS, TX United States	Х			
Big Outdoor Opco, LLC	DALLAS, TX United States	Х			
5 Check only if there is NO Interested Party.					
6 UNSWORN DECLARATION					
My name is	, and my date of	i birth is			
My address is					
(street)	(city) (s	state) (zip code)	(country)		
I declare under penalty of perjury that the foregoing is true and corre	ct.				
Executed inCoun	ty, State of, on the	day of(month)			
		,,	. ,		
	Signature of authorized agent of cor (Declarant)	ntracting business entity			

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.		CE	OFFICE USE	
1	Name of business entity filing form, and the city, state and count of business.	try of the business entity's place		ificate Number: 0-624240	
	Regional Black Contractors Association of North TX Dallas, TX United States		Date	Filed:	
2	Name of governmental entity or state agency that is a party to the being filed.	e contract for which the form is	05/2	27/2020	
	City of Dallas		09/2	Acknowledged: 23/2020	
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provided.		y the c	ontract, and prov	vide a
	BR20-00012921 City of Dallas-TDCJ Re-entry Services Program (Workforce To	raining & Placement)			
4	Name of Interested Party	City, State, Country (place of busin	2006)	Nature of	
	Name of filterested Faity	City, state, country (place of busin		Controlling	Intermediary
Ba	ailey-Jackson, Monica	Dallas, TX United States			Х
Re	egional Black Contractors Association Community	Dallas, TX United States			Х
La	w Offices of Charles A. Caldwell, PLLC	Dallas, TX United States			Х
Fir	rst Step Community Empowerment, Inc.	Dallas, TX United States			Х
Pr	octor, John	Dallas, TX United States		×	
Sh	naw, Kimberly	Dallas, TX United States		х	
5	Check only if there is NO Interested Party.				
6	UNSWORN DECLARATION				
	My name is	, and my date of	f birth is	3	·
	My address is(street)		state)	(zip code)	(country)
	I declare under penalty of perjury that the foregoing is true and correct	ot.			
	Executed inCounty)(day of	, 20
				(month)	(year)
	-	Signature of authorized agent of con	ntractin	g business entity	======================================
		(Declarant)			

	CERTIFICATE OF INTERESTED PART	TIES		FOR	м 1295
L					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.		CE	OFFICE USI	
1	Name of business entity filing form, and the city, state and count of business. Kimley-Horn and Associates, Inc. Dallas, TX United States	try of the business entity's pla	202	tificate Number: 20-633774	
2		e contract for which the form is Date Filed: 06/18/2020 Date Acknowledged: 09/23/2020			
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provided FHO-2019-00011518 ADA Transition Plan – Phase 2		identify the	contract, and pro	vide a
4					f interest
	Name of Interested Party	City, State, Country (place o	f business)		pplicable)
L				Controlling	Intermediary
М	cEntee, David L	Dallas, TX United States		Х	
Le	efton, Steve	Dallas, TX United States		Х	
С	ook, Richard N	Dallas, TX United States		Х	
A	tz, John	Dallas, TX United States		Х	
L					
L					
L					
L					
L					
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 inCounty	/, State of,	on the		
				(month)	(year)
		Signature of authorized agen		ng business entity	<u>_</u> g

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.		CF	OFFICE USE			
				RTIFICATION	OF FILING		
1	Name of business entity filing form, and the city, state and country of business.	ry of the business entity's place		ificate Number: 0-608208			
	CND-West Davis II, LLC			0 000200			
	Dallas, TX United States			Filed:			
2	Name of governmental entity or state agency that is a party to the being filed.	e contract for which the form is	04/1	5/2020			
	City of Dallas			Acknowledged: 23/2020			
_	Describe she identification when and he do not be a second to the second	ne or otato agramme to track and description			uido o		
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provid	ly or state agency to track or identi led under the contract.	ıy tne C	:ontract, and pro\	riue a		
	Dev-2019-00010429						
	Easement Abandonment						
_				Nature of	interest		
4	Name of Interested Party	City, State, Country (place of busi	ness)	(check ap			
				Controlling	Intermediary		
_							
_							
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
	My name is	, and my date o	of birth is	s			
	My address is						
	My address is(street)	(city)	state)	(zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and correct	t.					
	Executed inCounty	, 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 **OFFICE USE ONLY** 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. **CERTIFICATION OF FILING** Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2019-533949 Southwestern Medical District Date Filed: Dallas, TX United States 08/28/2019 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Date Acknowledged: City of Dallas 09/23/2020 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 Nature of interest Name of Interested Party City, State, Country (place of business) (check applicable) Controlling Intermediary Х Dallas, TX United States Southwestern Medical District Dallas, TX United States Х Mitchell, Steve Frisco, TX United States Х Kennedy, Russell Х Ponton, CJ Frisco, TX United States Dallas, TX United States Х Prejean, Robert 5 Check only if there is NO Interested Party. **6 UNSWORN DECLARATION** ____, and my date of birth is _ My name is ___ My address is _____ (city) I declare under penalty of perjury that the foregoing is true and correct. _____county, State of ______, on the ____day of _ Executed in

CERTIFICATE OF INTERESTED PARTIES FORM 1295 **OFFICE USE ONLY** 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. **CERTIFICATION OF FILING** 1 Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2020-648512 Bracewell LLP Houston, TX United States Date Filed: 07/24/2020 2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Date Acknowledged: City of Dallas, Texas 10/05/2020 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. RFQ #BQZ20-00013089 Bond and Disclosure Counsel Nature of interest 4 City, State, Country (place of business) (check applicable) Name of Interested Party Controlling Intermediary Dallas, TX United States Χ Brooks, Ben Houston, TX United States Х Bopp, Gregory Dallas, TX United States Х Bailey, Brock Χ Houston, TX United States Rhebergen, Constance Χ Hutt, Jason Washington D.C., DC United Houston, TX United States Χ Crain, Stephen Washington D.C., DC United Χ Lewis, Mark Χ Anderson, William Houston, TX United States 5 Check only if there is NO Interested Party. **6 UNSWORN DECLARATION** My name is _ __, and my date of birth is _ My address is (state) (zip code) (country) I declare under penalty of perjury that the foregoing is true and correct. County, State of _____, on the ____day of _ Executed in (month) (year)

	CERTIFICATE OF INTERESTED PAR	TIES		FOR	м 1295	
	Complete Nos. 1 - 4 and 6 if there are interested parties.			OFFICE USE		
	Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.			RTIFICATION	OF FILING	
1	Name of business entity filing form, and the city, state and coun of business.	ntry of the business entity's place		ificate Number:		
	West & Associates, LLP			0-648633		
	Dallas, TX United States Date			e Filed:		
2	Name of governmental entity of state agency that is a party to the contract for which the form is			4/2020		
	being filed.		Date	Acknowledged:		
	Oity of Ballact, Toxac			5/2020		
3	Provide the identification number used by the governmental ent description of the services, goods, or other property to be provi		entify the c	ontract, and prov	vide a	
	CA0-2020-00013089 Co-Bond Counsel					
7				Nature of	finterest	
4	Name of Interested Party	City, State, Country (place of	business)	(check ap	pplicable)	
				Controlling	Intermediary	
R	byce , West	Dallas, TX United States		Х		
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	ct.				
	Executed inCount	ty, State of, o	n the	day of	, 20	
				(month)	(year)	
		Signature of authorized agent		g business entity		

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
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	Certificate Number: 2020-648411
2	Dallas, TX United States Name of governmental entity or state agency that is a party to the contract for which the form is being filed.	Date Filed: 07/23/2020
	City of Dallas	Date Acknowledged: 10/05/2020

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	earty City, State, Country (place of business)		of interest pplicable)
<u> </u>		Controlling	Intermediary
Braden, Paul	Dallas, TX United States		Х
Cody, Jeff	Dallas, TX United States	Х	
Giaccia, Andrew	Washington, DC United States		х
Archer, Judith	New York, NY United States		Х
Clark, Shauna	Houston, TX United States		х
Martinez, Stacy	Austin, TX United States		Х
Price, Andrew	Houston, TX United States		
Rosenberg, Larry	New York, NY United States		Х
Shishima, Gina	Austin, TX United States		Х
Weber, Paul	New York, NY United States		х
Krumholz, Richard	Dallas, TX United States		х
Lewis, Gene	Denver, CO United States		х
Repass, James	Houston, TX United States		Х
Scofield, George	San Antonio, TX United States		Х

	CERTIFICATE OF INTERESTED PART	ΓIES		FOR	м 1295
F				OFFICE LICE	_
	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.		CEI	OFFICE USE RTIFICATION	
1	Name of business entity filing form, and the city, state and count of business.	try of the business entity's pla	ce Certi	ificate Number: 0-648411	
	Norton Rose Fulbright US LLP Dallas, TX United States		Date	Filed:	
2	Name of governmental entity or state agency that is a party to the	e contract for which the form	07/0	3/2020	
	being filed. City of Dallas			Acknowledged: 5/2020	
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provide	ty or state agency to track or led under the contract.			vide a
	2020-00013089 legal services				
H				Nature of	f interest
4	Name of Interested Party	City, State, Country (place o	of business)	(check ap	
				Controlling	Intermediary
H					
L					
5	Check only if there is NO Interested Party.				
6	UNSWORN DECLARATION				
	My name is	, and my	date of birth is	3	·
	My address is				.,
	(street)	(city)	(state)	(zip code)	(country)
	I declare under penalty of perjury that the foregoing is true and correct	t.			
	Executed inCounty	y, State of,	on the		, 20
				(month)	(year)
		Signature of authorized ager		g business entity	

	CERTIFICATE OF INTERESTED PAR	TIES		FOR	м 1295	
	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.		CE	OFFICE USE	_	
1	Name of business entity filing form, and the city, state and country of the business entity's place Cert			RTIFICATION OF FILING ificate Number: 0-650080		
2	Name of governmental entity or state agency that is a party to the being filed. City of Dallas, Texas	ne contract for which the form is	Date	8/2020 Acknowledged: 5/2020		
3	Provide the identification number used by the governmental ent description of the services, goods, or other property to be provi 2020-00013089 Legal Services		ntify the c			
4				Nature of		
	Name of Interested Party	City, State, Country (place of b	usiness)	(check ap		
Ki	ntop Smith, Nicole	Dallas, TX United States		Controlling X	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	ct.				
	Executed inCount	ty, State of, on	the			
				(month)	(year)	
		Signature of authorized agent of	contractin	g business entity		

	CERTIFICATE OF INTERESTED PART	TIES		FOR	м 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.		CE	OFFICE USE		
1	Name of business entity filing form, and the city, state and count of business.	try of the business entity's place		ificate Number: 0-639111		
	Crescent Constructors, Inc. Dallas, TX United States			Filed:		
2	Name of governmental entity or state agency that is a party to the being filed.	e contract for which the form is		1/2020		
	City of Dallas			Acknowledged: 3/2020		
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provide	ity or state agency to track or ide ded under the contract.	entify the c	ontract, and pro	vide a	
	DWU-2020-00013793 19-560 SSWWTP Stormwater Facilties Improvements					
4	No. of the state of Parks	City State Country (place of h	vvoinooo)		f interest	
	Name of Interested Party	City, State, Country (place of b	iusiness)	Controlling	pplicable) Intermediary	
D	aigre, Michael	Plano, TX United States		х		
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	My name is, and my date of birth is					
	My address is		(-1-1-)	(-in code)		
	(street)	(city)	(state)	(zip code)	(country)	
l	I declare under penalty of perjury that the foregoing is true and correc					
	Executed inCount	y, State of, or	the	day of(month)	20 (year)	
		Signature of authorized agent of (Declarant)	f contractin	ng business entity		

	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.		CEF	OFFICE USE		
1	Name of business entity filing form, and the city, state and country of the business entity's place of business. Neel-Schaffer, Inc.			Certificate Number: 2018-429271		
2	Fort Worth, TX United States Name of governmental entity or state agency that is a party to the	e contract for which the form is		Filed: 9/2018		
-	being filed. City of Dallas	e contract for which the form is	Date	Acknowledged:		
			03/14	4/2019		
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provided		the co	ontract, and prov	vide a	
	PBW-2019-00008827 Engineering Design					
4	Name of Interested Party	City, State, Country (place of busing	ess)	Nature of	plicable)	
_				Controlling	Intermediary	
Neel-Schaffer Engineers and Planners Jackson, MS United State		Jackson, MS United States		Х		
Neel, Hibbett		Jackson, MS United States		Х		
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	My name is	, and my date of I	birth is		·	
	My address is			()	·——	
	(street)	(city) (st	ate)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct	t.				
	Executed inCounty	y, State of, on the _	o	lay of	, 20 (year)	
					<i>,</i>	
		Signature of authorized agent of cont (Declarant)	tracting	business entity		

	CERTIFICATE OF INTERESTED PART	TIES		FORI	и 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.		CE	OFFICE USE		
1	of business.			ificate Number: 9-489400		
	Dikita Enterprises, Inc. Dallas, TX United States Dat					
2	Name of governmental entity or state agency that is a party to the contract for which the form is being filed. $05/1$.0/2019		
	City of Dallas		Acknowledged: .0/2019			
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provide	ity or state agency to track or ded under the contract.	identify the c	ontract, and prov	vide a	
	PBW-2019-00009457 Civil Design - Streets					
4	No. of Leavested Books	City State Country (place	of husings)	Nature of		
	Name of Interested Party	City, State, Country (place o	of Dusiness)	(check ap	Intermediary	
w	filliams, Lucious	Dallas, TX United States		×	•	
Williams, Evalynn		Dallas, TX United States		х		
L						
L						
L						
L						
L						
L						
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 correc	,	(state)	(zip code)	(country)	
		y, State of,	on the	day of	20	
	County	,, 5.0.00		(month)	, 20 (year)	
	,					
	· ·	Signature of authorized ager (Declara	nt of contractin	g business entity		

	CERTIFICATE OF INTERESTED PART	TIES		FOR	м 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.		CE	OFFICE USE		
1			1,000	ificate Number: 7-288520		
	VERDUNITY, Inc. Dallas, TX United States		Date	Filed:		
2	Name of governmental entity or state agency that is a party to the being filed.	e contract for which the form is	11/2	9/2017		
	City of Dallas, TX			Acknowledged: 17/2018		
3	Provide the identification number used by the governmental enti description of the services, goods, or other property to be provided in the control of the services.	ty or state agency to track or ide ded under the contract.	ntify the c	ontract, and pro	vide a	
	PBW-2018-00004439 Supplemental Agreement for design and PS&E preparation for to Oak Lawn Ave)	or Streetscape Improvements (C	edar Spr	rings Road from	Douglas Ave	
4		O'the Olerton Company (allows of the			f interest	
	Name of Interested Party	City, State, Country (place of b	isiness)	(check ap	Intermediary	
SI	nepherd, Kevin	Dallas, TX United States		X	,	
	P					
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	My name is	name is, and my date of birth is				
	My address is				3	
	(street)	(city)	(state)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct	t.				
	Executed inCount	y, State ofon	the	day of(month)	, 20 (year)	
				(mondy)	(, 541)	
	Signature of authorized agent of contracting business entity					

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 US CERTIFICATIO			
	Name of business entity filing form, and the city, state and country of the business entity's place of business. AZTEC Engineering Group, Inc. Phoenix, AZ United States			Certificate Number: 2019-463693 Date Filed:			
	Name of governmental entity or state agency that is a party to the being filed. City of Dallas Department of Public Works	e contract for which	the form is	03/14/2019 Date Acknowledge 06/18/2019	ate Acknowledged:		
	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provide PBW-2019-00009477 Professional Civil Engineering Services			the contract, and p	rovide a		
4	Name of Interested Party	City, State, Country	/ (place of busine	ess) (check	of interest applicable) Intermediary		
				Controlling	mtermediary		
					→		
				_			
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION	_					
	My name is		and my date of t	oirth is			
	My address is(street)	(city)	(sta	ate) (zip code)	, (country)		
	I declare under penalty of perjury that the foregoing is true and correc	t.					
	Executed inCounty	, State of	, on the _	day of(month			
		Signature of author	ized agent of contr (Declarant)	racting business entit	y		