## **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	me of business entity filing form, and the city, state and country of the business entity's place business.			Certificate Number:			
	mma, inc.				2023-1004635		
	Arlington, TX United States	es e			Date Filed:		
2	Name of governmental entity or state agency that is a party to the being filed.	gency that is a party to the contract for which the form is		04/10/2023			
	City of Burleson				Date Acknowledged:		
3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, description of the services, goods, or other property to be provided under the contract.					vide a		
	City of Burleson Service Cente Surveying and Civil Engineering						
4				Nature of interest			
	Name of Interested Party	City, State, Country (place of bus	iness)	(check ap	Intermediary		
				Controlling	intermediary		
	_						
5	5 Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
	My name is	, and my date of birth is12/04/1979					
	My address is 519 E. Border Street	, Arlington, _	TX,	76010	, <u>USA</u> .		
	(street)	(city)	(state)	(zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and correct	ct.					
	Executed inCount	ty, State ofTexas, on th	e <u>10</u>	day of April	, <sub>20_</sub> 23		
				(month)	(year)		
	105						
	Signature of authorized agent of contracting business entity (Declarant)						