## **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 | ame of business entity filing form, and the city, state and country of the business entity's place  |  |                    | Certificate Number:                     |                     |  |
|   | Yellowstone Landscape - Central Fort Worth, TX United States  Name of governmental entity or state agency that is a party to the contract for which the form is being filed.  City of Burleson                              |  | 202                | 2023-1047429                            |                     |  |
|   |   |  | Date Filed:        |   |                     |  |
| 2 |   |  | is 07/2            | Date Acknowledged:                      |                     |  |
|   |   |  | Date               |   |                     |  |
| 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. |  |                    |   |                     |  |
|   | 2023-18   |  |                    |   |                     |  |
|   | Tier 2 & Tier 3 West Mowing   |  |                    |   |                     |  |
| 4 |   |  |                    | Nature of interest                      |                     |  |
|   | Name of Interested Party City, State, Country (place of bus   |  | of business)       | (check ap                               |                     |  |
| _ |   |  |                    | Controlling                             | Intermediary        |  |
|   |   |  |                    |   |                     |  |
|   |   |  |                    |   |                     |  |
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|   |   |  |                    |   |                     |  |
|   |   |  |                    |   |                     |  |
|   |   |  |                    |   |                     |  |
| 5 | Check only if there is NO Interested Party.   |  |                    |   |                     |  |
| 6 | UNSWORN DECLARATION   |  |                    |   |                     |  |
| Ŭ | Pruss McDanald  |  |                    |   |                     |  |
|   | y name is Druce McDonaid , and my date  |  |                    | is <u>ZIZZI 191</u> Z                   | ·                   |  |
|   | My address is 296 Hacienda Dr   | Pottsboro  | , <u>TX</u>        | 75056                                   | , <u>USA</u> .      |  |
|   | (street)  | (city)   | (state)            | (zip code)                              | (country)           |  |
|   | I declare under penalty of perjury that the foregoing is true and corr  | under penalty of perjury that the foregoing is true and correct. |                    |   |                     |  |
|   | Executed in Collin  | nty, State of TX   | on the 18          | _day of _ <b>July</b>                   | , <sub>20</sub> _23 |  |
|   |   | Fuce WM )  |                    | (month)                                 | (year)              |  |
|   |   | nt of contractin   | ng business entity |   |                     |  |