

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. BFI Waste Services of Texas, LP / Republic Services, Inc. Harlingen, TX United States	Certificate Number: 2017-257064 Date Filed: 09/06/2017
2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Hidalgo County Pct #1	Date Acknowledged: 09/11/2017

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.
 2017-158-08-02-SGS
 Disposal of Municipal Solid Waste Received at Pct #1 Citizen Collection Stations to Transfer

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
BFI Waste Services of Texas, LP / Republic Services, Inc.	Harlingen, TX United States		X

5 Check only if there is NO Interested Party.

6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

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Certificate Number:
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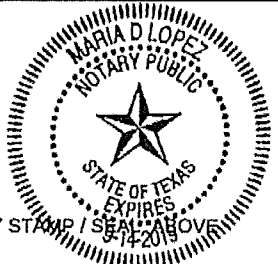
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6 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



Jon M. Deicla
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said JON M. DEICLA, this the 7TH day of SEPTEMBER, 2017, to certify which, witness my hand and seal of office.

Maria D. Lopez
Signature of officer administering oath

MARIA D. LOPEZ
Printed name of officer administering oath

Title of officer administering oath