

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

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

Half Associates, Inc.
McAllen, TX United States

Certificate Number:
2017-285443

Date Filed:
11/17/2017

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

Hidalgo County Precinct No. 4

Date Acknowledged:

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.

C-16-188-05-10
Supplemental Agreement No. 2/Work Authorization No. 3 for additional Professional Services

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Adams , Bobby	Houston, TX United States	X	
	Craig, Matthew	Richardson, TX United States	X	
	Jackson, Todd	Austin, TX United States	X	
	Ickert , Andrew	Fort Worth, TX United States	X	
	Killen, Russell	Richardson, TX United States	X	
	Kuhn, Greg	Richardson, TX United States	X	
	Kunz, Pat	Richardson, TX United States	X	
	Moya, Mike	Austin, TX United States	X	
	Bargainer, Tim	Austin, TX United States	X	
	Plugge, Jr., Roman	Richardson, TX United States	X	
	Murray, Menton	McAllen, TX United States	X	
	Skipwith, Walter	Richardson, TX United States	X	
	Tanksley, Dan	Richardson, TX United States	X	

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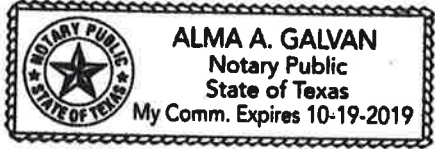
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5 Check only if there is NO Interested Party.

6 AFFIDAVIT

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



Menton J. Murray
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Menton J. Murray, this the 17th day of November, 2017, to certify which, witness my hand and seal of office.

Alma A Galvan Alma A. Galvan Notary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

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	Jackson, Todd	Austin, TX United States	X	
	Ickert , Andrew	Fort Worth, TX United States	X	
	Killen, Russell	Richardson, TX United States	X	
	Kuhn, Greg	Richardson, TX United States	X	
	Kunz, Pat	Richardson, TX United States	X	
	Moya, Mike	Austin, TX United States	X	
	Bargainer, Tim	Austin, TX United States	X	
	Plugge, Jr., Roman	Richardson, TX United States	X	
	Murray, Menton	McAllen, TX United States	X	
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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