

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
1 Name of business entity filing form, and the city, state and country of the business entity's place of business. RG Enterprises, LLC dba G&G Contractors Edinburg, TX United States	CERTIFICATION OF FILING Certificate Number: 2019-446685 Date Filed: 01/29/2019 Date Acknowledged:
2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Hidalgo County Urban County Program	

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.

M-17-UC-48-0501-RC-10
 DEMOLITION AND RECONSTRUCTION OF 2 UNITS IN THE CITY OF WESLACO, 1 UNIT IN THE CITY OF ELSA AND 2 UNITS IN THE COUNTYWIDE AREA

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
Garza, RE	Edinburg, TX United States	X	

5 Check only if there is NO Interested Party.


6 UNSWORN DECLARATION

My name is Rene Garza, and my date of birth is 06/05/1978

My address is 711 E. Wisconsin Rd., Edinburg, Tx, 78539, USA
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in HIDALGO County, State of TEXAS, on the 30 day of JANUARY, 2019
(month) (year)



 Signature of authorized agent of contracting business entity
 (Declarant)

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 RG Enterprises, LLC dba G&G Contractors
 Edinburg, TX United States

Certificate Number:
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Date Filed:
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			Controlling	Intermediary
	Garza, RE	Edinburg, TX United States	X	

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 in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

 Signature of authorized agent of contracting business entity
 (Declarant)