

# 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.**  
 MTME, LLC  
 Corpus Christi, TX United States

**Certificate Number:**  
 2020-623401

**Date Filed:**  
 05/26/2020

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

**Date Acknowledged:**  
 05/26/2020

**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-17-168-07-11/ NEW E-20-142  
 Groundwater and Gas Monitoring at Closed Landfill

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Hudgins, George	Corpus Christi, 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)

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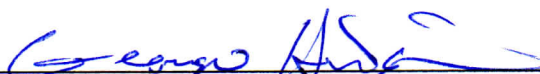
**6 UNSWORN DECLARATION**

My name is George Hudgins, and my date of birth is 4/10/1958.

My address is 548 Naples St, Corpus Christi, TX 78404, USA.  
(street) (city) (state) (zip code) (country)

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

Executed in Nueces County, State of Texas, on the 26 day of May, 20 20.  
(month) (year)

  
Signature of authorized agent of contracting business entity  
(Declarant)