

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.

Big D Tractor Co. LLC dba Frontera Equipment / Blue Cat Rentals
Donna, TX United States

Certificate Number:
2020-659614

Date Filed:
08/20/2020

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 Precinct 2

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.

REQ #419733
Rental of Heavy Equipment & Services

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

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Nancy Rodriguez, and my date of birth is 01/04/1975.

My address is 7223 E. Texas Rd. (street), Edinburg (city), TX (state), 78542 (zip code), Hidalgo (country).

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

Executed in Hidalgo County, State of Texas, on the 20th day of August, 2020.
(month) (year)

Nancy Rodriguez
Signature of authorized agent of contracting business entity
(Declarant)

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Big D Tractor Co. LLC dba Frontera Equipment / Blue Cat Rentals
Donna, TX United States

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2020-659614

Date Filed:
08/20/2020

Date Acknowledged:
08/21/2020

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Hidalgo County Precinct 2

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REQ #419733
Rental of Heavy Equipment & Services

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

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)