

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.

Halff Associates, Inc,
McAllen, TX United States

Certificate Number:
2021-708818

Date Filed:
01/22/2021

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:
01/25/2021

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.

SA No.1 - C-20-086-03-10
Professional Engineering Services for Drainage Study and Assessment

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Zapalac, Russell	Richardson, TX United States	X	
	Tanksley, Dan	Richardson, TX United States	X	
	Sagel, Joseph	Richardson, TX United States	X	
	Murray, Menton	McAllen, TX United States	X	
	Moya, Mike	Austin, TX United States	X	
	Miller, Steven	Austin, TX United States	X	
	Llewellyn Sr., Mark	Tallahassee, FL United States	X	
	Jackson, Todd	Austin, TX United States	X	
	Kunz, Pat	Richardson, TX United States	X	
	Ickert, Andrew	Fort Worth, TX United States	X	
	Edwards, Mark	Richardson, TX United States	X	
	Baker, Jessica	Richardson, TX United States	X	
	Bargainer, Tim	Austin, TX United States	X	

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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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	Murray, Menton	McAllen, TX United States	X	
	Moya, Mike	Austin, TX United States	X	
	Miller, Steven	Austin, TX United States	X	
	Llewellyn Sr., Mark	Tallahassee, FL United States	X	
	Jackson, Todd	Austin, TX United States	X	
	Kunz, Pat	Richardson, TX United States	X	
	Ickert, Andrew	Fort Worth, TX United States	X	
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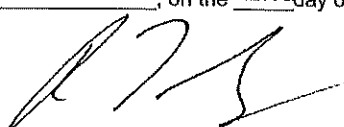
6 UNSWORN DECLARATION

My name is Robert L. Saenz, and my date of birth is 05/02/1964.

My address is 5000 West Military Hwy, Suite 100, McAllen, TX, 78503, 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 22nd day of January, 2021.
(month) (year)



 Signature of authorized agent of contracting business entity
 (Declarant)