

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.
HDR Architecture, Inc.
Dallas, TX United States

Certificate Number:
2022-845872

Date Filed:
02/01/2022

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:

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-16-141-10-31
Amendment 20 - HCCH - Extended Construction Administration Services

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
Wignall, Douglas S.	Omaha, NE United States	X	
Anderson, Chad W.	Dallas, TX United States	X	
Keen, Eric L.	Omaha, NE United States	X	
Vandevveer, Thomas E.	Los Angeles, CA United States	X	
HDR, Inc.	Omaha, NE United States	X	

5 Check only if there is NO Interested Party.


6 UNSWORN DECLARATION

My name is Chad Anderson, and my date of birth is 1/22/1976.

My address is 8750 N. Central Expressway, Suite 100, Dallas, TX, 75231, US.
(street) (city) (state) (zip code) (country)

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

Executed in Dallas County, State of Texas, on the 1 day of February, 2022.
(month) (year)



Signature of authorized agent of contracting business entity
(Declarant)

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Vandever, Thomas E.	Los Angeles, CA United States	X	
HDR, Inc.	Omaha, NE 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)