

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

Certificate Number:
2022-891650

Date Filed:
05/26/2022

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
Clarke Mosquito Control Products, I
St. Charles, IL United States

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

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.
21-0758
Purchase of Mosquito Control Chemicals

| 4 | Name of Interested Party | City, State, Country (place of business) | Nature of Interest (check applicable) | |
|---|--|--|---------------------------------------|--------------|
| | | | Controlling | Intermediary |
| | Clarke Mosquito Control Products, Inc. | St. Charles, IL 60174 | x | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

Julie Reiter- VP of Human Resources and Sustainable Development

My name is _____, and my date of birth is 4/11/61

My address is 675 Sidwell Court, St. Charles, IL 60174, US
(street) (city) (state) (zip code) (country)

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

Executed in Kane County, State of Illinois, on the 26th day of May, 2022
(month) (year)


 Signature of authorized agent of contracting business entity
(Declarant)