

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:
 2022-949920

Date Filed:
 10/28/2022

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
 USRC MISSION LP
 MISSION, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
 HILDAGO COUNTY SHERRIF'S OFFICE

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.
 E-19-194
 KIDNEY DIALYSIS

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	US RENAL CARE INC.	PLANO, TX United States	X	

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

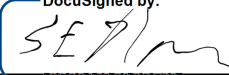
My name is Steven Nottingham, and my date of birth is 10/04/1959.

My address is 742 Malibu Court, Lake Havasu City, AZ, 86403, USA.
(street) (city) (state) (zip code) (country)

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

28 October 2022 | 11:37 AM PT

Executed in Collin County, State of Texas, on the ___ day of ___, 20___.
(month) (year)

DocuSigned by:

 Signature of authorized agent of contracting business entity (Declarant)

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			Controlling	Intermediary
	US RENAL CARE INC.	PLANO, 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)