

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:
2022-952866

Date Filed:
11/07/2022

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

The Levy Company, Inc.
Selma, 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.

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.

C-21-0686-10-19
Construction Contract Change Order #2 - Project delay for utility adjustments required an overrun of the barricades.

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Levy, Harry	SELMA, TX United States	X	
	West, John	SELMA, TX United States	X	

5 Check only if there is NO Interested Party.


6 UNSWORN DECLARATION

My name is Will E. Calame, and my date of birth is 03/05/1986.

My address is 16294 IH 35 N, Selma, TX, 78154, USA.
(street) (city) (state) (zip code) (country)

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

Executed in Guadalupe County, State of Texas, on the 7th day of November, 2022.
(month) (year)



Signature of authorized agent of contracting business entity
(Declarant)

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Certificate Number:
2022-952866

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11/08/2022

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Selma, TX United States

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4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
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	Levy, Harry	SELMA, TX United States	X	
	West, John	SELMA, 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)