

# 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.**  
Terracon Consultants, Inc.  
Pharr, TX United States

**Certificate Number:**  
2023-1053415

**Date Filed:**  
07/31/2023

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

**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-23-0287-08-08  
Hidalgo County Precinct 4 - CMT Services : North Man Drain III Phase I Stormwater Project - ARPA-22-124-095

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Packer, Gayle	Olathe, KS United States	X	
	Donald, Vic	Baton Rouge, LA United States	X	
	Pavlicek, Bob	Olathe, KS United States	X	
	Anderson, Tim	Tempe, AZ United States	X	
	Moussallem, Maroun	Denver, CO United States	X	
	Zambo, Vanessa	Olathe, KS United States	X	

**5 Check only if there is NO Interested Party.**

**6 UNSWORN DECLARATION**

My name is Jorge A. Flores, P.G., and my date of birth is [REDACTED].

My address is 1506 Mid Cities Dr., Pharr, TX, 78577, 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 31st day of July, 2023.  
(month) (year)

Jorge A. Flores  
Signature of authorized agent of contracting business entity  
(Declarant)

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2023-1053415

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08/01/2023

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	Moussallem, Maroun	Denver, CO United States	X	
	Zambo, Vanessa	Olathe, KS 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)