

# 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.

G-8 UTILITIES LLC  
MCALLEN, TX United States

Certificate Number:  
2024-1154886

Date Filed:  
05/01/2024

Date Acknowledged:

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

CITY OF LA VILLA

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.

5023-45-0309-5000-0000-UCP-EP  
DRAINAGE IMPORVEMENTS

| 4 | Name of Interested Party | City, State, Country (place of business) | Nature of Interest (check applicable) |              |
|---|--------------------------|--|---------------------------------------|--------------|
|   |                          |  | Controlling                           | Intermediary |
|   |                          |  |                                       |              |
|   |                          |  |                                       |              |
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|   |                          |  |                                       |              |

5 Check only if there is NO Interested Party.


### 6 UNSWORN DECLARATION

My name is Alejandro Gomez and my date of birth is April 10, 1995

My address is 4204 san esteban ct mission TX 78501 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 13 day of MAY 2024  
(month) (year)

  
\_\_\_\_\_  
Signature of authorized agent of contracting business entity (Declarant)

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 G-8 UTILITIES LLC  
 MCALLEN, TX United States

Certificate Number:  
 2024-1154886

Date Filed:  
 05/01/2024

**2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.**  
 CITY OF LA VILLA

Date Acknowledged:  
 05/13/2024

**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.**  
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 DRAINAGE IMPORVEMENTS

| 4 | Name of Interested Party | City, State, Country (place of business) | Nature of interest (check applicable) |              |
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|   |                          |  | Controlling                           | Intermediary |
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**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)