

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.

LexisNexis Risk Solutions FL Inc.
Alpharetta , GA United States

Certificate Number:

2024-1175451

Date Filed:

06/13/2024

Date Acknowledged:

06/28/2024

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

Hidalgo County District Clerks 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.

Project 24-0136
Project 24-0136 DIR-LGL-CALIR-01B Revised Schedule A for D. Clerks

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	RELX U.S. Holdings Inc.	Newton, MA 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)

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Project 24-0136
 Project 24-0136 DIR-LGL-CALIR-01B Revised Schedule A for D. Clerks

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
RELX U.S. Holdings Inc.	Newton, MA United States	X	

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

the date of incorporation is

My name is Gaurang Dave, Contracts Manager, and my date of birth is [REDACTED].

My address is 1000 Alderman Drive, Alpharetta, GA, 30005, USA.
(street) (city) (state) (zip code) (country)

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

Executed in Washington County, State of D.C., on the 13th day of June, 2024.
(month) (year)

Gaurang Dave

Signature of authorized agent of contracting business entity
 (Declarant)