

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:
 2025-1364750

Date Filed:
 09/17/2025

Date Acknowledged:

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

Orrick, Herrington & Sutcliffe LLP
 Houston, 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, Texas

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.

25-0515
 Bond Counsel Services

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
Hermie, Lynn	Menlo Park, CA United States	X	
Bicks, Peter	New York, NY United States	X	
Zulkie, Mitchell	Menlo Park, CA United States	X	
Brown, Walter	San Francisco, CA United States	X	

5 Check only if there is NO Interested Party.

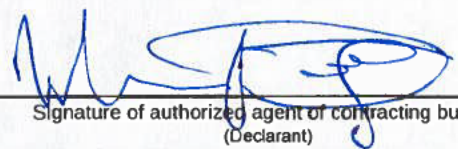
6 UNSWORN DECLARATION

My name is Marcus Deitz and my date of birth is [REDACTED]

My address is 601 Main St., 40th Floor, Houston, TX, 77002, USA
(city) (state) (zip code) (country)

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

Executed in Harris County, State of Texas, on the 17 day of September, 2025.
(month) (year)


 Signature of authorized agent of contracting business entity (Declarant)

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			Controlling	Intermediary
	Hermie, Lynn	Menlo Park, CA United States	X	
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	Zulkie, Mitchell	Menlo Park, CA United States	X	
	Brown, Walter	San Francisco, CA 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 _____, _____, _____, _____, _____.
(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)