

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.

IOC Company LLC
Edinburg, TX United States

Certificate Number:
2026-1517941

Date Filed:
09/18/2026

Date Acknowledged:

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

Hidalgo County Precinct 3

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-24-0148-05-29-10
Liberty Blvd. Project (US 83 to Mile 3 Rd.) - Change Orders No. 7

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

5 Check only if there is NO Interested Party.



6 UNSWORN DECLARATION

My name is Nancy C. Davenport, and my date of birth is .

My address is 9312 E Curve Rd, Edinburg, TX, 78542, USA.
(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 18 day of September, 2026.
(month) (year)

Nancy Davenport

[Nancy Davenport \(Sep 18, 2026 17:59:39 CDT\)](#)

Signature of authorized agent of contracting business entity
(Declarant)

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IOC Company LLC
Edinburg, TX United States

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2026-1517941

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Hidalgo County Precinct 3

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C-24-0148-05-29-10
Liberty Blvd. Project (US 83 to Mile 3 Rd.) - Change Orders No. 7

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

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)

Form 1295 Certificate 101600395 (signed)

Final Audit Report

2026-09-18

Created:	2026-09-18
By:	Paola Villegas (pvillegas@iocompany.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAAabicsiBd7WM8TtM1XCO3iL7RmJ5QWXek

"Form 1295 Certificate 101600395 (signed)" History

-  Document created by Paola Villegas (pvillegas@iocompany.com)
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-  Document emailed to nancy cuellar (ncuellar@iocompany.com) for signature
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-  Signer nancy cuellar (ncuellar@iocompany.com) entered name at signing as Nancy Davenport
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-  Document e-signed by Nancy Davenport (ncuellar@iocompany.com)
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