CERTIFICATE OF INTERESTED PARTIES

FORM 1295

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:
2026-1532885

Date Filed:
10/26/2026

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
RBM Contractors, LLC.
Edinburg, 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 Precinct 2

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-25-0169-05-13
RecreationalTrailsConnectivityProject-McAllenSegment1fromTaylorRdtoWareRdand23rdStto10thSt Change Order No.3
Material, Labor, Equipment, as per plans

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
RBM Contractors, LLC.	Edinburg, TX United States	X	

5 Check only if there is NO Interested Party. ☐

6 UNSWORN DECLARATION

My name is Braulio Rios, and my date of birth is _____.

My address is 9721 E Monte Cristo Rd., Edcouch (city), TX (state), 78538 (zip code), USA (country).

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

Executed in Hidalgo County, State of Texas, on the 26 day of October (month), 2026 (year).

_____
Signature of authorized agent of contracting business entity
(Declarant)

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OFFICE USE ONLY
CERTIFICATION OF FILING

Certificate Number:
2026-1532885

Date Filed:
10/26/2026

Date Acknowledged:
11/03/2026

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RBM Contractors, LLC.
Edinburg, TX United States

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Hidalgo County Precinct 2

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C-25-0169-05-13
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		Controlling	Intermediary
RBM Contractors, LLC.	Edinburg, TX 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)