CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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	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.			Certificate Number: 2018-379177		
	ertified Arbor Care Inc.			= :=w v		
2	Round Rock, TX United States Jame of governmental entity or state agency that is a party to the contract for which the form is			Date Filed: 07/12/2018		
-	eing filed.					
	City of Round Rock			Date Acknowledged:		
3	Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a escription of the services, goods, or other property to be provided under the contract.					
	Tree Trimming and Removal					
	Tree care services including trimming and removal services.	es. Bid Solicitation Number: 18-023				
4		Nature of interest				
7	Name of Interested Party	City, State, Country (place of busines		(check applicable)		
_				Controlling	Intermediary	
	1					
			= ==			
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5 Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION					
	ly name is Dubwah Evans, and my date of birth is 89.78					
	My address is PO BOX 1808 , Round Rock TX , 78680 , USA . (state) (zip code) (country)					
	I declare under penalty of perjury that the foregoing is true and correct.					
	Executed in William Son County, State of Toxas, on the 12 day of July, 20 8. (month) (year)					
	that <					
	Signature of authorized agent of contracting business entity					
		(Declarant)				