## **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.  Mike Pietsch, P.E., Consulting Services Inc Garland, TX United States	Certificate Number:			
2	eing filed.		04/21/2020  Date Acknowledged:		
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.  000000 Assist with Insurance Rating				
4	Name of Interested Party City, State, Country (place of busin	iess)	Nature of interest (check applicable)  Controlling Intermediary		
_			Controlling	intermedialy	
				·	
		-		<del> </del>	
5	Check only if there is NO Interested Party.				
	My name is M. Ve Pietsel . and my date of I	birth is _			
	My address is 3101 5. Country Club Rd Gauland T	<b>X</b> .	75043 (zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct.  Executed in				
	Mike Cital  Signature of authorized agent of contracting business entity  (Declarant)				