

# 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:  
2016-135995

Date Filed:  
11/11/2016

Date Acknowledged:

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

Port Aransas Chamber of Commerce  
Port Aransas, 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.**

City of Port Aransas

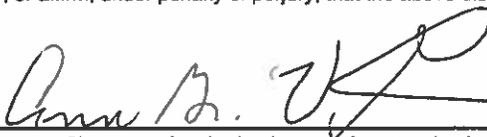
**3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.**

FY16/17 Contract  
Advertising and Promotional Grant

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

**5 Check only if there is NO Interested Party.**

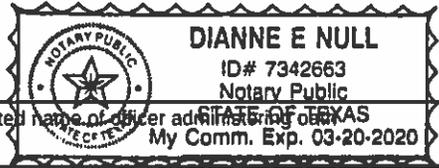
**6 AFFIDAVIT** I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

  
 \_\_\_\_\_  
 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ann B. Vaughan, this the 11 day of November, 2016, to certify which, witness my hand and seal of office.

  
 \_\_\_\_\_  
 Signature of officer administering oath



Printed name of officer administering oath: DIANNE E NULL Title of officer administering oath: \_\_\_\_\_  
 State of TEXAS