

# 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:  
 2017-255372

Date Filed:  
 08/30/2017

Date Acknowledged:  
 9-19-17

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

Emergicon  
 Forney, 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.**

WISE COUNTY

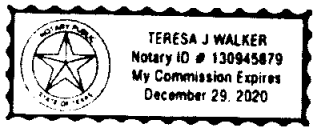
**3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.**

EMS BILLING FY17  
 EMS BILLING & COLLECTIONS

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



*[Signature]*  
 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Christopher Turner, this the 30th day of August, 2017, to certify which, witness my hand and seal of office.

*[Signature]* Teresa J. Walker Notary Public  
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath