

# 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:  
2016-44697

Date Filed:  
04/25/2016

Date Acknowledged:

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

FOCUS Foundation  
Corpus Christi, 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.**

Nueces 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.**

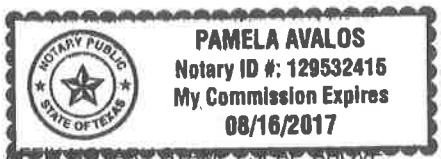
FY15/16 Diabetes Contract  
Diabetes Education for Youth

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.



Gina Prince  
Signature of authorized agent of contracting business entity

Sworn to and subscribed before me, by the said Gina Prince, this the 25<sup>th</sup> day of April, 2016, to certify which, witness my hand and seal of office.

Pamela Avalos  
Signature of officer administering oath

Pamela Avalos  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath