VOL. 98 PAGE 0772

IBE

Tree & Moving Services, LLC

ESTIMATE

P.O. Box 165

Carthage, TX 75633 Phone: [903-693-4929] Fax: [903-693-3161] Date: 5/17/2016

Customer: Fred Hightower (Maintenance) for Panola County

ADDRESS

110 S. Sycamore Street 106 Carthage, Texas 75633

Cell phone# (903)692-2844

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Other C	omments	*		
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If you have any Questions about this bid, Please Contact IBF @ 903-693-4929

Thank You For Your Business!

CERTIFICATE OF INTERESTED PARTIES

VOL.

 $98\,\mathrm{PAGE}\,0773\,$ form 1295

								
	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	lame of business entity filing form, and the city, state and country of the business entity's place if business.			Certificate Number:				
	IBF Tree & Moving Services, LLC	ı	2010-02940					
	Carthage, TX United States		Date Filed:					
2	Name of governmental entity or state agency that is a party to the contract for which the form is being filed.			05/27/2016				
	Panola County Extension Office	Date Acknowledged:						
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provided	ntract, and prov	/ide a					
	2016-46 tree removal service							
4				Nature of				
	Name of Interested Party	City, State, Country (place of busine	ess) -	(check ap				
— Вι	uchanan, Matthew	Carthage, TX United States		Controlling X	Intermediary			
			_					
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5	Check only if there is NO Interested Party.							
6	AFFIDAVIT I swear, or a	affirm, under penalty of perjury, that the	above o	disclosure is true	e and correct.			
	KIM Q. GOODWIN Notary Public STATE OF TEXAS My Comm. Exp. June 10, 2016 Signature of authorized agent of contracting business entity							
	AFFIX NOTARY STAMP / SEAL ABOVE							
	Sworn to and subscribed before me, by the said <u>Matthew Buchanan</u> , this the <u>3/37</u> day of <u>May</u> , 20_16_, to certify which, witness my hand and seal of office.							
_	Lim D. Goodwa Kim Q. (soodwin	Ñota	aku				
	Signature of officer administering oath Printed name of o	officer administering oath Ti	itle of of	fficer-administeri	ing oath			