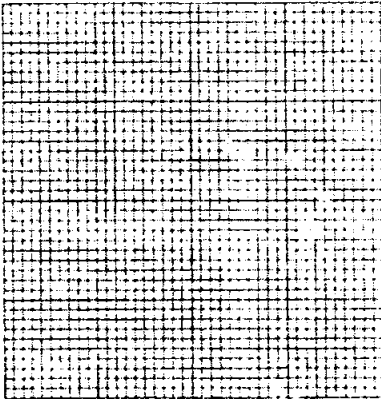




Date: May 8th 2018

Technician: Scott Henry

PROPOSAL FOR WORK OR SERVICES



This Proposal is Submitted to Wise County Phone _____

Address to be Serviced Wise County Courthouse - 101 N Trinity City _____ Zip _____

Billing Address PO Box 899 Decatur, TX 76234 City _____ Zip _____

Persons to be Contacted Mr. Glen Hughes Phone _____

SCOPE OF SERVICE

REGULAR MAINTENANCE PLANS:

- *MONTHLY \$ _____
- *EVERY OTHER MONTH \$ _____
- *QUARTERLY \$ _____
- *GENERAL ANNUAL PLAN \$ _____
- ANNUAL PLAN \$ _____
- FAP-FIRE ANT PROGRAM \$ _____

*General Pest Coverage Only

ONE TIME SERVICES:

- ORGANIC PEST CONTROL \$ _____
- F&B YARD/BACK/FRONT \$ _____
- FLEA TREATMENT-IN/OUT \$ _____
- PERIMETER/EAVES SPRAY \$ _____
- TREE SPRAY \$ _____
- GENERAL SPRAY \$ _____

- ATTIC/CRAWL SPACE DUST \$ _____
- RODENT BAITING \$ _____
- RODENT BOX/MOUSE BOX \$ _____
- TRAPPING \$ _____
- GERMAN ROACH TRTMNT \$ _____
- ANT TREATMENT \$ _____
- OTHER \$ 6,785.00

- 1,198.00
\$ 5,587.00

PESTS COVERED

- ___ GENERAL PESTS - roaches, spiders, crickets, earwigs, centipedes/millipedes, fire ants
- ___ RODENTS - rats & mice
- ___ GERMAN ROACHES
- ___ FLEAS/TICKS
- ___ FIRE ANTS - INTERIOR, PERIMETER, YARD
- ___ WASPS/BEES
- ___ STORED PRODUCT PESTS - weevils, Indian meal moths, etc.
- ___ SPRINGTAILS
- OTHER Subterranean Termites

- ___ ANTS (Check all that apply)
- ___ ACROBAT ANTS
 - ___ ARGENTINE ANTS
 - ___ CARPENTER ANTS
 - ___ CRAZY ANTS
 - ___ FIRE ANTS
 - ___ LITTLE BLACK ANTS
 - ___ ODOROUS HOUSE ANTS
 - ___ PHARAOH ANTS
 - ___ ALL ANTS LISTED ABOVE

LETTER DENOTES COVERAGE

- (A) ANNUAL COVERAGE
- (B) GEN. ANN. COVERAGE
- (C) FAP COVERAGE
- (D) GENERAL COVERAGE

ADDITIONAL INFORMATION

Treatment price will be \$5,587.00 after credits from Treatments done 3/24/16 & 4/2/16 @ \$599 each
 Treatment to all areas of Active Infestation and Entire Exterior Perimeter. Warranty to Entire Building
 Interior and Exterior. Two Year Warranty can be renewed at \$999 thereafter.

Payment and applicable tax is to be made at time service is rendered by: Cash / Check / Credit Card

ACCEPTANCE OF PROPOSAL

The above prices, description of services to be performed are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Accepted [Signature] Date 5-14-18 2018



1-800-310-BUGS
TPCL # 3875

Date: May 8th 20 18

1832 Norwood Plaza • Hurst, Texas 76054 • (817) 354-5350 • 1 (800) 310-BUGS

Pest Control Service Agreement

THIS AGREEMENT IS MADE BETWEEN MID-CITIES PEST CONTROL, INC. AND Wise County
ADDRESS TO BE SERVICED 101 N. Trinity Decatur, TX 76234
PERSON TO BE CONTACTED: Colen Hughes, Thomas Aaberg
BILLING ADDRESS P.O. Box 899 Decatur, TX 76234

Pests excluded from regular service are: Flying insects, Stored Product Pests, Carpenter Ants, Pharaoh Ants, Rodents, Fleas, Ticks and Termites. (Excludes Annual Plan)

TYPE OF SERVICE <u>Termite</u>	<input type="checkbox"/>	JAN	<input type="checkbox"/>	APR	<input type="checkbox"/>	JULY	<input type="checkbox"/>	OCT
	<input type="checkbox"/>	FEB	<input type="checkbox"/>	MAY	<input type="checkbox"/>	AUG	<input type="checkbox"/>	NOV
	<input type="checkbox"/>	MAR	<input type="checkbox"/>	JUN	<input type="checkbox"/>	SEPT	<input type="checkbox"/>	DEC

SERVICES TO BE PERFORMED DURING THE INDICATED MONTHS.

THIS AGREEMENT IS EFFECTIVE FOR ONE YEAR BEGINNING Date of Completion 20 AND EXPIRES 1 year 20 18

SERVICE GUARANTEE: WE AGREE TO APPLY CHEMICALS TO CONTROL PESTS IN ACCORDANCE WITH TERMS AND CONDITIONS OF THIS SERVICE AGREEMENT. ALL LABOR AND MATERIALS WILL BE FURNISHED TO PROVIDE THE MOST EFFICIENT PEST CONTROL AND MAXIMUM SAFETY REQUIRED BY FEDERAL, STATE AND CITY REGULATIONS. THE CUSTOMER AGREES TO MAKE THE PREMISES AVAILABLE FOR SERVICE AND ACCEPTS SUCH SERVICE AS INDICATED. THIS SERVICE COVERS INSIDE OF HOME AND OUTSIDE FOOTING ONLY, UNLESS OTHERWISE INDICATED.

SERVICE RENEWAL: THIS AGREEMENT SHALL BE FOR AN INITIAL PERIOD OF ONE YEAR AND WILL RENEW ITSELF ANNUALLY UNLESS EITHER PARTY CANCELS THIS AGREEMENT BY GIVING **THIRTY DAYS WRITTEN NOTICE** BEFORE ANY EXPIRATION DATE.

ADDITIONAL INFORMATION: Subterranean termite treatment includes an initial warranty of 2 years. Treatment price is after credits from prior "Spot" treatments completed 3/24/2016 and 4/2/2016 at \$599 each.

THIS SERVICE AGREEMENT MAY BE PAID EITHER AT THE TIME SERVICES ARE RENDERED OR PAID IN ADVANCE.

Treatment
COST 6,785.00
- 1,198.00 credit
SALES TAX (IF APPLICABLE) 0
TOTAL \$ 5,587.00

ANNUAL Renewal
after two year warranty
COST 999.00
SALES TAX (if applicable) 0
TOTAL \$ 999.00

PAYMENT PLAN: 1ST PAYMENT \$ _____ DATE _____ 2ND PAYMENT \$ _____ DATE _____
3RD PAYMENT (ANNUAL PLAN ONLY) \$ _____ DATE _____ CC# _____ EXP. _____

ACCEPTANCE OF AGREEMENT

By COMPANY Randy Leal
authorized signature

DATE May 8 2018

By Customer [Signature]
authorized signature

DATE 5-14-18

Licensed and Regulated by the Structural Pest Control Board • PO Box 1927 • Austin, Texas 78767-1927

CONSUMER INFORMATION SHEET

The structural pest control industry is regulated by the Texas Department of Agriculture (TDA), Structural Pest Control Service (SPCS), PO Box 12647, Austin, TX 78711-2847. TDA licenses the businesses, certified applicators and technicians who perform structural pest control work. Certified applicators and technicians must pass a written examination in order to receive their licenses.

Pesticides must be registered with the United States Environmental Protection Agency (EPA) and TDA before they may be used in Texas. EPA registration is not a finding of product safety. Pesticides are designed to kill or control pests. Your risk of harm depends upon the degree of your exposure and your individual susceptibility.

Specific health and safety information varies between pesticides and types of exposures and is available on the label information or MSDS sheet, which can be supplied to you upon request from the licensed applicator. Take precautions when a treatment has been performed to avoid exposure to vulnerable individuals. Pesticides may be harmful if swallowed, inhaled, or absorbed through the skin. Avoid breathing dust or spray mist and any unnecessary contact with treated surfaces. If you desire specific information on precautions, refer to the pesticide label. The law requires that the application procedures specified on the label be followed.

If you have questions about the application, contact the business or person making the application. If you suspect a violation of the law regarding structural pest control, contact the SPCS. In case of a health emergency, seek immediate medical attention.

Pest Control signs must be posted prior to treatment in many instances. The signs should be posted in an area of common access at least 48 hours prior to treatment. The information sign will allow you to contact someone who can tell you what pesticide is being used.

If you are contracting for pest control services due to a home solicitation, you have the right to cancel the contract within 72 hours. You may exercise this right by notifying the pest control company that you do not wish to receive their service.

For general information on pesticides, contact the National Pesticide Information Center 1-800-858-7378.

For information concerning structural pest control laws, contact the Structural Pest Control Service at: (512) 306-8250 or 866-918-4461.

For information concerning the formulation and registration of pesticides, contact the TDA pesticide registration at (512) 463-7476 or 800-835-5832.

For non-emergency health information relating to pesticides, contact Texas Department of State Health Services (512) 458-7111.

REDUCED IMPACT SERVICE

In order to minimize the reliance on pesticides and reduce pest populations, a Reduced Impact Pest Control operator may recommend that you consider the sanitation or physical alteration of your work place or residence. It is your responsibility to follow those recommendations. Your pest control operator may or may not offer these services upon request. A proper inspection will provide the information necessary for you to choose the method of pest control which best suits your situation. Many pest problems can be solved without using pesticides.

This Reduced Impact Service will include an inspection report and treatment recommendations. You should review these and keep a copy for your records. Your cooperation in following the recommendations made by your service provider is essential to a reduced impact service program.

Pesticides may be used in a responsible and professional manner in a reduced impact pest control service. If you do not want a specific pesticide used or any pesticides used at all, you must note this in writing on the contract prior to the initiation of the service. If any specific pesticide or class of pesticides are not excluded, it may be used by the provider.

(FRONT)

• **REQUIRED BY THE TDA STRUCTURAL PEST CONTROL SERVICE** •

TEXAS SPCB TERMITE TREATMENT DISCLOSURE DOCUMENT

Service Provider Name & Phone #: **MID-CITIES PEST CONTROL 1 (800) 310-BUGS (2847)**

Property Owner: Wise Co. Courthouse Acct # 29470 Address: 101 N. Trinity
 City: Decatur State: TX Zip: 76234 Treatment Location: Exterior and Interior

Treatment Type: Partial Spot Bait Commercial Residential Pier & Beam Const. Slab Const.

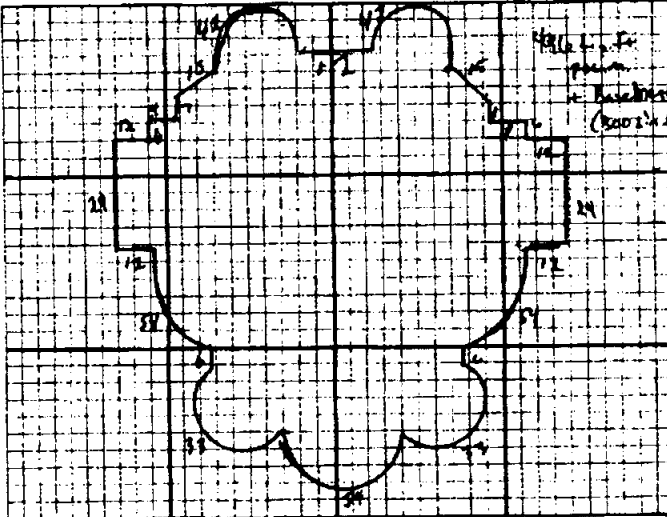
Approx. Measurements of Structures to be Treated: 496 linear feet + 300 Minimum # of Bait Stations Installed: _____
Basement

Percentage of Termicide(s) to be Applied at this Location: .016 % Estimated Gallons: 150

A Label of Termidor H-E Termicide(s) as been Attached as Part of this Document.

A label for any other pesticide recommended or used has been attached as part of this document. Warranty information (if any) including area covered, time period of warranty, renewal options and cost. The obligations of the pest control operator to re-treat for termite infestation or repair damage caused by termite infestations within the warranty period and conditions that could develop as a result of the owners action or inaction that would void the warranty has also been attached.

DIAGRAM OF STRUCTURE



DESIGNATION KEY

- Evidence of Active Infestation A
- Evidence of Prev. Infestation P
- Subterranean Termites S
- Formosan Termites F
- Drywood Termites D
- Area to be Drilled X
- Conductive Condition C
- Area to be Baited B
- Area to be Trenched O
- Area to be Rodded R
- Bait Station BS
- Physical Barrier BT

**INACCESSIBLE and/or
OBSTRUCTED AREAS:**

SUBTERRANEAN TERMITE CONTROL

Mid-Cities Pest Control agrees to furnish the labor and materials necessary to provide treatment for subterranean termite control on the structure at the above address in accordance with the application description and diagram attached. Upon completion of the above said work, the undersigned agrees to pay the sum of option _____

Treatment Options:

PRODUCT	PRICE	WARRANTY	TERMS/FEES
A <u>Termidor H-E</u>	<u>\$6,385.00</u>	<u>2 yrs</u>	Ren. \$ <u>479.00</u>
B <u>treatment</u>	<u>\$599.00</u>	Ren. _____	Ren. \$ _____
C <u>treatment</u>	<u>\$599.00</u>	Ren. _____	Ren. \$ _____
D _____	<u>\$587</u>	Ren. _____	Ren. \$ _____

Included with this initial treatment is a "warranty" against termite infestation re-occurrence for one year. As an option, this warranty can be renewed each year for an annual fee (see above). As long as the structure is under agreement, it will be treated as required at any time at no additional charge. This fee must be paid prior to the warranty anniversary date each year.

If annual payment is not received before the renewal date, this agreement will be canceled, relieving Mid-Cities of any further obligation. This agreement is not a guarantee, nor a warranty against previous or future termite activity or damage. This agreement is only transferable with written notification to Mid-Cities Pest Control along with a transfer fee of \$50.00 (+ tax).

A Subterranean or Formosan Termite Treatment may be a Partial Treatment or a Spot Treatment. (These types of treatments are defined as follows:)

- **PERIMETER BEAM:** Generally defined as the treatment of the outer perimeter including porches, patios and treatment of the attached garage. In crawl space, treatment would include any soil to structure contacts as well as removal of any wood debris on the ground.
- **SLAB CONSTRUCTION:** Generally defined as treatment of the perimeter and all known slab penetrations and any known expansion joints or stress cracks.
- **PARTIAL TREATMENT:** Any treatment which is less than what is typically considered a full treatment. This technique allows a wide variety of treatment strategies but is more involved than a spot treatment. (Treatment of the perimeter and both traps are examples of partial treatments.)
- **SPOT TREATMENT:** Any treatment which concerns a limited, defined area that is intended to protect a specific location or "spot". Often there are adjacent areas susceptible to termite infestation which are not treated.
- **BAITING SYSTEM:** This type of treatment may include interior and/or perimeter placement of monitoring or baiting stations along with routine inspection intervals. The baiting technique may include one or more baiting locations as prescribed by the product label and instructions.
- **PHYSICAL BARRIER:** If a physical device is used, the square footage of the physical device must be recorded and a diagram describing the installation will be provided.

Sue Army
 Sig. of Certified Applicator (or) Technician Completing Est.

3875
 T.P.C.I. S

[Signature]
 Customer Signature

5-14-18
 Date (Mo / Day / Yr)

For all treatments there must be a graph showing exactly what will be treated. Treatment specifications and warranties for those treatments may vary widely. Review the pesticide label provided to you for minimum treatment specification. If you have any questions, contact the service provider or the Texas Department of Agriculture, P.O. Box 12647, Austin, Texas 78711-2647. Phone (800) 918-4481 (FAX) 800-232-2347

MID-CITIES PEST CONTROL, INC.

TDA TPCL # 0669226

1832 Norwood Plaza Hurst, TX 76054
817-354-5360 (800) 310-BUG8

DATE May 8th, 2018

TECH Scott Henry

Wise Co. Courthouse
Basement

NAME: _____ ADDRESS: _____ CITY: _____

ZIP: _____ HOME: _____ OTHER: _____ MAPSCO: _____

STRUCTURE

TYPE PROPERTY: RES. / COMM. / INDUSTRIAL

FOUNDATION: SLAB / PIER & BEAM

GARAGE: ATTACHED / DETACHED

ATTIC:

OTHER:

VISIBLE PROBLEMS

GARBAGE CANS

PET FOOD

WOOD PILE

GUTTERING

TREES / SHRUBS / VINES

DEBRIS PILE

FREEZE LINES

WINDOW CAULKING

PLUMBING PROTRUSIONS

ELECTRICAL PROTRUSIONS

FIREPLACE

SOFFIT/EAVES

GARAGE

PATIO DECK

THRESHOLDS

DOOR CAULKING

SOLUTIONS

FLEX TRACK

BIRD SLIDE

BIRD FLITE

POLLY SPIKE

SCARE EYE

SCHREECH OWL

SHOOTING

CAULKING

MECHANICAL EXCLUSION

SANITATION CORRECTION

ENVIRONMENTAL CORRECTION

WOOD REPLACEMENT

BIRD WIRE

BIRD COIL

DADDY LONG LEGS

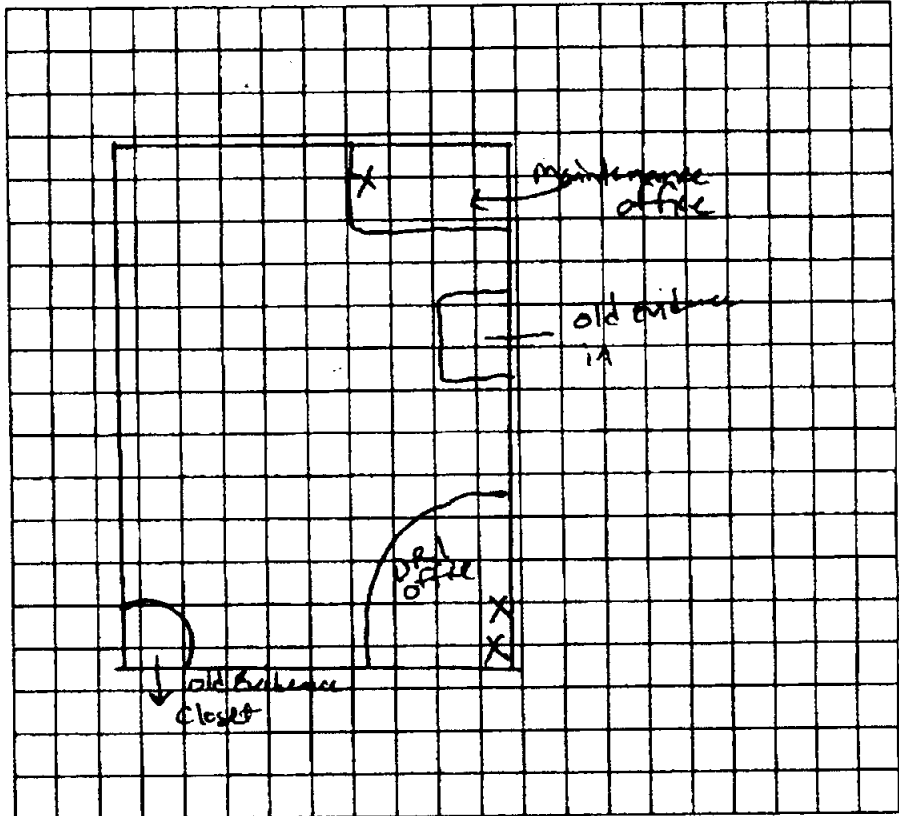
BIRD GUARD

OCTOPUS

STEALTH NET

EXCLUSION MESH

WIRE MESH



BASEMENT

WARRANTY

1 YEAR

6 MONTHS

MATERIALS PROVIDED

YES

NO

If wildlife trapping is needed, an additional charge will be required for the service. See wildlife service agreement for prices and terms of service.

If rodent control is required, an additional service fee of _____ will be charged with a warranty period of 1 year / 6 months beginning _____ to _____.

Payment for services will be made by: CASH / CHECK / CREDIT CARD

Credit Card Number _____ Exp. Date _____

The above prices, description of work or services to be performed, are satisfactory and are hereby accepted. Mid-Cities Pest Control, Inc. is authorized to do the work specified above on _____, 20____ at _____: _____ a.m. / p.m.

X _____
CUSTOMER

5-14-18₂₀ DATE X ASU AUTHORIZED REPRESENTATIVE

MID1218P26

Licensed and Regulated by the Texas Department of Agriculture (SPCB) P.O. Box 12847 • Austin, Texas 78711

MID-CITIES PEST CONTROL, INC.

TDA TPCL # 0568226

1832 Norwood Plaza Hurst, TX 76054
817-354-5350 (800) 310-BUGS

DATE May 8, 2018

TECH Scott Henry

NAME: Wise County Court ADDRESS: _____ CITY: _____
 ZIP: _____ HOME: _____ OTHER: _____ MAPSCO: _____

STRUCTURE

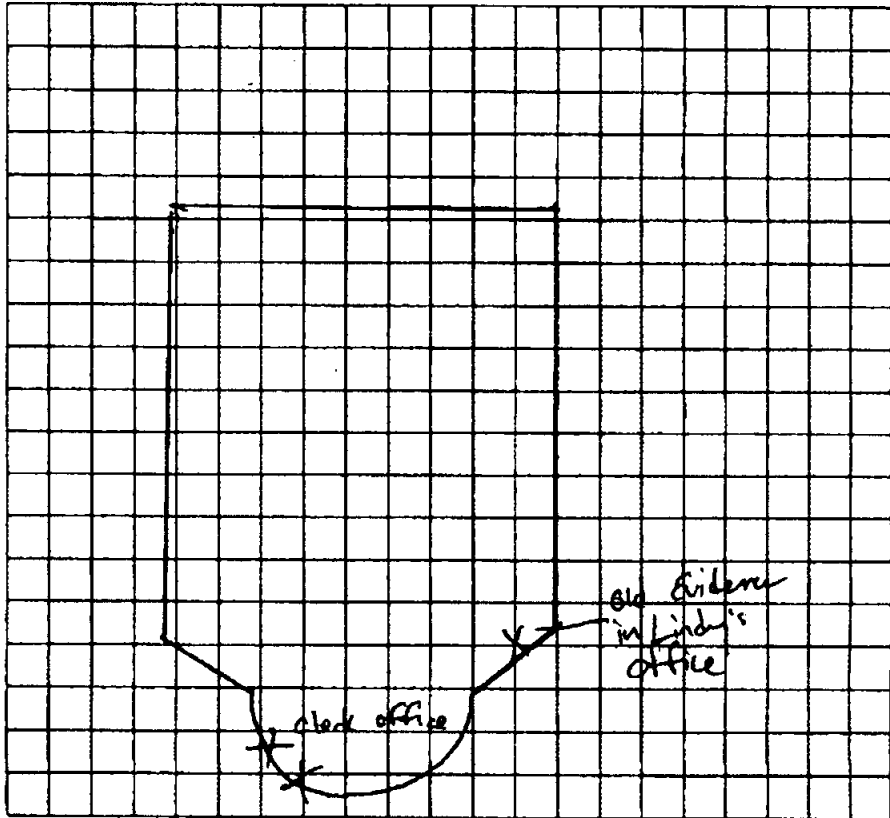
TYPE PROPERTY: RES. / COMM. / INDUSTRIAL
 FOUNDATION: SLAB / PIER & BEAM
 GARAGE: ATTACHED / DETACHED
 ATTIC:
 OTHER:

VISIBLE PROBLEMS

GARBAGE CANS	PLUMBING PROTRUSIONS
PET FOOD	ELECTRICAL PROTRUSIONS
WOOD PILE	FIREPLACE
GUTTERING	SOFFIT/EAVES
TREES / SHRUBS / VINES	GARAGE
DEBRIS PILE	PATIO DECK
FREEZE LINES	THRESHOLDS
WINDOW CAULKING	DOOR CAULKING

SOLUTIONS

FLEX TRACK	BIRD WIRE
BIRD SLIDE	BIRD COIL
BIRD FLITE	DADDY LONG LEGS
POLLY SPIKE	BIRD GUARD
SCARE EYE	OCTOPUS
SCHREECH OWL	STEALTH NET
SHOOTING	EXCLUSION MESH
CAULKING	WIRE MESH
MECHANICAL EXCLUSION	
SANITATION CORRECTION	
ENVIRONMENTAL CORRECTION	
WOOD REPLACEMENT	



WARRANTY

1 YEAR

6 MONTHS

MATERIALS PROVIDED

YES

NO

If wildlife trapping is needed, an additional charge will be required for the service. See wildlife service agreement for prices and terms of service.

If rodent control is required, an additional service fee of _____ will be charged with a warranty period of 1 year / 6 months beginning _____ to _____.

Payment for services will be made by: CASH / CHECK / CREDIT CARD

Credit Card Number _____ Exp. Date _____

The above prices, description of work or services to be performed, are satisfactory and are hereby accepted. Mid-Cities Pest Control, Inc. is authorized to do the work specified above on _____, 20____ at _____ a.m. / p.m.

X _____
 CUSTOMER

5-14-18 20____ X _____
 DATE AUTHORIZED REPRESENTATIVE

MID1218P25

Licensed and Regulated by the Texas Department of Agriculture (SPCS) P.O. Box 12847 - Austin, Texas 78711

MID-CITIES PEST CONTROL, INC.

TDA TPCL # 0569228

1832 Norwood Plaza Hurst, TX 76054
817-354-5390 (800) 310-BUGS

DATE May 8th 2018

TECH Scott Henry

NAME: Wise Co. Courthouse ADDRESS: _____ CITY: _____
2nd floor

ZIP: _____ HOME: _____ OTHER: _____ MAPSCO: _____

STRUCTURE

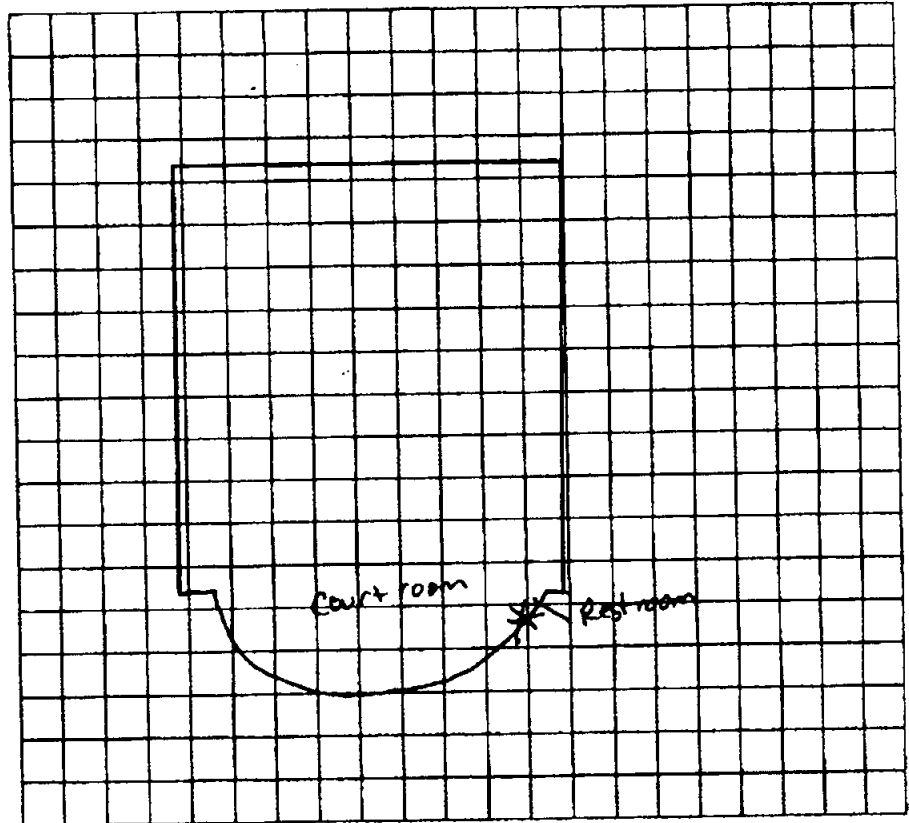
TYPE PROPERTY: RES. / COMM. / INDUSTRIAL
FOUNDATION: SLAB / PIER & BEAM
GARAGE: ATTACHED / DETACHED
ATTIC:
OTHER:

VISIBLE PROBLEMS

GARBAGE CANS	PLUMBING PROTRUSIONS
PET FOOD	ELECTRICAL PROTRUSIONS
WOOD PILE	FIREPLACE
GUTTERING	SOFFIT/EAVES
TREES / SHRUBS / VINES	GARAGE
DEBRIS PILE	PATIO DECK
FREEZE LINES	THRESHOLDS
WINDOW CAULKING	DOOR CAULKING

SOLUTIONS

FLEX TRACK	BIRD WIRE
BIRD SLIDE	BIRD COIL
BIRD FLITE	DADDY LONG LEGS
POLLY SPIKE	BIRD GUARD
SCARE EYE	OCTOPUS
SCHREECH OWL	STEALTH NET
SHOOTING	EXCLUSION MESH
CAULKING	WIRE MESH
MECHANICAL EXCLUSION	
SANITATION CORRECTION	
ENVIRONMENTAL CORRECTION	
WOOD REPLACEMENT	



WARRANTY

1 YEAR
 6 MONTHS

MATERIALS PROVIDED YES NO

If wildlife trapping is needed, an additional charge will be required for the service. See wildlife service agreement for prices and terms of service.

If rodent control is required, an additional service fee of _____ will be charged with a warranty period of 1 year / 6 months beginning _____ to _____.

Payment for services will be made by: CASH / CHECK / CREDIT CARD
Credit Card Number _____ Exp. Date _____

The above prices, description of work or services to be performed, are satisfactory and are hereby accepted. Mid-Cities Pest Control, Inc. is authorized to do the work specified above on _____, 20____ at _____: _____ a.m. / p.m.

X _____
CUSTOMER

5-14-18 20____ X _____
DATE AUTHORIZED REPRESENTATIVE

MID1218P25

Licensed and Regulated by the Texas Department of Agriculture (SPCS) P.O. Box 12847 • Austin, Texas 78711

MID-CITIES PEST CONTROL, INC.

TDA TPCL # 068226

1832 Norwood Plaza Hurst, TX 76064
817-354-5360 (800) 310-BUGS

DATE May 8th, 2018

TECH Scott Henry

NAME: Wire Co. Courthouse 3rd floor ADDRESS: _____ CITY: _____

ZIP: _____ HOME: _____ OTHER: _____ MAPSCO: _____

STRUCTURE

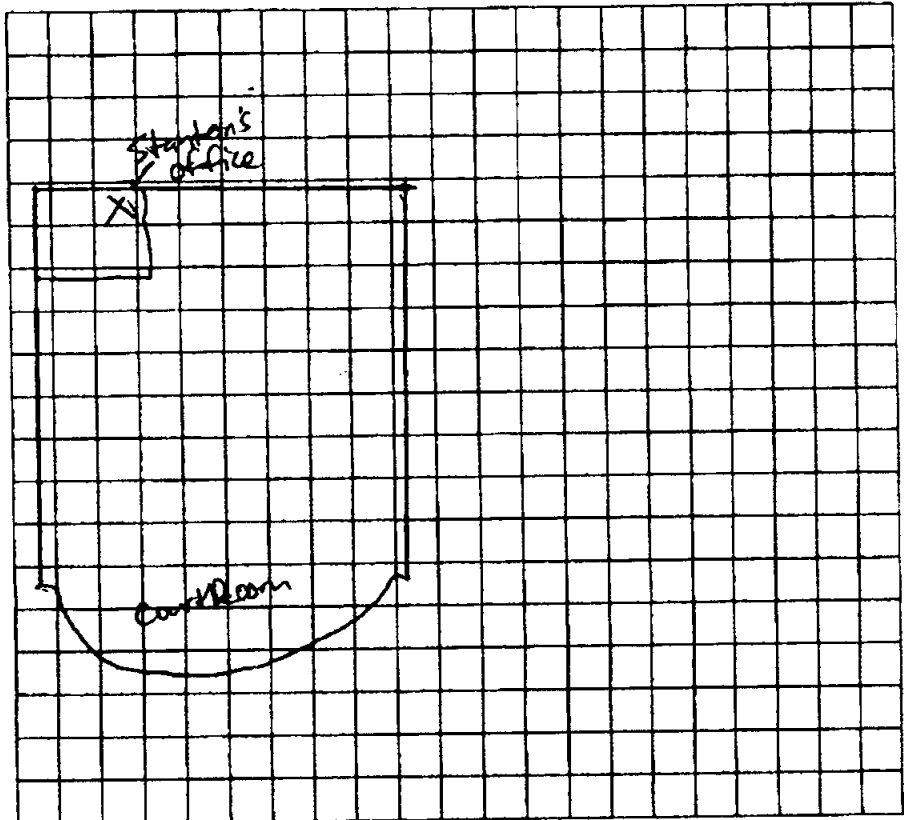
TYPE PROPERTY: RES. / COMM. / INDUSTRIAL
FOUNDATION: SLAB / PIER & BEAM
GARAGE: ATTACHED / DETACHED
ATTIC:
OTHER:

VISIBLE PROBLEMS

GARBAGE CANS	PLUMBING PROTRUSIONS
PET FOOD	ELECTRICAL PROTRUSIONS
WOOD PILE	FIREPLACE
GUTTERING	SOFFIT/EAVES
TREES / SHRUBS / VINES	GARAGE
DEBRIS PILE	PATIO DECK
FREEZE LINES	THRESHOLDS
WINDOW CAULKING	DOOR CAULKING

SOLUTIONS

FLEX TRACK	BIRD WIRE
BIRD SLIDE	BIRD COIL
BIRD FLITE	DADDY LONG LEGS
POLLY SPIKE	BIRD GUARD
SCARE EYE	OCTOPUS
SCHREECH OWL	STEALTH NET
SHOOTING	EXCLUSION MESH
CAULKING	WIRE MESH
MECHANICAL EXCLUSION	
SANITATION CORRECTION	
ENVIRONMENTAL CORRECTION	
WOOD REPLACEMENT	



WARRANTY

1 YEAR
 6 MONTHS

MATERIALS PROVIDED YES NO

If wildlife trapping is needed, an additional charge will be required for the service. See wildlife service agreement for prices and terms of service.

If rodent control is required, an additional service fee of _____ will be charged with a warranty period of 1 year / 6 months beginning _____ to _____.

Payment for services will be made by: CASH / CHECK / CREDIT CARD
Credit Card Number _____ Exp. Date _____

The above prices, description of work or services to be performed, are satisfactory and are hereby accepted. Mid-Cities Pest Control, Inc. is authorized to do the work specified above on _____, 20____ at _____:____ a.m. / p.m.

X _____
CUSTOMER

5-14-18 20____ X ASU
DATE AUTHOR ZED REPRESENTATIVE

MID1218P25

Licensed and Regulated by the Texas Department of Agriculture (SPCS) P.O. Box 12847 • Austin, Texas 78711

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.

Mid-Cities Pest Control, Inc.
Hurst, TX United States

Certificate Number:
2018-353041

Date Filed:
05/14/2018

Date Acknowledged:
5-14-18

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.

2018 Termite Treatment
Subterranean Termite Treatment and Warranty

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.

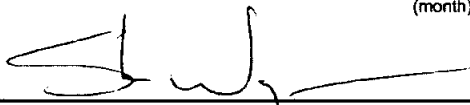
6 UNSWORN DECLARATION

My name is Steven Wayne, and my date of birth is April 7, 1959.

My address is 1805 Southpark Drive, Arlington, TX, 76013, US.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Tarrant County, State of Texas, on the 14 day of May, 20 18.
(month) (year)



Signature of authorized agent of contracting business entity
(Declarant)



WISE COUNTY ASSET CONTROL OFFICE
P.O. Box 952
400 W Walnut
Decatur, TX 76234

Phone – 940-627-3312

Fax – 940-627-4717

Wise County may not enter into a contract with a company for goods or services unless the contract contains a written verification from the company that it:

- (1) does not boycott Israel; and
- (2) will not boycott Israel during the term of the contract.

By signing this document, your company will be providing the written verification required by Texas Government Code Section 2270.002.

A handwritten signature in black ink, appearing to read "Steven Wayne", written over a horizontal line.

Signature

Steven Wayne

Printed Name

Sec/Treasurer

Title

Mid-Cities Pest Control, Inc.

Company Name

May 8, 2018

Date