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	ame of business entity filing form, and the city, state and country of the business entity's place f business.			Certificate Number:		
	Witmer Public Safety Group, Inc.	2024-1198184				
	Coatesville, PA United States	Date Filed:				
2	lame of governmental entity or state agency that is a party to the contract for which the form is being filed.			08/08/2024		
	ity of Round Rock			Date Acknowledged:		
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provide		fy the c	ontract, and prov	ide a	
	CM2023151					
	Fire Public Safety Equipment					
				Nature of interest		
4	Name of Interested Party City, State, Country (place of but		iness)	(check applicable)		
				Controlling Intermediary		
_						
				<u> </u>		
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	My name is Jeff Trego	of birth is	s	·		
	My address is 2 Beaver Run Rd	, Downingtown, F	PA,	19335	USA_	
	(street)	(city)	(state)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct	it.				
	Executed in Chester County	y, State of Pennsylvania, on the	8th			
		O—		(month)	(year)	
		Jeff Trego				
		Signature of authorized agent of co	ntractin	ng business entity		

CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 1

					1011				
	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 count	ntry of the business entity's place		Certificate Number:					
	f business.			2024-1198184					
	Witmer Public Safety Group, Inc.		Data	Filod:					
2	patesville, PA United States une of governmental entity or state agency that is a party to the contract for which the form is			Date Filed: 08/08/2024					
_	being filed.								
	City of Round Rock	ock			Date Acknowledged: 08/08/2024				
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.								
	CM2023151								
	Fire Public Safety Equipment								
4				Nature of interest					
	Name of Interested Party City, State, Country (place of b		ıess)	(check ap					
	<u></u>			Controlling	Intermediary				
	'								
5	Check only if there is NO Interested Party.								
6	UNSWORN DECLARATION								
	My name is	, and my date of birth is							
My address is									
	My address is(street)	(city) (s	state)	(zip code)	(country)				
	I declare under penalty of perjury that the foregoing is true and correct	ct.							
	Executed inCounty	y, State of , on the	(day of	, 20				
		,		(month)	(year)				
	Signature of authorized agent of contracting business entity (Declarant)								