FORM **1295**

1 of 2

	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.	Certificate Number:
	Halff Associates, Inc.	2023-1029509
	Richardson, 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.	06/02/2023
	City of Round Rock	Date Acknowledged:

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.

Eagle's Nest Street

Eagles Nest Schematic & Environmental, Structural Engineering Services

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)		
		Controlling	Intermediary	
Baker, Jessica	Richardson, TX United States	X		
Bertram, Shawn	Austin , TX United States	х		
Delgado, Jose	McAllen, TX United States	х		
Edwards, Mark	Richardson, TX United States	Х		
Ickert, Andrew	Fort Worth, TX United States	Х		
Jackson, Todd	Austin, TX United States	Х		
Killen, Russell	Richardson, TX United States	Х		
Hollis, Leigh	Frisco, TX United States	Х		
Miller, Steven	Austin, TX United States	Х		
Moya, Mike	Austin, TX United States	х		
Murray, Menton	McAllen, TX United States	Х		
Pylant, Ben	Fort Worth , TX United States	х		
Sagel, Joseph	Richardson, TX United States	Х		
Tanksley, Dan	Richardson, TX United States	Х		

FORM **1295**

2 of 2

						2 01 2	_	
	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			
1	Name of business entity filing form, and the city, state and country of the business entity's place of business.			CERTIFICATION OF FILING Certificate Number:				
	Halff Associates, Inc.			2023-1	1029509			
	Richardson, TX United States			Date Fi	iled:			
2	Name of governmental entity or state agency that is a party to the	e contract for which th	ne form is	06/02/2	2023			
	being filed.			D-4- A				
	City of Round Rock			Date A	cknowledged:			
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provided.			the con	itract, and pro	vide a	-	
	Eagle's Nest Street							
	Eagles Nest Schematic & Environmental, Structural Engineeri	ing Services						
4						f interest		
	Name of Interested Party	City, State, Country (place of busin		· ·		eck applicable)		
					Controlling	Intermediary	_	
				\perp			_	
							_	
							-	
							-	
							_	
5	Check only if there is NO Interested Party.						_	
							_	
ь	UNSWORN DECLARATION							
	My name is Eric J. Ratzman	,	and my date of b	oirth is				
	My address is 13620 Briarwick Drive Suite 100	, Austin	, <u>Tx</u>	,	78729	, <u>USA</u> .		
	(street)	(city)	(sta	ate)	(zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and correct	t.						
	Executed in WilliamsonCounty	, State of Texas	, on the _	2nd _{da}		, 20 <u>23</u>		
		_	in Q (6	1	(month)	(year)		
				<u>/</u>				
Signature of authorized agent of contracting business (Declarant)				ousiness entity				

FORM 1295

1 of 2

	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.	Certificate Number: 2023-1029509
	Halff Associates, Inc. Richardson, 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.	06/02/2023
	City of Round Rock	Date Acknowledged: 06/08/2023

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.

Eagle's Nest Street

Eagles Nest Schematic & Environmental, Structural Engineering Services

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)		
		Controlling	Intermediary	
Baker, Jessica	Richardson, TX United States	X		
Bertram, Shawn	Austin , TX United States	Х		
Delgado, Jose	McAllen, TX United States	х		
Edwards, Mark	Richardson, TX United States	Х		
Ickert, Andrew	Fort Worth, TX United States	Х		
Jackson, Todd	Austin, TX United States	Х		
Killen, Russell	Richardson, TX United States	Х		
Hollis, Leigh	Frisco, TX United States	Х		
Miller, Steven	Austin, TX United States	Х		
Moya, Mike	Austin, TX United States	х		
Murray, Menton	McAllen, TX United States	Х		
Pylant, Ben	Fort Worth , TX United States	х		
Sagel, Joseph	Richardson, TX United States	Х		
Tanksley, Dan	Richardson, TX United States	Х		

FORM **1295**

					2 of 2
	Complete Nos. 1 - 4 and 6 if there are interested parties.			OFFICE USE	-
	Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.			CERTIFICATION	OF FILING
1	Name of business entity filing form, and the city, state and countr of business.	ry of the business en		Certificate Number: 2023-1029509	
	Halff Associates, Inc.				
	Richardson, TX United States			Date Filed:	
2	Name of governmental entity or state agency that is a party to the being filed.	e contract for which t	the form is	06/02/2023	
	City of Round Rock			Date Acknowledged: 06/08/2023	:
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provide			the contract, and pro	vide a
	Eagle's Nest Street				
	Eagles Nest Schematic & Environmental, Structural Engineering	ing Services			
4				Nature o	of interest
4	Name of Interested Party	City, State, Country	(place of busine	ess) (check a	pplicable)
				Controlling	Intermediary
		_			
					<u> </u>
5	Check only if there is NO Interested Party.				
6	UNSWORN DECLARATION				
	My name is	,	, and my date of t	oirth is	·
	My address is(street)			,	_,
	(street)	(city)	(รเล	ate) (zip code)	(country)
	I declare under penalty of perjury that the foregoing is true and correct	t.			
	Executed inCounty	y, State of	, on the _		
				(month)	(year)
		Cignoture of outbori	izad agant of cont	recting business entity	
		Signature of authoriz	ized agent of conti (Declarant)	racting business entity	