

# 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:  
2026-1416162

Date Filed:  
02/04/2026

Date Acknowledged:

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

HDR Engineering, Inc.  
Round Rock, 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.**

City of Round Rock

**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.**

Engineering services including the development of plans, specifications, and estimates for the rehabilitation of an existing bridge on Old Settler's Boulevard in Round Rock, TX.

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	HDR, Inc.	Omaha, NE United States	X	
	Henderson, John	Omaha, NE United States	X	
	Graff, Neil	Omaha, NE United States	X	
	Meysenburg, Galen	Omaha, NE United States	X	
	LeCureux, David	Omaha, NE United States	X	
	Flatt, Paul	London United Kingdom	X	

5 Check only if there is NO Interested Party.

**6 UNSWORN DECLARATION**

My name is Cynthia Hernandez, and my date of birth is [REDACTED].

My address is 9311 San Pedro Avenue, Suite 1100, San Antonio, TX, 78216, USA.  
(city) (state) (zip code) (country)

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

Executed in Bexar County, State of Texas, on the 4th day of February, 2026.  
(month) (year)



Signature of authorized agent of contracting business entity  
(Declarant)

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	Flatt, Paul	London United Kingdom	X	

5 Check only if there is NO Interested Party.

**6 UNSWORN DECLARATION**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(city) (state) (zip code) (country)

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

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

\_\_\_\_\_  
Signature of authorized agent of contracting business entity  
(Declarant)