

# 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:  
2025-1400624

Date Filed:  
12/16/2025

Date Acknowledged:

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

AUSTIN ENGINEERING CO. INC.  
AUSTIN, 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.**

GREENLAWN BLVD  
QA/CHANGE ORDER NO. 1 - GREENLAWN BLVD FROM IH-35 TO SH-45

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	KELLER, KERRY	Austin, TX United States	X	
	KELLER, PAUL W	Austin, TX United States		X
	KELLER, TRAVIS W	Austin, TX United States		X
	KELLER, PAUL A	Austin, TX United States		X

**5 Check only if there is NO Interested Party.**

☐**6 UNSWORN DECLARATION**

My name is TRAVIS W. KELLER, VICE PRESIDENT, and my date of birth is [REDACTED].

My address is P.O. BOX 342349, AUSTIN, TX, 78734, USA.  
(city) (state) (zip code) (country)

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

Executed in TRAVIS County, State of TEXAS, on the 16TH day of DECEMBER, 2025.  
(month) (year)



Signature of authorized agent of contracting business entity  
(Declarant)

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	KELLER, KERRY	Austin, TX United States	X	
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	KELLER, TRAVIS W	Austin, TX United States		X
	KELLER, PAUL A	Austin, TX United States		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)