

CERTIFICATE OF INTERESTED PARTIES

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

Certificate Number:
2020-636894

Date Filed:
06/25/2020

Date Acknowledged:

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

Don Hewlett Chevrolet Buick Inc.
Georgetown, 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.

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Automotive parts

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Michael P Hewlett 2004 Irrevocable Trust	Georgetown, TX United States	X	
	Kathryn H Pharr 2004 Irrevocable Trust	Georgetown, TX United States	X	
	David R Hewlett 2004 Irrevocable Trust	Georgetown, TX United States	X	
	Don Ross Hewlett 2004 Irrevocable Trus	Georgetown, TX United States	X	
	Johnson, Kevin	Austin, TX United States	X	
	Pharr, Kathryn	Georgetown, TX United States	X	
	Hewlett, Patti	Georgetown, TX United States	X	
	Hewlett, Lan	Georgetown, TX United States	X	
	Hewlett, Mike	Georgetown, TX United States	X	
	Hewlett, Don Ross	Florence, TX United States	X	
	Hewlett, David	Austin, TX United States	X	

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Automotive parts

4 **Name of Interested Party** **City, State, Country (place of business)**

**Nature of interest
(check applicable)**

Control

Table 1. Summary of the main characteristics of the four groups of patients.

5 Check only if there is NO Interested Party.

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6 UNSWORN DECLARATIONS

My name is DAVID HEWLETT, and my date of birth is 12/12/1960.

My address is 7601 S. IH 35, Georgetown, TX, 78626, USA.
(street) (city) (state) (zip code) (country)

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

Executed in Williamson County, State of Texas, on the 25 day of June, 2020.
1 (month) (year)

_____, State of _____ on the _____
Mark D. DeLoach

**Signature of authorized agent of contracting business entity
(Declarant)**