## **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 cou	Certificate Numbe	r:		
of business. METRO FIRE APPARATUS SPECIALISTS, INC	2023-1039736			
HOUSTON, TX United States	Date Filed:			
2 Name of governmental entity or state agency that is a party to	06/28/2023			
being filed. City of Round Rock	Date Acknowledged:			
3 Provide the identification number used by the governmental er description of the services, goods, or other property to be provided.		the contract, and p	provide a	
PURCHASE OF FIREHOUSE SUPPLIES PUBLIC SAFETY AND FIREHOUSE SUPPLIES				
		Nature of interest		
Name of Interested Party	City, State, Country (place of busin		(check applicable)  Controlling Intermediary	
RUSSELL, CRAIG N	HOUSTON, TX United States	X	, memediary	
5 Check only if there is NO Interested Party.				
6 UNSWORN DECLARATION				
My name is <u>MONICA INGRAM</u>	, and my date of	birth is _		
My address is 17350 STATE HWY 249 STE 250 (street)	, HOUSTON , T	X , 77064 (zip code)	(country)	
I declare under penalty of perjury that the foregoing is true and corr	rect.			
Executed in HARRISCou	inty, State of TEXAS, on the			
M <u>or</u>	nica Ingram (DN: cn=Mo	(mor gned by Monica Ingram onica Ingram, o=Metro Fire Ap AS, email=mingram@mfas.co 106.28 06.33.30 05'00' otracting business ent	paratus Specialists, m, c=US	

## **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	Name of business entity filing form, and the city, state and count of business.	Certificate Number: 2023-1039736						
	METRO FIRE APPARATUS SPECIALISTS, INC	2020 1000100						
	HOUSTON, TX United States				Date Filed:			
2	Name of governmental entity or state agency that is a party to the	06/28/2023						
	being filed. City of Round Rock				Date Acknowledged:			
	City of Round Rock				07/13/2023			
3	Provide the identification number used by the governmental enti-	n number used by the governmental entity or state agency to track or identify the contract, and provide a						
3	description of the services, goods, or other property to be provide		,					
	PURCHASE OF FIREHOUSE SUPPLIES							
	PUBLIC SAFETY AND FIREHOUSE SUPPLIES							
				- 1	Nature of	interest		
4	Name of Interested Party	Name of Interested Party City, State, Country (place of busines						
	,			· · /	Controlling	Intermediary		
חו	ISSELL CDAIC N	HOUSTON TY Unit	tad States		х	,		
ĸι	RUSSELL, CRAIG N HOUSTON, TX United States				^			
				-				
					l			
5	Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION							
	My name is	, a	nd my date of b	oirth is _				
	My address is							
	My address is(street)	,(city)	,, (sta	, ate)	(zip code)	(country)		
I declare under penalty of perjury that the foregoing is true and correct.								
	Executed inCounty	/, State of	, on the _	da	y of	, 20		
					(month)	(year)		
		Signature of authorized agent of contracting business entity (Declarant)						