## **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.  | try of the business entity's place                              | 1             | ificate Number:<br>5-1272197 |                  |  |  |  |  |
|    | Star of Texas Events   | ,   | ~~.           | Jandar I Sandarer s          |                  |  |  |  |  |
| _  | Austin, TX United States   |   | 1             | Filed:                       |                  |  |  |  |  |
| 2  | Name of governmental entity or state agency that is a party to the being filed.  | e contract for which the form is                                | 02/2          | 20/2025                      |                  |  |  |  |  |
| ·. | City of Round Rock, Texas - Purchasing Division  |   |               | Acknowledged:                | :                |  |  |  |  |
|    |  |   | <u> </u>      |                              |                  |  |  |  |  |
| 3  | Provide the identification number used by the governmental entit description of the services, goods, or other property to be provid                                      | ty or state agency to track or identity ded under the contract. | the co        | ontract, and pro             | vide a           |  |  |  |  |
|    | 0000000  |   |               | U 10 10 10                   | ÷ .              |  |  |  |  |
|    | Professional tent and event rental services to support multiple establish a five-year contract for as-needed services to ensure  |   | ie City       | y. This solicitation         | on aims to       |  |  |  |  |
| 4  | GStabilisti a five your confidence for an income continue  | 5 WGII  |               | Nature o                     | f interest       |  |  |  |  |
| 4  | Name of Interested Party   | City, State, Country (place of busine                           | ess)          |                              | pplicable)       |  |  |  |  |
|    |  |   |               | Controlling                  | Intermediary     |  |  |  |  |
|    |  | 1   |               |                              |                  |  |  |  |  |
|    | · · · · · · · · · · · · · · · · · · ·  |   |               |                              |                  |  |  |  |  |
|    |  |   |               |                              |                  |  |  |  |  |
|    |  |   |               |                              | 7                |  |  |  |  |
|    |  | <u>L.</u>   |               |                              |                  |  |  |  |  |
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| _  |  |   |               |                              |                  |  |  |  |  |
| _  |  |   |               |                              |                  |  |  |  |  |
| 5  | Check only if there is NO Interested Party.  |   |               |                              |                  |  |  |  |  |
| 3  | UNSWORN DECLARATION  | . '   |               |                              |                  |  |  |  |  |
| i  | My name is John HONNING  | , and my date of bi   | oirth is      |                              |                  |  |  |  |  |
|    | My address is 7803 Fm 969  | 1 73  | <u>.</u>      | 70704                        | USA              |  |  |  |  |
|    | My address is (street)   | , Austin, Tx<br>(city) (state                                   | ite)          | (zip code)                   | (country)        |  |  |  |  |
|    |  |   |               |                              |                  |  |  |  |  |
|    | I declare under penalty of perjury that the foregoing is true and correct.   | ,   |               |                              |                  |  |  |  |  |
|    | Executed in TRALIS County,   | , State of TEKAS, on the _2                                     | 24_d          | av of FEBRUITA               | 4.202 <u>5</u> . |  |  |  |  |
|    | ,  |   |               | (month)                      | (year)           |  |  |  |  |
|    |  |   |               |                              |                  |  |  |  |  |
|    |  |   |               |                              |                  |  |  |  |  |
|    | Signature of authorized agent of contracting business entity   |   |               |                              |                  |  |  |  |  |
|    | (Declarant)  |   |               |                              |                  |  |  |  |  |

## **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 country of the business entity's place of business.                             |                                     |                    | Certificate Number:<br>2025-1272197     |              |  |  |  |  |
|  | Star of Texas Events   |                                     | 202.               | 3-12/219/                               |              |  |  |  |  |
|  | Austin, TX United States   |                                     | Date               | Filed:                                  |              |  |  |  |  |
| 2  | lame of governmental entity or state agency that is a party to the contract for which the form is  |                                     |                    | 02/20/2025                              |              |  |  |  |  |
|  | being filed.   | Date                                | Date Acknowledged: |   |              |  |  |  |  |
|  | City of Round Rock, Texas - Purchasing Division  |                                     |                    | 02/24/2025                              |              |  |  |  |  |
| Ļ  | Provide the identification number used by the governmental entit   | ty or state agancy to track or ider |                    |   | ido o        |  |  |  |  |
| 3  | description of the services, goods, or other property to be provided   |                                     | ury ure c          | contract, and prov                      | nue a        |  |  |  |  |
|  | 0000000  Professional tent and event rental services to support multiple events held annually throughout the City. This solicitation aims to |                                     |                    |   |              |  |  |  |  |
|  | establish a five-year contract for as-needed services to ensure  | Nature of interest                  |                    |   |              |  |  |  |  |
| 4  | Name of Interested Party  City, State, Country (place of busin   |                                     | siness)            | (check applicable)                      |              |  |  |  |  |
|  |  |                                     | J                  | Controlling                             | Intermediary |  |  |  |  |
|  |  |                                     |                    |   | -            |  |  |  |  |
|  |  |                                     |                    |   |              |  |  |  |  |
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|  |  |                                     |                    |   |              |  |  |  |  |
|  |  |                                     |                    |   |              |  |  |  |  |
| 5  | Check only if there is NO Interested Party.  |                                     |                    |   |              |  |  |  |  |
| 6  | UNSWORN DECLARATION  |                                     |                    |   |              |  |  |  |  |
|  | My name is   | , and my date of birth is           |                    |   |              |  |  |  |  |
|  |  |                                     |                    |   |              |  |  |  |  |
|  | My address is(street)  | (city)                              | , (state)          | (zip code)                              | (country)    |  |  |  |  |
|  | (onest)  | (oity)                              | (Glaid)            | (Zip oode)                              | (Southly)    |  |  |  |  |
| I declare under penalty of perjury that the foregoing is true and correct. |  |                                     |                    |   |              |  |  |  |  |
|  | Executed inCounty  | y, State of, on t                   | he                 |   | , 20         |  |  |  |  |
|  |  |                                     |                    | (month)                                 | (year)       |  |  |  |  |
|  |  |                                     |                    |   |              |  |  |  |  |
|  | Signature of authorized agent of contracting business entity (Declarant)   |                                     |                    |   |              |  |  |  |  |