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.	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.			E ONLY I OF FILING	
2	Name of business entity filing form, and the city, state and country of the business entity's place of business. K Friese + Associates, Inc. Austin, TX United States 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			Certificate Number: 2022-876817 Date Filed: 04/21/2022 Date Acknowledged:		
		Sty of Round Rook				
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provided 000000 Kenney Fort Blvd Ext. Professional Engineering Services	ity or state agency to track or identify ded under the contract.	the co			
4	Name of Interested Party	City, State, Country (place of busin	iess)	(check ap	of interest pplicable)	
Fri	iese, Karen	Austin, TX United States		Controlling X	Intermediary	
	Check only if there is NO Interested Party.					
	UNSWORN DECLARATION					
	My name is Thomas M. Owens, P.E.	, and my date of	birth is			
	My address is1120 S. Capital of Texas Highway_ (street)		EX_, state)	78746 (zip code)	, <u>USA</u> . (country)	
	I declare under penalty of perjury that the foregoing is true and correct	x.				
	Executed inCounty	ty, State of <u>Texas</u> , on the	_21_d	day of <u>April</u> (month)	, 20 <u>22</u> . (year)	
Signature of authorized agent of contracting business entity (Declarant)						

CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

					1 of 1		
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	K Friese + Associates, Inc.		202	12 070017			
	Austin, TX United States		0.44	e Filed:			
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	City of Round Rock				Date Acknowledged: 04/21/2022		
3	Provide the identification number used by the governmental ent description of the services, goods, or other property to be provi			contract, and prov	vide a		
	000000 Kenney Fort Blvd Ext. Professional Engineering Services						
4	Name of Interested Party City, State, Country (place of bus			Nature of inte			
			place of business)		heck applicable)		
Fr	iese, Karen	Austin, TX United S	Controlling	Intermediary			
_							
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
	My name is	is	·				
	My address is			_,	.,		
	(street)	(city)	(state)	(zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and correct	ct.					
	Executed inCount	ty, State of	, on the				
				(month)	(year)		
		Signature of authorize	ed agent of contracti Declarant)	ng business entity			