

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.
Associated Construction Partners, Ltd.
Boerne, TX United States

Certificate Number:
2020-654605

Date Filed:
08/07/2020

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
City of Rock Rock

Date Acknowledged:

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.
000000
Lake Georgetown Chemical Feed System

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Simpson, Jill	Boerne, TX United States	X	

5 Check only if there is NO Interested Party.

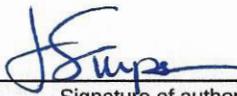
6 UNSWORN DECLARATION

My name is Jill Simpson, and my date of birth is [REDACTED].

My address is 215 W Bandera Rd., Ste. 114-461, Boerne, TX, 78006, USA.
(street) (city) (state) (zip code) (country)

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

Executed in Kendall County, State of Texas, on the 7th day of August, 20 20.
(month) (year)



Signature of authorized agent of contracting business entity
(Declarant)