## CERTIFICATE OF INTERESTED PARTIES FORM 1295 1 of 1 OFFICE USE ONLY 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. **CERTIFICATION OF FILING** Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2024-1113758 G T DISTRIBUTORS, INC Date Filed: PFLUGERVILLE, TX United States 01/19/2024 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Date Acknowledged: City of Round Rock, TX 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. 00000 UNIFORM SUPPLY SERVICES FOR THE POLICE DEPARTMENT AND FIRE DEPARTMENT OF THE CITY OF ROUND ROCK Nature of interest (check applicable) Name of Interested Party City, State, Country (place of business) Controlling Intermediary 5 Check only if there is NO Interested Party. Х **6 UNSWORN DECLARATION** My name is DAVID CURTIS and my date of birth i My address is 1124 NEW MEISTER LN. STE. 100 78660 USA **PFLUGERVILLE** TΧ (city) (state) (zlp code) (country) I declare under penalty of perjury that the foregoing is true and correct. Executed in TRAVIS \_County, State of TEXAS on the 19TH day of JANUARY 20 23

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: 2024-1113758		
	G T DISTRIBUTORS, INC			2024-1113736		
	PFLUGERVILLE, TX United States		Date Filed:			
2	Name of governmental entity or state agency that is a party to the contract for which the form is		01/1	01/19/2024		
	being filed. City of Round Rock, TX			Date Acknowledged: 01/19/2024		
			01/1	.9/2024		
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.					
	00000 UNIFORM SUPPLY SERVICES FOR THE POLICE DEPARTMENT AND FIRE DEPARTMENT OF THE CITY OF ROUND ROCK					
4				Nature of interest		
	Name of Interested Party City, State, Country (place of I		ness)	(check ap		
				Controlling	Intermediary	
		_				
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	My name is	, and my date of birth is				
My addresa is						
	My address is(street)		state)	(zip code)	(country)	
	declare under penalty of perjury that the foregoing is true and correct.					
	Executed inCounty	, State of, on the				
				(month)	(year)	
	Signature of authorized agent of contracting business entity					
		Signature of authorized agent of contracting business entity (Declarant)				