## **CERTIFICATE OF INTERESTED PARTIES**

FORM 1295

1 of 1

_			101						
	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	me of business entity filing form, and the city, state and country of the business entity's place business.		Certificate Number: 2022-837833						
	Valor Fire Protection		2022 007000						
	Round Rock, TX United States		Date Filed:						
2	me of governmental entity or state agency that is a party to the contract for which the form is ng filed.		01/07/2022						
	City of Round Rock		Date Acknowledged:						
3		vide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a cription of the services, goods, or other property to be provided under the contract.							
	000000								
	Fire Suppression Services								
4	Name of Interested Party City, State, Country (place of busing								
_			Controlling Intermedi	lary					
				$\dashv$					
5	Check only if there is NO Interested Party.								
6	UNSWORN DECLARATION								
	My name is somethin Coul	, and my date of b	pirth is _						
	My address is 440 c.e. 487 (street)	Taylor , The (city) (sta	te), 176574, with ate) (zip code) (country)	NO.					
	I declare under penalty of perjury that the foregoing is true and correct.								
	Executed in County, S	state of Texas, on the		<u>-</u> .					
	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	lame of business entity filing form, and the city, state and country of the business entity's place			Certificate Number:				
	of business.  Valor Fire Protection				2022-837833			
	Round Rock, TX United States		Date	e Filed:				
2	Name of governmental entity or state agency that is a party to th	e contract for which the form is		01/07/2022				
-	being filed.	o contract for which the form is						
	City of Round Rock			Date Acknowledged: 01/07/2022				
3	Provide the identification number used by the governmental enti	tion 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	ded under the contract.	•					
	000000							
	Fire Suppression Services							
4				Nature of interest				
7	Name of Interested Party City, State, Country (place of bus		iness)	(check applicable)				
				Controlling	Intermediary			
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)		(-t-t-)	,	.,			
	(street)	(city)	(state)	(zip code)	(country)			
	I declare under penalty of perjury that the foregoing is true and correct.							
	Executed inCount	y, State of, on th	e	_day of	, 20			
				(month)	(year)			
	Signature of authorized agent of contracting business entity (Declarant)							