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. Siddons Martin Emergency Group, LLC Houston, TX United States			Certificate Number: 2022-926659 Date Filed:			
2					08/25/2022 Date Acknowledged:		
3	Provide the identification number used by the government description of the services, goods, or other property to be 000000 BME Mini Pumper Fire Apparatus			contract, and prov	vide a		
4	Name of Interested Party	City, State, Country	(place of business)	iness) Nature of interest (check applicable) Controlling Intermediary			
Si	ddons Martin Holding, Inc.	Houston, TX Unite	Houston, TX United States				
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
	My name is Kathryn Williams	·	and my date of birth	n is	·		
	My address is 1362 E. Richey Road (street)	, Houston (city)	, _TX (state)		, <u>USA</u> . (country)		
	I declare under penalty of perjury that the foregoing is true and	d correct.					
	Executed in Harris	_County, State of _ Texas	, on the25	day ofAugust(month)	, 20 <u>22</u> . (year)		
		V Solm C	•				
		Signature of authoriz	zed agent of contract	ting business entity			

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. Siddons Martin Emergency Group, LLC Houston, TX United States			Certificate Number: 2022-926659 Date Filed:					
2	Name of governmental entity or state agency that is a party to the being filed. City of Round Rock	Date	08/25/2022 Date Acknowledged: 09/08/2022						
3		cation number used by the governmental entity or state agency to track or identify the contract, and provide a ervices, goods, or other property to be provided under the contract. Fire Apparatus							
4	Name of Interested Party	City, State, Country (place of bu	usiness)	Nature of interest (check applicable) Controlling Intermediary					
Si	ddons Martin Holding, Inc.	Houston, TX United States	х						
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)				
	I declare under penalty of perjury that the foregoing is true and correct.								
	Executed inCounty	v, State of, on	the	_day of(month)	, 20 (year)				
				(J,				
		Signature of authorized agent of contracting business entity (Declarant)							