

# 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.

JBS Water, Inc.  
Houston, TX United States

Certificate Number:  
2017-155667

Date Filed:  
01/18/2017

2 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, TX

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.

Water Audit  
Provide professional services for water distribution system audit, analysis of metered production and consumption and non revenue water in Round Rock.

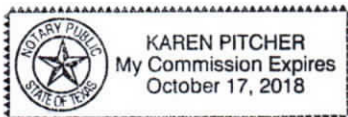
| 4 | Name of Interested Party | City, State, Country (place of business) | Nature of interest<br>(check applicable) |              |
|---|--------------------------|------------------------------------------|------------------------------------------|--------------|
|   |                          |                                          | Controlling                              | Intermediary |
|   |                          |                                          |                                          |              |
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|   |                          |                                          |                                          |              |

5 Check only if there is NO Interested Party.



### 6 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



*[Signature]*  
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said James B. Smith, this the 19th day of January, 20 17, to certify which, witness my hand and seal of office.

*[Signature]*  
Signature of officer administering oath

KAREN PITCHER  
Printed name of officer administering oath

NOTARY PUBLIC  
Title of officer administering oath