

CERTIFICATE OF INTERESTED PARTIES**FORM 1295**

1 of 2

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.**

Half Associates, Inc
Richardson, TX United States

Certificate Number:
2017-222225

Date Filed:
06/12/2017

Date Acknowledged:

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

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
Design of Heritage Trail West park and trail system.

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Bucchin, Matt	Austin, TX United States	X	
	Zapalac, Russell	Austin, TX United States	X	
	Tanksley, Dan	Richardson, TX United States	X	
	Skipwith, Walter	Richardson, TX United States	X	
	Murray, Menton	McAllen, TX United States	X	
	Plugge, Roman	Richardson, TX United States	X	
	Moya, Mike	Austin, TX United States	X	
	Kunz, Pat	Richardson, TX United States	X	
	Kuhn, Greg	Richardson, TX United States	X	
	Killen, Russell	Richardson, TX United States	X	
	Ickert, Andrew	Fort Worth, TX United States	X	
	Jackson, Todd	Austin, TX United States	X	
	Edwards, Mark	Richardson, TX United States	X	
	Craig, Matthew	Richardson, TX United States	X	
	Bargainer, Tim	Austin, TX United States	X	
	Adams, Bobby	Houston, TX United States	X	

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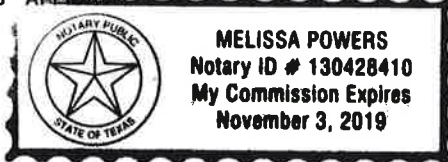
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5 Check only if there is NO Interested Party. ☐

6 AFFIDAVIT



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

Matthew Buccchin
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Matthew Buccchin, this the 13th day of June, 20 17, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Melissa Powers
Printed name of officer administering oath

Notary/Admin
Title of officer administering oath