

# 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:**  
2017-279504

**Date Filed:**  
11/02/2017

**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

**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.**

Chisholm Valley Drainage Asses  
Engineering

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

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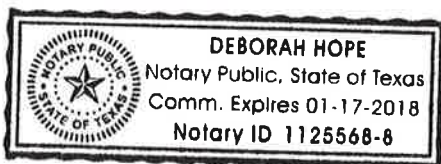
Chisholm Valley Drainage Asses  
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			Controlling	Intermediary

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.



*Cindy Engelhardt*  
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Cindy Engelhardt, this the 2nd day of November, 2017, to certify which, witness my hand and seal of office.

*Deborah Hope*  
Signature of officer administering oath

Deborah Hope  
Printed name of officer administering oath

Executive Assistant  
Title of officer administering oath