## **CERTIFICATE OF INTERESTED PARTIES**

## FORM 1295

1 of 2

			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	
<ol> <li>Name of business entity filing form, and the city, state and country of the business entity's place of business. Municipal Code Corporation Tallahassee, FL United States</li> <li>Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Round Rock, TX</li> </ol>		Certificate Number: 2019-555530 Date Filed: 10/25/2019 Date Acknowledged:	
4 Name of Interested Party	City, State, Country (place of busine	ess) Nature of interest (check applicable) Controlling Intermedia	
Click, Blaine	Tallahassee, FL United States	X	
Lovelace, Julie	Tallahassee, FL United States	х	
Claiborne, Phillip	Tallahassee, FL United States	x	
Rasmussen, Steffanie	Tallahassee, FL United States	x	
Gilday, Brian	Tallahassee, FL United States	х	
Spinks, Cathlyn	Tallahassee, FL United States	x	
Langford, A. Lawton	Tallahassee, FL United States	х	
Watkins, J. Ben	Tallahassee , FL United States	х	
Grant, Harold	Tallahassee, FL United States	х	
Grant, W. Eric	Tallahassee, FL United States	х	
Barstow, Dale	Tallahassee , FL United States	x	
			-

Forms provided by Texas Ethics Commission

## **CERTIFICATE OF INTERESTED PARTIES**

## FORM 1295

			2 of 2		
Complete Nos. 1 - 4 and 6 if there are interested parties.			CE USE ONLY		
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.		CERTIFICATION OF FILING			
<ol> <li>Name of business entity filing form, and the city, state and country of the business entity's place of business.</li> </ol>		Certificate Number: 2019-555530			
Municipal Code Corporation		2013 00000			
Tallahassee, FL United States		Date Filed:			
2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.		10/25/2019			
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.					
000000	000000				
Supplementation, Online Code Hosting, and Republication of	of the Code or Ordinances				
4		Nature of interest			
Name of Interested Party	City, State, Country (place of busin				
		Cont	rolling Intermediary		
	,				
		-			
5 Check only if there is NO Interested Party.					
6 UNSWORN DECLARATION					
My name is Blaine Click, and my date of birth is 10/24/1979.					
My address is <u>FUO CAPITAL CITCLE 50</u> , <u>TANALASSE</u> , <u>FL</u> , <u>32310</u> , <u>USP</u> . (street) (city) (state) (zip code) (country)					
I declare under penalty of perjury that the foregoing is true and correct.					
Executed inCounty, State of <u>Flociclo</u> , on the <u>29</u> day of <u>Oct</u> , 20 <u>19</u> .					
Of me Of					
Signature of authorized agent of contracting business entity (Declarant)					