

**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**

Certificate Number:  
2020-665914

Date Filed:  
09/09/2020

Date Acknowledged:

**1 Name of business entity filing form, and the city, state and country of the business entity's place of business.**

Freese and Nichols, Inc.  
Fort Worth, TX United States

**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, Texas

**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.**

Lake Forest Drainage  
Provide professional engineering services as requested for the Lake Forest Drainage Assessment - Existing Conditions

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Taylor, Jeff	Houston, TX United States	X	
	Greer, Alan	Fort Worth, TX United States	X	
	Wolfhope, John	Austin, TX United States	X	
	Cole, Scott	Fort Worth, TX United States	X	
	Johnson, Kevin	Dallas, TX United States	X	
	Milrany, Cindy	Fort Worth, TX United States	X	
	Nichols, Michael	Fort Worth, TX United States	X	
	Coltharp, Brian	Fort Worth, TX United States	X	
	Pence, Robert	Fort Worth, TX United States	X	

**5 Check only if there is NO Interested Party.****6 UNSWORN DECLARATION**

My name is Stephanie Stephenson, and my date of birth is [REDACTED].

My address is 4055 International Plaza, Suite 200, Fort Worth, TX, 76109, USA.  
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Tarrant County, State of Texas, on the 9th day of Sept., 2020.  
(month) (year)

DocuSigned by:

*Stephanie Stephenson*

Signature of authorized agent of contracting business entity  
(Declarant)