

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:
2025-1357609

Date Filed:
09/02/2025

Date Acknowledged:

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

Box Gang Manufacturing LLC
Houston, 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 Killeen

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.

010825BXG
Waste Container - Frontloads

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.



6 UNSWORN DECLARATION

My name is Liffany Raye, and my date of birth is 9-5-63.

My address is 176736 E. Hardy Rd., Houston, Tx, 77032, Harris
(city) (state) (zip code) (country)

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

Executed in Harris County, State of Texas, on the 9 day of 2, 20 25.
(month) (year)

Liffany Raye
Signature of authorized agent of contracting business entity
(Declarant)

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Complete Nos. 1 - 4 and 6 if there are interested parties.
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OFFICE USE ONLY CERTIFICATION OF FILING

Certificate Number:
2025-1356091

Date Filed:
08/27/2025

Date Acknowledged:

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

Roll-Offs of America dba Roll Offs USA
Durant, OK 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 Killeen

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.

686-22
Refuse Containers

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Hankey, J. Daniel	Mead, OK United States	X	
	Hankey, Ray Jean	Mead, OK United States	X	

5 Check only if there is NO Interested Party.

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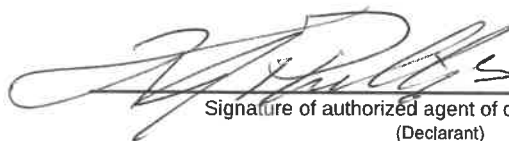
6 UNSWORN DECLARATION

My name is KENDELL PHILLIPS, and my date of birth is 08/24/69.

My address is PO BOX 727, DURANT, OK, 74702, USA.
(city) (state) (zip code) (country)

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

Executed in BRYAN County, State of OK, on the 27 day of AUG, 2025.
(month) (year)



Signature of authorized agent of contracting business entity
(Declarant)

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
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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.

Toter, LLC
Statesville, NC United States

Certificate Number:
2025-1356624

Date Filed:
08/28/2025

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 Kileen, TX

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.

120324-TOT
96-gallon garbage container

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Toter, LLC	Statesville, NC United States	X	

5 Check only if there is NO Interested Party.

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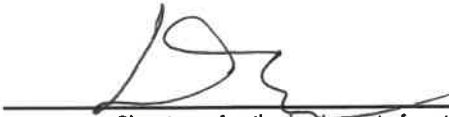
6 UNSWORN DECLARATION

My name is David Pelichet, and my date of birth is 1/12/1973.

My address is 6525 Carnegie Boulevard, Suite 300, Charlotte, NC, 28211, USA.
(city) (state) (zip code) (country)

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

Executed in Mecklenburg County, State of North Carolina, on the 28th day of August, 20 25.
(month) (year)


Signature of authorized agent of contracting business entity
David Pelichet, VP Finance (Declarant)

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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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.

Wastequip Manufacturing Company LLC
Statesville, NC United States

Certificate Number:
2025-1357454

Date Filed:
09/02/2025

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Killeen, 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.

Sourcewell Contract#010825-WQI
Waste Handling Equipment

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.



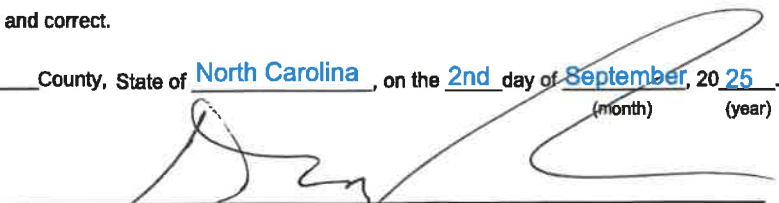
6 UNSWORN DECLARATION

My name is David Pelichet, and my date of birth is 1/12/1973.

My address is 6525 Carnegie Blvd, Suite 300, Charlotte, NC, 28211, USA.
(city) (state) (zip code) (country)

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

Executed in Mecklenburg County, State of North Carolina, on the 2nd day of September, 2025.
(month) (year)


Signature of authorized agent of contracting business entity
(Declarant)