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			
1	Name of business entity filing form, and the city, state and country of the business entity's place of business. INSITUFORM TECHNOLOGIES, LLC. Chesterfield, MO United States					2	Certificate Number: 2024-1187175 Date Filed:			
2	Name of governmental entity or state agency that is a party to the cobeing filed. City of Killeen				or which the fo	rm is	07/15/2024 Date Acknowledged:			
3		number used by the governes, goods, or other property on Phase I				or identify the	he contra	ıct, and prov	vide a	
4	Name of Interested Party			City, State, Country (place of business)				Nature of interest (check applicable) Controlling Intermediary		
Tullman, Robert				Chesterfield, MO United States					,	
Schoenekase, Daniel				Chesterfield, MO United States						
5	Check only if there is NO	Interested Party.	•							
6	UNSWORN DECLARATION	DN								
	My name isUrsu	ıla J. Youngblood		, and my date of birth isN/A						
	My address is	Goddard Avenue (street)		, <u>Ch</u>	esterfield (city)	,(stat		3005 (zip code)	, USA (country)	
	I declare under penalty of perjury that the foregoing is true and correct.									
	Executed in St Lo	ouis	County	, State of _	Missouri	, on the _1	5_day o	of July (month)	, 20 <mark>24</mark> . (year)	
				2	Isula	1. ye	ung	bood.	· · · · · · · · · · · · · · · · · · ·	
				Signature of authorized agent of contracting business entity (Declarant)						