

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.
 Toter, LLC
 Statesville, NC United States

Certificate Number:
 2024-1196995

Date Filed:
 08/06/2024

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 041521-TOT
 Purchase of Roll Carts

| 4 | Name of Interested Party | City, State, Country (place of business) | Nature of interest (check applicable) | |
|---|--------------------------|--|---------------------------------------|--------------|
| | | | Controlling | Intermediary |
| | Wastequip, LLC | Charlotte, NC United States | X | |
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5 Check only if there is NO Interested Party.

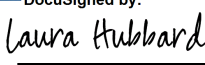
6 UNSWORN DECLARATION

My name is Laura P. Hubbard, and my date of birth is 4-13-1972.

My address is 841 Meacham Road, Statesville, NC, 28677, USA.
(street) (city) (state) (zip code) (country)

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

Executed in Iredell County, State of North Carolina, on the 6th day of August, 2025.
(month) (year)

DocuSigned by:

 Laura P. Hubbard
 Director of Municipal Sales
 Signature of authorized agent of contracting business entity
 (Declarant)

834FF567BB09498

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

Certificate Number:
2024-1198476

Date Filed:
08/08/2024

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.

040621BXG
Waste & Recycling equipment

| 4 | Name of Interested Party | City, State, Country (place of business) | Nature of interest (check applicable) | |
|---|--------------------------|--|---------------------------------------|--------------|
| | | | Controlling | Intermediary |
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5 Check only if there is NO Interested Party.

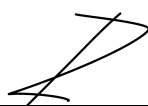
6 UNSWORN DECLARATION

My name is Rafael Marrero, and my date of birth is 08/19/65.

My address is 5811 N Ossinek Dr Spring TX 77386
(street) (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 8 day of August, 2024.
(month) (year)



Signature of authorized agent of contracting business entity
(Declarant)

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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 Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

**OFFICE USE ONLY
 CERTIFICATION OF FILING**

Certificate Number:
 2024-1197467

Date Filed:
 08/07/2024

Date Acknowledged:

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

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

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 #040621-WQI
 Waste Handling Equipment

| 4 | Name of Interested Party | City, State, Country (place of business) | Nature of interest (check applicable) | |
|---|--------------------------|--|---------------------------------------|--------------|
| | | | Controlling | Intermediary |
| | Wastequip, LLC | Charlotte, NC United States | X | |
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5 Check only if there is NO Interested Party.


6 UNSWORN DECLARATION

My name is Laura P Hubbard, and my date of birth is 4/13/1972.

My address is 841 Meacham Road, Statesville, NC, 28677, USA.
(street) (city) (state) (zip code) (country)

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

Executed in Iredell County, State of North Carolina, on the 7th day of August, 2024.
(month) (year)

DocuSigned by:

 834FF567850940E
 Signature of authorized agent of contracting business entity (Declarant)
 Laura P Hubbard
 Director of Municipal Sales