

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.
HJDJ American Lube Supply, Inc.
San Antonio, TX United States

Certificate Number:
2018-408305

Date Filed:
09/26/2018

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

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.
19-02
Petroleum Products

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

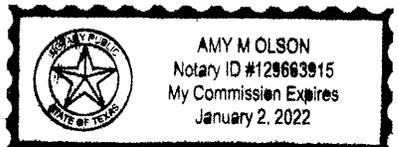
5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Greg Ricketts, and my date of birth is 10-15-53.
My address is 2887 Goat Creek Rd^{Lot 241}, Kerrville, TX, 78028.
(street) (city) (state) (zip code) (country)

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

Executed in Comal County, State of Texas, on the 26 day of Sept., 2018.
(month) (year)



[Handwritten Signature]
Signature of authorized agent of contracting business entity (Declarant)

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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

Date Acknowledged:
 10/31/2018

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 19-02
 Petroleum Products

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 _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

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

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

 Signature of authorized agent of contracting business entity
 (Declarant)

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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.
Arnold Oil Company of Austin, LP
AUSTIN, TX United States

Certificate Number:
2018-407893

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

Date Filed:
09/25/2018

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.

19-02
DEF Purchases

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Arnold, Rhonda	Austin, TX United States	X	
	Arnold, James F	Austin, TX United States	X	

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Roger Frank, and my date of birth is 12-2-1951.

My address is 5909 Burleson Rd, Austin, TX, 78744.

(street) (city) (state) (zip code) (country)

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

Executed in Travis County, State of Texas, on the 25 day of Sept, 2018.

(month) (year)



Signature of authorized agent of contracting business entity
(Declarant)

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**OFFICE USE ONLY
CERTIFICATION OF FILING**

Certificate Number:
2018-407893

Date Filed:
09/25/2018

Date Acknowledged:
10/31/2018

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

Arnold Oil Company of Austin, LP
AUSTIN, 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

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19-02
DEF Purchases

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Arnold, Rhonda	Austin, TX United States	X	
	Arnold, James F	Austin, TX United States	X	

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

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

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)