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 coun of business.	Certificate Number: 2024-1218504								
	WC TRACTOR - TEMPLE Temple, TX United States	Date Filed:								
2	Name of governmental entity or state agency that is a party to the being filed.	09/24/2024								
	BUYBOARD	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. 2811466 GROUNDS MAINTENANCE EQUIPMENT									
4	Name of Interested Party	City, State, Country (place of busin	ess)	Nature of interest) (check applicable)						
				Controlling	Intermediary					
KI	LLEEN REGIONAL AIRPORT	KILLEEN, TX United States	Х							
_										
_										
_										
5	Check only if there is NO Interested Party.									
	UNSWORN DECLARATION			2 196						
	My name is Kyan Kedding , and my date of birth is 62/14/1987.									
	My address is 5345 S. General Bruce Dr (street)	Temple T	tate)	7650 Q (zip code)	(country)					
I declare under penalty of perjury that the foregoing is true and correct.										
	Executed in Bell County, State of Texas , on the 24 day of 9 , 2024 (month) (year)									
	-	D. MAKE		, "	/					
	Signature of authorized agent of contracting business entity (Declarant)									

CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 1

								1011			
	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 cour of business.	Name of business entity filing form, and the city, state and country of the business entity's place						Certificate Number:			
	SILSBEE FORD	2024-1200140									
	SILSBEE, TX United States										
2	Name of governmental entity or state agency that is a party to t	ame of governmental entity or state agency that is a party to the contract for which the form is									
	being filed.						Date Acknowledged:				
	City of Killeen						Date Acknowledged.				
3	description of the services, goods, or other property to be prov	de the identification number used by the governmental entity or state agency to track or identify the contract, and provide a ription of the services, goods, or other property to be provided under the contract.									
	210970 FLEET VEHICLES										
4								Nature of interest			
•	Name of Interested Party		City, State, Country (place of busin								
-							Controlling	Intermediary			
DONALSON, DREW		s	SILSBEE, TX United States				Х				
5	Check only if there is NO Interested Party.										
6	UNSWORN DECLARATION										
	My name isSETH GAMBLIN				and my date of I	oirth is	12/24/1985				
	address is12 11 US HIGHWAY 96 NORTH						77656	USA			
	(street)			(city)	(sta	ate)	(zip code)	(country)			
	I declare under penalty of perjury that the foregoing is true and corre	ect.									
	Executed in HARDIN Coun	ntv. St	tate of	TEXAS	, on the _	13 c	day of AUG	20 24 .			
	<u></u>	,, -·					(month)	(year)			
					Gamblin						
		Si	ignatur	e of authori	zed agent of cont (Declarant)	racting	business entity				

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** Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2024-1216645 Centerline Supply, Inc. Grand Prairie, TX 75051, TX United States Date Filed: Name of governmental entity or state agency that is a party to the contract for which the form is 09/19/2024 being filed. KILLEEN Date Acknowledged: 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. **PAINT SUPPLIES** Nature of interest Name of Interested Party City, State, Country (place of business) (check applicable) Controlling Intermediary CENTERLINE SUPPLY GRAND PRAIRIE, TX United Х States 5 Check only if there is NO Interested Party. **6 UNSWORN DECLARATION** My address is (state) (zip code) I declare under penalty of perjury that the foregoing is true and correct. County, State of Signature of authorized agent of contracting business (Declarant)