FORM 1295

1 of 1

				1 01 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 of business. American Airlines	Certificate Number: 2016-101050				
	Ft. Worth TX, TX United States		Date Filed:			
2	Name of governmental entity or state agency that is a party to the contribeing filed.		08/18/2016			
	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. Lease Agreement 9-12-12 Lease of space at Kileen Airport					
_			Nature of	f interest		
4	Name of Interested Party City,	State, Country (place of busine	57 655 507 50	9900 9900 9000		
			Controlling Intermediary			
Αı	merican Airlines Inc.	Worth, TX United States	х			
5	Check only if there is NO Interested Party.					
6	AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct. Signature of authorized agent of contracting business entity					
	AFFIX NOTARY STAMP / SEAL ABOVE					
	Sworn to and subscribed before me, by the said					
	Brittany Carter Solary Public. State of Texas Expires: 10-17-2018					
	Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					

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. Name of business entity filing form, and the city, state and country of the business entity's place of business.				OFFICE USE ONLY CERTIFICATION OF FILING		
1							
-					2016-101050		
	American Airlines						
_	Ft. Worth TX, TX United States	41-41					
2	Name of governmental entity or state agency being filed.	tnat is a party to tr	ie contract for which the for	m is	3/10/2010		
	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.						
	Lease Agreement 9-12-12	roporty to be provi					
	Lease of space at Kileen Airport						
			1		Nature o	of interest	
4	Name of Interested Party		City, State, Country (place	e of business	CERTIFICATION OF FILING Certificate Number: 2016-101050 Date Filed: 08/18/2016 Date Acknowledged: 10/04/2016 Ify the contract, and provide a		
					CERTIFICATION OF FILING ertificate Number: 016-101050 ate Filed: 8/18/2016 ate Acknowledged: 0/04/2016 ie contract, and provide a Nature of interest (check applicable) Controlling Intermediary X Dove disclosure is true and correct.		
Αı	merican Airlines Inc.		Ft. Worth, TX United St	ates	X		
5	Check only if there is NO Interested Party.						
6	AFFIDAVIT	I swear, or	affirm, under penalty of perjui	ry, that the ab	ove disclosure is tru	e and correct.	
			Signature of authorized ag	ent of contrac	ting business entity		
	AFFIX NOTARY STAMP / SEAL ABOVE						
	Sworn to and subscribed before me, by the said		, tr	nis the	day of	,	
	20, to certify which, witness my hand a	and seal of office.					
	Signature of officer administering oath	Printed name of	officer administering oath	Title	of officer administer	ring oath	
	5					3	

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 business. Delta Air Lines		Certificate Number: 2016-111586				
	Atlanta, GA United States		Date	Date Filed:			
2	Name of governmental entity or state agency that is a party to the cont being filed.	tract for which the form is	09/13	09/13/ <mark>2</mark> 016			
	Killeen - Ft Hood Regional Airport		Date /	Date Acknowledged:			
3	Provide the identification number used by the governmental entity or s description of the services, goods, or other property to be provided un	state agency to track or identif der the contract.	y the co	ontract, and prov	vide a		
	Lease Agreement 9-24-09 Payment for Leased Space						
4	Name of Interested Party City,	, State, Country (place of busin		Nature of			
	city,	State, Country (place of busin	(check applicable) Controlling Intermediary				
				Controlling	intermediary		
	Check only if there is NO Interested Party.						
6	AFFIDAVIT I swear, or affirm,	under penalty of perjury, that the	above	disclosure is true	and correct.		
	STOOT THIS STON SESTEN						
	Signarure of authorized agent of contracting business entity						
	AFFIX NOTARY STATES AND THE						
	Sworn to and substituted perform me, by the said Blaine Peters , this the 14 th day of September,						
	20, to certify which, witness my hand and seal of office.		24				
1	Milela Many - Aulet Majody Niconda Aulet Paralegal						
1	Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath						

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					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 country of the business entity's place of business.		Certificate Number: 2016-111586				
	Delta Air Lines		2010	111500			
	Atlanta, GA United States		Date I	Filed:			
2	Name of governmental entity or state agency that is a party to the	ne contract for which the form is	09/13	3/2016			
	being filed. Killeen - Ft Hood Regional Airport						
				Date Acknowledged: 10/04/2016			
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provided		y the co	ontract, and pro	vide a		
	Lease Agreement 9-24-09						
	Payment for Leased Space						
			-		•••		
4	Name of Interested Darty	City State Country (place of hypir			f interest		
	Name of Interested Party	City, State, Country (place of busin	iess)	(check applicable) Controlling Intermediary			
				Controlling	Intermediary		
5	Check only if there is NO Interested Party.						
6	AFFIDAVIT I swear, or	affirm, under penalty of perjury, that the	e above	disclosure is true	e and correct.		
		Signature of authorized agent of cor	ntracting	business entity			
	AFFIX NOTARY STAMP / SEAL ABOVE						
	THE PART OF THE PROPERTY.						
	Sworn to and subscribed before me, by the said	, this the		day of	,		
	20, to certify which, witness my hand and seal of office.						
	Signature of officer administering oath	officer administering oath	Title of c	officer administer	ing oath		

_						
	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	of business.		Certificate Number: 2016-112682			
	United Airlines Chicago, IL United States		Date Filed:			
2	Name of governmental entity or state agency that is a party to the being filed.	e contract for which the form is	09/15/2016 Date Acknowledged:			
	City of Killeen					
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provide Lease Agreement 9-12-12 Payment for leased space		the co	ontract, and prov	ride a	
				Nature of	interest	
4	Name of Interested Party	City, State, Country (place of busing	ness) (check applicat		plicable)	
				Controlling	Intermediary	
United Continental Holdings		Chicago, IL United States		×		
5	Check only if there is NO Interested Party.					
6	6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.					
	OFFICIAL SEAL					
	LAURA A. ASMUSSEN					
	NOTARY PUBLIC, STATE OF ILLINOIS	Signature of authorized agent of conf	tracting	business entity	1-0	
	My commission expires us-us-2019 Reter Freehlich Manasing Director					
	AFFIX NOTARY STAMP / SEAL ABOVE					
	Sworn to and subscribed before me, by the said Peter Freshich, this the 15 day of September					
	20, to certify which, witness my hand and seal of office.					
	Laura Comussen Laura	a A Asmussen	C CO	sociate	in. Estate	
	Signature of officer administering oath Printed name of o	officer administering oath T	itle of c	officer administeri	ng oath	

FORM **1295**

					1 0† 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.			Certificate Number: 2016-112682			
	United Airlines						
	Chicago, IL United States		Date Filed:				
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: 10/04/2016			
3	Provide the identification number used by the governmental entidescription of the services, goods, or other property to be provided to the provided the identification number used by the governmental entitles are considered to the provided the identification number used by the governmental entitles are considered to the provided the identification number used by the governmental entitles are considered to the provided		y the co	ontract, and pro	vide a		
	Lease Agreement 9-12-12						
	Payment for leased space						
		I	Т	Nature o	f interest		
4	Name of Interested Party	City, State, Country (place of busir	ness)	OFFICE USE ONLY CERTIFICATION OF FILING Certificate Number: 2016-112682 Date Filed: 09/15/2016 Date Acknowledged: 10/04/2016 the contract, and provide a Ses (check applicable) Controlling Intermediary X Acknowledged: 10/04/2016 According Intermediary According I			
		, , , , , , , , , , , , , , , , , , , ,	· · · /		Intermediary		
U	nited Continental Holdings	Chicago, IL United States		_			
5	Check only if there is NO Interested Party.		1				
6	AFFIDAVIT I swear, or	affirm, under penalty of perjury, that the	e above	disclosure is true	e and correct.		
		Signature of authorized agent of cor	tracting	husinoss ontity			
		Signature of authorized agent of cor	ili actii ig	business entity			
	AFFIX NOTARY STAMP / SEAL ABOVE						
	Sworn to and subscribed before me, by the said	, this the		day of	,		
	Signature of officer administering oath	officer administering oath	Title of c	officer administer	ing oath		