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	ame of business entity filing form, and the city, state and country of the business entity's place f business.			Certificate Number: 2023-970992				
	K Friese + Associates, Inc.	2023-970992						
	Austin, TX United States	Date Filed:						
2	Name of governmental entity or state agency that is a party to the being filed.	01/11/2023						
	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.							
	Willow Springs & Watercrest Rd Professional Engineering Services							
4			Nature of interest					
•	Name of Interested Party	City, State, Country (place of business)						
_			Cor	ntrolling I	ntermediary			
Friese, Karen		Austin, TX United States	X					
_								
_								
	ı a							
5	Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION				-			
	My name is Thomas M. Owens, P.E.	birth is11/13/64						
	My address is 1120 S. Capital of Texas Highway	_, Austin , T	X_, 7	8746,_	USA			
	(street)	(city) (st	ate) (z	ip code)	(country)			
	declare under penalty of perjury that the foregoing is true and correct.							
	Executed inCounty	, State of <u>Texas</u> , on the		January (month)	, 20 <u>23</u> . (year)			
		2 MC)	7					
		Signature of authorized agent of cont (Declarant)	tracting busin	ness 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				
1	Name of business entity filing form, and the city, state and count of business.				Certificate Number: 2023-970992			
	K Friese + Associates, Inc.							
	Austin, TX 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			01/11/2023				
				Date Acknowledged: 01/11/2023				
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provide			the contract, and pro	vide a			
	Willow Springs & Watercrest Rd	, , , , , , , , , , , , , , , , , , ,						
	Professional Engineering Services							
4				Nature o	Nature of interest			
4	Name of Interested Party City, State, Country (place of bu		y (place of busine	ss) (check a	(check applicable)			
				Controlling	Intermediary			
Fr	riese, Karen	Austin, TX United	d States	X				
	1							
	-							
_								
5	Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION							
	My name is	oirth is	th is					
	My address is		1	,	_,·			
	(street)	(city)	(sta	ate) (zip code)	(country)			
	I declare under penalty of perjury that the foregoing is true and correct.							
	Executed inCounty	ty, State of	, on the _					
				(month)	(year)			
Signature of authorized agent of contracting business entil (Declarant)								