CERTIFICATE OF INTERESTED PARTIES FORM 1295 1 of 1 OFFICE USE ONLY 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. **CERTIFICATION OF FILING** Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: 2024-1195532 NMCB Inc. Georgetown, TX United States Date Filed: 08/02/2024 Name 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 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. Interior Wall Renovations at KCCC Ballrooms Nature of interest 4 Name of Interested Party City, State, Country (place of business) (check applicable) Controlling Intermediary 5 Check only if there is NO Interested Party. **6 UNSWORN DECLARATION** ______, and my date of birth is 10-4-1900. I declare under penalty of perjury that the foregoing is true and correct. County, State of

Signature of authorized agent of contracting business entity (Declarant)