F					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 intereste	s. d parties.	CE	OFFICE US	
1	Name of business entity filing form, and the city, sta		_	RTIFICATION	OF FILING
	or business.	ate and country of the business entity's place		ificate Number:	
	Associated Supply Company, Inc.		2024	4-1209710	
	Belton, TX United States	lton, TX United States			
2	Name of governmental entity or state agency that is		Filed: 14/2024		
ı	being med.		55/5 112524		
	City of Killeen		Date	Acknowledged	
San S					
3	Provide the identification number used by the gover description of the services, goods, or other property	nmental entity or state agency to track or identify	the c	ontract, and pro	vide a
	597-19	to be provided under the contract.			
	Forklift and attachment				
	The state of the s				
4	780 1000			Nature o	f interest
	Name of Interested Party	City, State, Country (place of busin	iess)	(check a	oplicable)
H				Controlling	Intermediary
_					
					- 1
5	Check only if there is NO Interested Party.				
_					
	JNSWORN DECLARATION				
	My name is Rick Leaverton	-1-1-0		7.11.17	/
	My name is Rick Leaverton My address is ZIDZ. Slaton High wa	, and my date of I	birth is	219.50	
	My address is ZIDZ. Clarkon Hick INK	44			
	(street)	(city) (sta	ate)	(zip code)	(country)
		(4.9)	atoj	(Zip code)	(country)
	declare under penalty of perjury that the foregoing is tru	e and correct.			
	Executed in	County, State of, on the _	d	ay of	, 20
				(month)	(year)
		Signature of authorized agent of control	racting	business entity	
Or	ns provided by Texas Ethics Commission	(Declarant)			
UII	is provided by Texas Ethics Commission	www.ethics.state.tx.us		Version V	4.1.0.48da51f7

F				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 US	-
1	of business. Bond Equipment Co. Inc.	s place Ce	ertificate Number: 024-1208299	OF FILING
Ļ	Dallas, TX United States	Da	ate Filed:	
2	being filed.	orm is 08	3/30/2024	
	City of Killeen		ate Acknowledged:	
3	Provide the identification number used by the governmental entity or state agency to track description of the services, goods, or other property to be provided under the contract. 601-19 Refuse Trucks	c or identify the	e contract, and pro	vide a
4	Name of Interested Party City, State, Country (pla	ce of business)) (check a	f interest pplicable)
			Controlling	Intermediary
				
5	Check only if there is NO Interested Party.			
	My name is James A. Sond, and	my date of birth	is January	20,1961
	My address is 1401 Dary 1 Roanok (city)	, TX (state)	, 76767 (zip code)	, <u>USA</u> .
	I declare under penalty of perjury that the foregoing is true and correct. Executed in	_, on the 30	_day of Augus	£,2024.
	$\mathcal{Q}(\mathcal{R})$	1	(menth)	(year)
	Signature of authorized ac (Deck	gent of contraction	ng business entity	

					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.		CEF	OFFICE USE		
1	Name of business entity filing form, and the city, state and country of the business entity's place of business. Caldwell Country Chevrolet II, LLC Caldwell, TX United States			Certificate Number: 2024-1210403 Date Filed:		
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 description of the services, goods, or other property to be provide #724-23 Purchase of Vehicles	or state agency to track or identify and an agency to track or identify and an agency to track or identify	the co	ontract, and prov	/ide a	
4	Name of Interested Party	City, State, Country (place of busin	ess)	Nature of (check ap	plicable)	
SI	(YLARK	DALLAS, TX United States		X	Intermediary	
			2 4		1 3	
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION DOMAIN DIAKER		1. 1.41. 1.	12/26/196	8	
	My address is DO BOX 27 (street)	and my date of	X tate)	(zip code)	, USA (country)	
	I declare under penalty of perjury that the foregoing is true and correct. Executed inCounty,	State of TOXOS, on the	0 .	day of Sup.	_, 20 <u>24</u> . (year)	
	Den	nis Dykrs				
		Signature of authorized agent of con (Declarant)	tracting	g business entity		

FORM 1295

				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 business.	y of the business entity's place	Certificate Number 2024-1202426	:	
	Chastang Autocar				
	Houston, 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	08/19/2024		
	being filed.				
	City of Killeen		Date Acknowledge	d:	
3	Provide the identification number used by the governmental entity description of the services, goods, or other property to be provide		the contract, and p	rovide a	
	723-23				
	Refuse trucks			24	
4			Nature	of interest	
•	Name of Interested Party	City, State, Country (place of busine	ess) (check	applicable)	
			Controlling	Intermediary	
5	Check only if there is NO Interested Party.		•		
6	UNSWORN DECLARATION				
	My name is John Chastang	, and my date of b	irth is 7-24.	5a_	
	My address is 19506 SANCTUARY PLACE DR	SPRING T	77388 (zip code)		
		(, (-,)	\ //	
	I declare under penalty of perjury that the foregoing is true and correct.				
	Executed in HARRIS County,	State of <u>IEXAS</u> , on the	day of Augu (mont)		
		. D . A A			
		John C. Charle	ma		
	- (Signature of authorized agent of contr (Declarant)	activing business entit	у	
		(a comment)			

FORM **1295**

					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.	Certificate Number:			
	CHASTANG ENTERPRISES HOUSTON LLC		2024-	1209480	
	HOUSTON, TX United States		Date F	iled:	
2	Name of governmental entity or state agency that is a party to the contra	ct for which the form is	09/04/	2024	
	being filed. CITY OF KILLEEN		Date A	cknowledged:	
	CITT OF RILLELIA		- ALE A	.c.aremenyed.	- 1
3	Provide the identification number used by the governmental entity or sta description of the services, goods, or other property to be provided under		the cor	ntract, and prov	ide a
	723-23				
	DUMP TRUCK				0
4				Nature of	interest
-	Name of Interested Party City, S	tate, Country (place of busin	ess)	(check ap	
			-	Controlling	Intermediary
		<u> </u>	_		
			-+		
				•	
5	Check only if there is NO Interested Party.				
	UNSWORN DECLARATION				
	My name is lody Pelaney My address is 17815 Kings Park Ln 418	, and my date of I	birth is _	9-30-1	<u> 985</u> .
	My address is 17815 Kings Park Ln 418	Houston . T.	ate)	77058 (zip code)	USA.
		, ,,	11	,	111111111111111111111111111111111111111
	I declare under penalty of perjury that the foregoing is true and correct.				
	Executed inCounty, State of	of <u>Texas</u> , on the	<u>4</u> da		_, 20 <u>24</u> .
				(month)	(year)
		Sheld !			
	Siana	ture of authorized agent of cont	racting I	business entity	
		(Declarant)			

FORM **1295**

						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			
1	Name of business entity filing form, and the city, state and count of business.	try of the business en	tity's place	Certific	ate Number:			
	Doggett Freightliner of South Texas, LLC DBA Freightliner of	Austin		2024-1 	.205043			
	Houston, TX United States			Date Fi				
2	Name of governmental entity or state agency that is a party to the	e contract for which t	he form is	08/23/2	2024			
	being filed. City of Killeen			Date A	cknowledged:			
	•							
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provide			the con	tract, and provi	de a		
	TIPS 200802							
	Truck Parts and Services							
4		a:		Ţ	Nature of			
	Name of Interested Party	City, State, Country	(place of busine	· · ⊢	(check app Controlling	olicable) Intermediary		
				\dashv	- Controlling	toriniculary		
_								
5	Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION							
	My name is Dustin Smith	,	and my date of b	oirth is <u>(</u>	08/27/2024			
	My address is 6206 Riverchase Glen Dr	Kingwood	, <u>T</u> >	〈 ,	77345	USA_		
	(street)	(city)	(sta	ate)	(zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and correct	ot.						
	Executed in Harris County	y, State of Texas	, on the 2	27 _{da}		_, 20_24		
			\wedge		(month)	(year)		
		$D \ge$		_				
		Signature of authori	zed agent of cont (Declarant)	racting b	ousiness entity			

				• • • • • • • • • • • • • • • • • • • •	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.		CEI	OFFICE USE		
1	of business. Doggett Freightliner of South Texas, LLC			Certificate Number: 2024-1201951 Date Filed:		
2	Name of governmental entity or state agency that is a party to the	e contract for which the form is	08/1	6/2024		
	being filed. City of Killeen		Date	Acknowledged:		
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provide Buy Board 723-23 Vacuum Truck Vacuum Truck	ity or state agency to track or ident ded under the contract.	ify the c	ontract, and prov	ride a	
4	Name of Interested Posts	City Chata County (violate of lavo			f interest	
	Name of Interested Party	City, State, Country (place of bus	iness)	(check ap	Intermediary	
L						
_						
			· ···			
	And time strange and appropriate to					
ŀ	-					
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION			·····		
	My name is Mark Brunnemann	, and my date	of birth i	s12/23/19		
	My address is 3103 North Cage Blvd		<u>X</u> _,	78577	. US	
	(street)	(city)	(state)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and corre					
	Executed in Hidalgo Coun	ty, State of \underline{TX} , on the	_{ne} <u>16th</u>	day of August	, 20_24	
		and h				
1	7	Signature of authorized agent of o	ontractir	ng business entity	\rightarrow	
Ŀ,	orms provided by Texas Ethics Commission www.el	hice state ty us		Version V	/4.1 0 48da51f3	

FORM **1295**

	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	1 Name of business entity filing form, and the city, state and country of the business entity's place of business.				ficate Number: I-1208781	
	GTS Technology Solutions			2024	-1200701	
	Austin, TX United States			Date	Filed:	
2	Name of governmental entity or state agency that is a party to	o the contract for which t	he form is	09/03	3/2024	
	being filed.					
City of Kileen Date Acknowledged:						:
3	Provide the identification number used by the governmental description of the services, goods, or other property to be pr			the co	ontract, and pro	ovide a
	DIR-TSO-3763-R & DIR-CPO-4751					
	FY25 PD Technology Resources					
4	Name of Interceted Party	City State County	(ulasa of lavaira	\		of interest
	Name of Interested Party	City, State, Country	(place of busin	ess)		applicable)
					Controlling	Intermediary
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	My name is Eilene Melvin	,	and my date of	birth is	8/27/1997	, ·
	My address is9211 Waterford Centre Blvd #275	Austin_	_TX		78758	, <u>USA</u> .
	(street)	(city)		ate)	(zip code)	(country)
	I declare under penalty of perjury that the foregoing is true and co	prrect.				
	Executed in TravisCo	ounty, State of Texas	, on the _	3rd o	_{day of} Septer	mber ₂₀ 24
		Cilene W	Selvin		(month) (year)
		Signature of authori	zed agent of conf (Declarant)	tracting	g business entity	/

CERTIFICATE OF INTERESTED	PARTIES		FOR	м 1295
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. 1 Name of business entity filing form, and the city, state and country of the business entity's place of business. Holt Texas, LTD (dba Holt Cat) San Antonio, 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 3 Provide the identification number used by the governmental entity or state agency to track or identify description of the services, goods, or other property to be provided under the contract. 020223-CAT Sourcewell contract Purchase of two (2) CAT 420XE Backhoes			2024-1211736 Date Filed: 09/09/2024 Date Acknowledged:	
4 Name of Interested Party	City, State, Country (place of busi	ness)	(check ap	
Holt, Peter J.	San Antonio, TX United States		Controlling X	Intermediary
Richter, Corinna Holt	San Antonio, TX United States		Х	
Jones, Greg	Waco, TX United States			Х
5 Check only if there is NO Interested Party. 6 UNSWORN DECLARATION				
My name is Michael Puryear	, and my date o	of birth is	06/10/195	
My address is 5665 S.E. Loop 410 (street)	(city)	state)	78222 (zip code)	, USA (country)
I declare under penalty of perjury that the foregoing is true a Executed in Bexar	County, State of Texas, on the, on the, on the		(month)	er _{, 20} 24 (year)

								1 0f 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 partie	es.				CE	OFFICE USI	
1	Name of business entity filing form, and the city, state and country of the business entity's place			ntity's place	Certificate Number:			
	of business.					2024	4-1200143	
	LAKE COUNTRY CHEVROLET					Data	Filod	
2	SILSBEE , TX United States Name of governmental entity or state agency that is a party to the contract for which the form is						Filed: .3/2024	
_	being filed.					00/1	.0,202 .	
	City of Killeen					Date	Acknowledged	:
3	Provide the identification number used by the government description of the services, goods, or other property to be					y the c	contract, and pro	vide a
	210907							
	FLEET VEHICLES							
_							Nature o	of interest
4	Name of Interested Party		City, Sta	te, Country	(place of busin	ness)	(check a	pplicable)
		\longrightarrow			С			Intermediary
D	ONALSON, DREW		SILSBE	E, TX Un	ited States		X	
5	Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION							
٠								
	My name is				and my date of	birth is	s 12/24/1985	
	My address is1211 US HIGHWAY 96 NORTH		,SIL	SBEE	, <u>T</u>	X,	77656	_, _USA
	(street)			(city)	(\$	state)	(zip code)	(country)
	I declare under penalty of perjury that the foregoing is true and	correct.						
	Executed in HARDIN	County	State of	TEAXS	on the	13	day of AUG	. 20 24
		_oounty,	J.G.10 01 .		, on the		(month)	
				Seth	Gamble	n		
			Signatur		17		ng business entity	

_					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.		1	OFFICE USE	
1	Name of business entity filing form, and the city, state and count of business. Lenco Industries, Inc. Pittsfield, MA United States	try of the business entity's place	Certifi	ficate Number: -1197650	
2	50 (A) 460 (C) 400 (A)	ne contract for which the form is	08/07	7/2024 Acknowledged:	r
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provided H-GAC Contract AM10-23 Lenco Bearcat Armored Vehicle	ity or state agency to track or identify ded under the contract.	the co	ntract, and pro	vide a
4	Name of Interested Party	City, State, Country (place of busine	ess)		f interest pplicable) Intermediary
Liç	ght, Leonard W.	Pittsfield, MA United States		X	
Liç	ght, Diane	Pittsfield, MA United States		Х	
			\forall		
			\top		
			\top		
	Check only if there is NO Interested Party.				
6	UNSWORN DECLARATION				
	My name is Michelle C. Tisdale	, and my date of bi	oirth is _	10/12/1970	·
	My address is	Pittsfield , M/		01201 (zip code)	United States
	I declare under penalty of perjury that the foregoing is true and correct		16)	(Elp GGL.,	(0001)
	Executed in Berkshire County,	y, State of Massachusetts, on the	7th_da	ay of August (month)	, 20_24
		richelle C. Jisda	ele		(year)
		Signature of authorized agent of contra (Declarant)	acting b	ousiness entity	

FORM **1295**

					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 partie	es.	CE	OFFICE US	_	
1	Name of business entity filing form, and the city, state and of business.	Cert	Certificate Number:			
	Siddons Martin Emergency Group, LLC	202	4-1211410			
	Houston, TX United States	Date	Filed:			
2		y to the contract for which the form is	09/0	09/2024		
	being filed. City of Killeen	Date	e Acknowledged	:		
3	Provide the identification number used by the government description of the services, goods, or other property to be		ntify the o	ontract, and pro	ovide a	
	HGAC FS 12-23					
	2024 Skeeter Wildcat					
_				Nature (of interest	
4	Name of Interested Party	City, State, Country (place of b	usiness)	(check a	pplicable)	
				Controlling	Intermediary	
Si	iddons Martin Holding, Inc.	Houston, TX United States		Х		
_	Observation in MO International Program				1	
	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	My name is Kathryn Williams	, and my da	te of birth i	_s 05/03/198		
	My address is 1362 E. Richey Rd	Houston	TX ,	77073	USA	
	(street)	(city)	(state)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and	I correct.				
	Executed in Harris	County, State of Texas, on	the 9th			
		. /		(month)	(year)	
		Solm	_			
		Signature of authorized agent o (Declarant)	f contractin	ig business entity	•	

FORM **1295**

								1011	
	Complete Nos. 1 - 4 and 6 if there are interested parties.	omplete Nos. 1 - 4 and 6 if there are interested parties. omplete 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				Certificate Number:				
	business. LSBEE FORD					2024-1200140			
	SILSBEE, TX United States					Date Filed: 08/13/2024			
2	lame of governmental entity or state agency that is a party to the contract for which the form is								
	being filed.					L			
	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.								
	210970								
	FLEET VEHICLES								
_						Nature of interest			
4	Name of Interested Party		City, State, Country (place of busi						
							Controlling	Intermediary	
DONALSON, DREW			SILSBEE, TX United States				X		
5	Check only if there is NO Interested Party.								
6	UNSWORN DECLARATION								
	My name isSETH GAMBLIN	me is, and my date					12/24/1985	·	
	My address is12 11 US HIGHWAY 96 NORTH (street)		, SILSI	(city)	,	X , tate)	77656 (zip code)	USA (country)	
	, ,				,	·	, , ,		
	I declare under penalty of perjury that the foregoing is true a	and correct							
	Executed in HARDIN	County,	State of _	TEXAS	, on the	_13c	day of _AUG	, 20_24	
							(month)	(year)	
				Seth	Gamble	n			
		Signature of authorized agent of contracting business entity							
(Declarant)									