CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 1

						1011				
	Complete Nos. 1 - 4 and 6 if there are interested particle Complete Nos. 1, 2, 3, 5, and 6 if there are no interest	OFFICE USE ONLY CERTIFICATION OF FILING								
1	Name of business entity filing form, and the city, ${\bf s}$ of business.	Certificate Number: 2017-278513								
	T DISTRIBUTORS, 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	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.									
	524-17									
	BUYBOARD CONTRACT FOR PUBLIC SAFETY AND FIREHOUSE SUPPLIES AND EQUIPMENT									
4	Name of Interested Party City, State, Country (place of					Nature of interest				
			City, State, Country (place of busine							
_					Controlling	Intermediary				
_										
5	Check only if there is NO Interested Party.	X								
6	AFFIDAVIT	I swear, or	affirm, under penalty of perjury, that the	above	disclosure is true	and correct.				
	CAROL A. STAFFORD My Notary ID # 12195368 Expires December 18, 2020 Signature of authorized agent of contracting business entity									
	AFFIX NOTARY STAMP / SEAL ABOVE ALEXIS M HOSTETTER Sworn to and subscribed before me, by the said, this the day of, 20_17, to certify which, witness my hand and seal of office.									
	Λ	Λ								
	Carol a. Stappord	Carol 1	A Stafford	110	COUNTING officer administeri	ing oath				
	Signature of officer administering oath	riniteu name of	officer administering oath	inc of	omeer daministen	g out.				

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	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							
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	G T DISTRIBUTORS, INC.	2017	2017-278313						
	AUSTIN, TX United States	Date Filed:							
2	Name of governmental entity or state agency that is a party to	10/31/2017							
	being filed.								
	CITY OF KILLEEN		Date Acknowledged: 12/14/2017						
		12/14	4/2017						
3	Provide the identification number used by the governmental endescription of the services, goods, or other property to be provided to the identification number used by the governmental endescription of the services.		the co	ontract, and pro	vide a				
	524-17								
	BUYBOARD CONTRACT FOR PUBLIC SAFETY AND FIRE	EHOUSE SUPPLIES AND EQUIPMI	ENT						
_				Nature of interest					
4	Name of Interested Party City, State, Country		ness)) (check applicable)					
				Controlling	Intermediary				
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 cor	ntracting	business entity					
	AFFIX NOTARY STAMP / SEAL ABOVE								
	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 Printed name of	of officer administering oath							