CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 2

	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. First National Bank Texas	Certificate Number: 2025-1285660
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 Filed: 03/24/2025
	City of Killeen	Date Acknowledged:

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.

TMP-25-132

Naming Rights for the Family Recreations Center

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
First Community Bancshares, Inc.	Killeen, TX United States	Х	
Shine, William	Killeen, TX United States	Х	
Stepp, Ronald	Killeen, TX United States	Х	
Lohse, Paula	Killeen, TX United States	Х	
Edwards, Helen	Killeen, TX United States	х	
Koch, Hope	Killeen, TX United States	Х	
Thurman, James D.	Killeen, TX United States	Х	
Tuggle, Terry	Killeen, TX United States	Х	
Smien, Edward	Killeen, TX United States	х	
Hoxworth, Robert W.	Killeen, TX United States	Х	
		-	

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

2 of 2

					2 01 2			
	omplete 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	ume of business entity filing form, and the city, state and country of the business entity's place business.			ificate Number:				
	First National Bank Texas				2025-1285660			
	Killeen, TX United States							
2	Name of governmental entity or state agency that is a party to the	me of governmental entity or state agency that is a party to the contract for which the form is			03/24/2025			
	ng filed. y of Killeen			Date Acknowledged:				
	ony of Milech	Date	Date Admiowicaged.					
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provided.	dentification number used by the governmental entity or state agency to track or identify the contract, and provide a if the services, goods, or other property to be provided under the contract.						
	TMP-25-132 Naming Rights for the Family Recreations Center							
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 Allen Winmill	, and my date of birth is						
	My address is(street)	,,,	, state)	(zip code)	(country)			
	,,		-,	<u> </u>	()			
	I declare under penalty of perjury that the foregoing is true and correct.							
	Executed in Bell County	, State of <u>Texas</u> , on the	_24	day of <u>March</u>	, 20 <u>25</u> (year)			
	ARY PURICE THE PROPERTY OF THE			(menal)	(Jour)			
		11/10		SCC	1			
Executed in Bell County, State of Texas, on the 24 day of March, 20 25 (month) (yet) Signature of authorized agent of contracting business entity (Declarant)								
	77, 48							

Forms provided by 1923 Ethics Compassion

www.ethics.state.tx.us

Version V4.1.0.e02d6221