CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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	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 coun of business.	try of the business entity's place	Certificate Number: 2024-1154442				
	Federal Signal Corporation				1		
	University Park, IL United States			Date Filed:			
2	Name of governmental entity or state agency that is a party to the	is a party to the contract for which the form is		04/30/2024			
	being filed.				Date Acknowledged:		
	City of Killeen		Date	Ackilowieugeu.			
3	Provide the identification number used by the governmental ent description of the services, goods, or other property to be provi	ly the co	ontract, and prov	ride a			
TQ162 Outdoor Warning Sirens							
					Nature of interest		
4	Name of Interested Party	City, State, Country (place of bus		ness) (check applicable)			
	•			Controlling	Intermediary		
Omniwarn Public Safety		Yukon, OK United States			Х		
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5 Check only if there is NO Interested Party.							
6 UNSWORN DECLARATION							
	My name isBRIAN D. SCHULTZ	and my date of birth is					
	My address is 2645 FEDERAL SIGNAL DRAVE (street)	UNDUERSDTY PARK	JL.	60484	USA		
	(street)	(city)	(state)	(zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and correct. Executed inCounty, State ofILLZNOIS, on the30_ day ofAPRIL, 20_24 (month) (year)						
	Aug o lete						
	Signature of authorized agent of contracting business entity						
	Signature of authorized agent of contracting business entity (Declarant)						