FORM **1295**

				_	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 USE ONLY CERTIFICATION OF FILING			
L	Name of business entity filing form, and the city, state and cou of business.	untry of the business er		Certificate Number: 2022-844197			
	Southern Tire Mart, LLC						
	COLUMBIA, MS United States	Date Filed:					
2	Name of governmental entity or state agency that is a party to being filed.	01/27/2022					
	City of Kileen	of Kileen Date					
3	Provide the identification number used by the governmental edescription of the services, goods, or other property to be pro-			the contract, and pro	ovide a		
	636-21 Tires						
4	Name of Interested Party	City, State, Country	v (nlace of husins		of interest applicable)		
	nume of interested i arry	Oity, Otato, Country	y (place of basilio	Controlling	Intermediary		
_ Эі	uff, James	Columbia, MS Ur	nited States	X			
Οι	uff, Thomas	Columbia, MS Ur	nited States	Х			
_							
					1		
					1		
					<u></u>		
5	Check only if there is NO Interested Party.						
ò	UNSWORN DECLARATION						
	My name is Richard Conwill		, and my date of b	oirth is <u>9/10/50</u>	·		
	My address is 800 Hwy 98	, <u>Columbia</u>	,	1S 39429	, <u>USA</u>		
	(street)	(city)	(516	ate) (zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and corr	rect.					
	Executed inCou	unty, State of MS	, on the _	27 day of Jan. (month			
		Richard	d Con	will	,		
				racting business entity	y		

FORM **1295**

					1 of 1		
	Complete Nos. 1 - 4 and 6 if there are interested parties.	_		OFFICE USE			
	Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.			CERTIFICATION OF FILING			
1	Name of business entity filing form, and the city, state and count of business.	rry of the business er		Certificate Number: 2022-844197			
	Southern Tire Mart, LLC		ľ	2022-844191			
	COLUMBIA, MS United States			Date Filed:			
2	Name of governmental entity or state agency that is a party to the being filed.	e contract for which	the form is	01/27/2022			
	City of Kileen			Date Acknowledged:	:		
				02/09/2022	J9/2022		
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provided.			the contract, and pro	vide a		
	636-21	led under the contra	ict.				
	Tires						
		1		Noturo o	of interest		
4	Name of Interested Party	City, State, Country	v (place of busine		pplicable)		
	Name of interested i arry	,,,, (piaco el adelli		Controlling	Intermediary		
D	uff, James	Columbia, MS Ur	nited States	X			
D	uff, Thomas	Columbia, MS Ur	nited States	Х			
5	Check only if there is NO Interested Party.			•			
	Ш						
6	UNSWORN DECLARATION						
	My name is		_, and my date of b	oirth is	·		
	My address is			,	_,		
	(street)	(city)	(sta	ate) (zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and correct	л.					
	Executed inCounty	y, State of	, on the _	day of	, 20		
				(month)	(year)		
		Signature of author	rized agent of contr	racting business entity			
		Signature of author	(Declarant)	acting business entity			

FORM 1295

Г	A Little Francis Little Britanis Carlot				1011	
L	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	and country of the business an			Certificate Number:		
ı	300 00 00 00 00 00 00 00 00 00 00 00 00			2-844285		
ı	Lonestar Freightliner Group LLC dba Lonestar Truck Group Temple Temple, TX United States			1 1200		
2			Date Filed:			
٦	Name of governmental entity or state agency that is a party to the being filed.	ne contract for which the form is	01/2	7/2022		
ı	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	ity ov state and the state of t				
	description of the services, goods, or other property to be provide	ded under the contract.	the co	ontract, and pro	vide a	
	601-19					
	Heavy Duty Truck Parts					
4	Name of Interested Party	City State County (alexand)		Nature of		
		City, State, Country (place of busine	ess)	(check applicable)		
				Controlling	Intermediary	
			-			
		The state of the s	\neg			
_						
			_			
			_			
_						
			\rightarrow			
5	Check only if there is NO Interested Party.					
	X					
3 (JNSWORN DECLARATION					
	My name is		_	-	٠١ ، ١٠ ، ١٠	
ľ	My name is	and my date of bi	rth is _	- July 2	7.5Y 146A	
	2051 Humber Road	Cra Miles	, ,			
ľ	//y address is	- <u> </u>	<u>C</u> , _	4805)	USM.	
	(street)	(city) (stat	e)	(zip code)	(country)	
	declare under penalty of perjury that the foregoing is true and correct.					
ĺ		_				
E	executed inCounty,	State of lexas, on the 2	द्रभ्रम्य	of Januar	2077	
				(month)	(year)	
				VI 128		
		Mb				
	-	Signature of authorized agent of contra	ecting I	husiness entity		
VIDE		(Declarant)	.Jung L	odomicoo enuty		
orm	is provided by Texas Ethics Commission www.ethic	o ototo tv ve				

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.		CE	OFFICE USE			
1	Name of business entity filing form, and the city, state and count of business.	ary of the business entity's place		Certificate Number: 2022-844285			
	Lonestar Freightliner Group LLC dba Lonestar Truck Group To	emple	202	2022-844285			
	Temple, TX United States		Date	e Filed:			
2	Name of governmental entity or state agency that is a party to the	e contract for which the form is	01/2	27/2022			
	being filed.		Date	Date Acknowledged:			
	City of Killeen		Date Acknowledged: 02/09/2022				
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provided.		identify the contract, and provide a				
	601-19						
	Heavy Duty Truck Parts						
4	1			Nature of			
-	Name of Interested Party	City, State, Country (place of bus	siness)	(check ap			
				Controlling	Intermediary		
					<u> </u>		
L							
					1		
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
	My name is	, and my date	of birth i	s			
	My address is(street)	(city)		,(zip code)	(country)		
	(201661)	(City)	(State)	(zip code)	(COUTHI y)		
	I declare under penalty of perjury that the foregoing is true and correct	t.					
	Executed inCounty	y, State of, on the	ne				
				(month)	(year)		
		Signature of authorized agent of c	ontractin	ng business 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 parties.		OFFICE USE ONLY CERTIFICATION OF FILING			
1	Name of business entity filing form, and the city, state and count of business.	Certificate Number:				
	O'Reilly Auto Enterprises LLC dba O'Reilly Auto Parts	2022-845546				
	Springfield, MO United States	Date Filed:				
2	Name of governmental entity or state agency that is a party to th	ne contract for which the form is	02/01/2022			
	being filed.	Date Acknowledged:				
	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 provided		the c	ontract, and pro	vide a	
	180603					
	Automotive Parts					
4				Nature o	f interest	
	Name of Interested Party	City, State, Country (place of busin	iess)	<u> </u>	k applicable)	
				Controlling	Intermediary	
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	My name is Misty Burge	, and my date of	birth is	12/06/198	1	
	My address is 233 S. Patterson Ave	, Springfield, M		65802	USA	
	(street)	,,,	tate)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correc	ct.				
			1	Februai	rv ₂₀ 22	
	Executed inCount	ty, State of Missouri , on the	((month)	(year)	
		Misty Burgs				
		Signature of authorized agent of cor	ntractin	g business entity		
		(Declarant)		,		

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.		CE	OFFICE USE ONLY CERTIFICATION OF FILING			
1	Name of business entity filing form, and the city, state and country of business.		Certificate Number: 2022-845546				
	O'Reilly Auto Enterprises LLC dba O'Reilly Auto Parts		202	2022-845546			
	Springfield, MO United States		Date 02/0	te Filed:			
2	Name of governmental entity or state agency that is a party to the being filed.	ame of governmental entity or state agency that is a party to the contract for which the form is					
	City of Killeen		Date Acknowledged: 02/09/2022				
3	Provide the identification number used by the governmental entit						
	description of the services, goods, or other property to be provid 180603	eu unuer me connact.					
	Automotive Parts						
4				Nature of	finterest		
	Name of Interested Party	City, State, Country (place of b	usiness)		k applicable)		
				Controlling	Intermediary		
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
	My name is	, and my da	te of birth	is			
	My addraga is						
	My address is(street)	(city)	(state)	(zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and correct	t.					
	Executed inCounty	/, State of, on	the	_day of	, 20		
				(month)	(year)		
		Signature of authorized agent or (Declarant)	f contracti	ng business entity			

FORM 1295

				COMMENT OF THE PARTY OF			
	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		
	Name of business entity filing form, and the city, state and country of the business entity's place of business.			Certificate Number: 2022-849024			
	Central Texas Auto Parts, Inc.						
	Killeen, TX United States			Date Filed:			
2	Name of governmental entity or state agency that is a party to the	contract for which the	e form is	02/09	9/2022		
	being filed.			Date Acknowledged:			
	City of Killeen	Date	Ackilowieugeu.				
			- ak av idantifu	the or	netroot and prov	vido a	
3	Provide the identification number used by the governmental entity description of the services, goods, or other property to be provide	ed under the contract.	ack of identity	uie ce	miaci, and prov	luca	
	032521-GPC	d related acceptance	r.				
	Automotive, Truck, and Industrial parts, tires, commodities, and	u relateu accessories					
1				N. M. W.	Nature of		
4	Name of Interested Party	City, State, Country (place of busine	ess)	(check ap		
					Controlling	Intermediary	
						AND THE PARTY OF T	
				ELON AMOUNTAIN			
				SONOS CONTRACTOR OF A CONTRACT		THE PERSON OF TH	
				ALESEA CHELLOS TO STORY TO	W. D. P. L. D.		
					CONTROL DE LA COCALIA DE LA CO	CONTROL OF CHARGE PARAMETER PROPERTY OF THE PR	
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
7	My name is Gene C. Lutz		and my date of b	oirth is	09/21/1970		
	My Harrie 13 Oche O. Luiz	, -					
	My address is 1200 E. Stan Schlueter Loop, Suite 101A	, <u>Killeen</u>	,TX	<u> </u>	76542	,	
	(street)	(city)	(sta	ate)	(zip code)	(country)	
-	I declare under penalty of perjury that the foregoing is true and correct	•					
	Executed in Bell County	, State of <u>Texas</u>	, on the _	<u>9th</u> 0	day of <u>February</u>		
					(month)	(year)	
				operation of a few y			
		Signature of authorize	ed agent of contr	racting	husiness entity	NOTE BY COLUMN TO THE OWN PROPERTY OF THE OWN PARTY OF TH	
		Signature of authorize	Declarant)	aomi	y Duomicoo Criticy		

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.		CE	OFFICE USE ONLY CERTIFICATION OF FILING			
1	Name of business entity filing form, and the city, state and count of business.	ry of the business entity's place		Certificate Number: 2022-849024			
	Central Texas Auto Parts, Inc.		202	2022-649024			
	Killeen, TX United States		Date	e Filed:			
2	Name of governmental entity or state agency that is a party to the	e contract for which the form is	02/0	09/2022			
	being filed.		Date	Date Acknowledged:			
	City of Killeen			11/2022			
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provided.						
032521-GPC							
	Automotive, Truck, and Industrial parts, tires, commodities, an	nd related accessories					
4				Nature of			
	Name of Interested Party	City, State, Country (place of bu	ısiness)	(check ap	·		
				Controlling	Intermediary		
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
	My name is	, and my date	e of birth i	S			
	My address is(street)	,, (city)	(state)	(zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and correct	it.					
	Executed inCounty	y, State of, on	the		, 20		
				(month)	(year)		
		Signature of authorized agent of (Declarant)	contractir	ng business entity			