## **CERTIFICATE OF INTERESTED PARTIES**

FORM **1295** 

| L   |  |  |                    |                     |  | 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    |                            |  |
| 1   | Name of business entity filing form, and the city, state and country of the business entity's place of business.  D.I.J. Construction, Inc.  |  |                    |                     | Certificate Number:<br>2023-972073         |                            |  |
|   | Bertram, TX United States  |  |                    |                     | Date Filed:                                |                            |  |
| 2   | ame of governmental entity or state agency that is a party to the contract for which the form is eing filed.   |  |                    | n is 01/1           | 01/13/2023                                 |                            |  |
|   | 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.  22-02 |  |                    |                     |  |                            |  |
|   | Pavement Markings  |  |                    |                     |  |                            |  |
| 4   | Name of Interested Party   |  | te, Country (place | of business)        | Nature of interest ess) (check applicable) |                            |  |
| _   |  |  |                    |                     | Controlling                                | Intermediary               |  |
|   |  |  |                    |                     |  |                            |  |
|   |  |  |                    |                     |  |                            |  |
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|   |  |  |                    |                     |  |                            |  |
|   |  |  |                    |                     |  |                            |  |
| 5 Check only if there is NO Interested Party. |  |  |                    |                     |  |                            |  |
| 6   | UNSWORN DECLARATION  |  |                    |                     |  |                            |  |
|   | My name is Tim D. Jarma  | name isTim_D. Jarma, and my date of birth is11/11/1967 |                    |                     |  |                            |  |
|   | My address is P.O. Box 1609  |  | Bertram            | ,TX_                | 78605                                      | ,_USA_                     |  |
|   | (street)   |  | (city)             | (state)             | (zip code)                                 | (country)                  |  |
|   | I declare under penalty of perjury that the foregoing is true and correct.   |  |                    |                     |  |                            |  |
|   | Executed in Burnet County  | , State of   | Texas              | _, on the <u>13</u> | day of <u>Jan</u>                          | , 20 <u>23</u> .<br>(year) |  |
|   | (year)   |  |                    |                     |  |                            |  |
|   | Signature of authorized agent of contracting business entity   |  |                    |                     |  |                            |  |
|   | Signature of authorized agent of contracting business entity (Declarant)   |  |                    |                     |  |                            |  |