

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**

Certificate Number:
2017-218750

Date Filed:
06/05/2017

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Half Associates, Inc.
Austin, TX United States

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

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.

2016 Minor Drainage CIP
Engineering services to provide plans, specifications, and construction estimate, and assistance for bid phase and construction phase services.

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Engelhardt, Cindy	Austin, TX United States	X	
	Tanksley, Dan	Richardson, TX United States	X	
	Skipwith, Walter	Richardson, TX United States	X	
	Murray, Menton	McAllen, TX United States	X	
	Plugge, Roman	Richardson, TX United States	X	
	Molloy, Martin	Richardson, TX United States	X	
	Moya, Mike	Austin, TX United States	X	
	Kunz, Pat	Richardson, TX United States	X	
	Kuhn, Greg	Richardson, TX United States	X	
	Killen, Russell	Richardson, TX United States	X	
	Ickert , Andrew	Fort Worth, TX United States	X	
	Jackson, Todd	Austin, TX United States	X	
	Craig, Matthew	Richardson, TX United States	X	
	Adams, Bobby	Houston, TX United States	X	

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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.



[Handwritten Signature]

Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Authorized Agent, this the 5th day of June, 2017, to certify which, witness my hand and seal of office.

[Handwritten Signature]

Signature of officer administering oath

[Handwritten Name]

Printed name of officer administering oath

[Handwritten Title]

Title of officer administering oath

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Austin, TX United States

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06/28/2017

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	Molloy, Martin	Richardson, TX United States	X	
	Moya, Mike	Austin, TX United States	X	
	Kunz, Pat	Richardson, TX United States	X	
	Kuhn, Greg	Richardson, TX United States	X	
	Killen, Russell	Richardson, TX United States	X	
	Ickert , Andrew	Fort Worth, TX United States	X	
	Jackson, Todd	Austin, TX United States	X	
	Craig, Matthew	Richardson, TX United States	X	
	Adams, Bobby	Houston, TX United States	X	

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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 contracting 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 officer administering oath

Title of officer administering oath