CERTIFICATE OF INTERESTED PARTIES

president to design and the second design of the second design of the second design of the second design of the			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				
 Name of business entity filing form, and the city, state and country of the business entity's place of business. 		Certificate Number:				
Insituform Technologies, LLC		2019-454665				
Chesterfield, MO United States		Date Filed:				
2 Name of governmental entity or state agency that is a party to the contract for which the form is		02/19/2019				
being filed. City 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.						
NA Sewer Line Rehabilitation Phase 4						
4			Nature of interest			
Name of Interested Party	City, State, Country (place of busine					
· · · · · · · · · · · · · · · · · · ·		Controlling	Intermediary			
Gordon, Charles	Chesterfield, MO United States	X				
Morris, David	Chesterfield, MO United States	Х				
Firsching, Frank	Chesterfield, MO United States	х				
	8					
5 Check only if there is NO Interested Party.						
6 UNSWORN DECLARATION						
My name is <u>Laura M. Andreski</u>	, and my date of birth isNA					
Mundanania 17099 Edian Aurau	Chastafield	MO CODOS	1104			
My address is <u>17988 Edison Avenue</u> (street)	, <u>Chesterfield</u> ,, (sta	<u>MO</u> , <u>63005</u> ate) (zip code)	_, <u>USA</u> . (country)			
I declare under penalty of perjury that the foregoing is true and corre	ct.					
Executed in St LouisCoun	ty, State of <u>Missouri</u> , on the _	19thday of February	, 20 <u>19</u> .			
(month) (year)						
Signature of authorized agent of contracting business entity (Declarant)						

Forms provided by Texas Ethics Commission

Version V1.1.28ab6150

CERTIFICATE OF INTERESTED PARTIES

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			
 Name of business entity filing form, and the city, state and country of the business entity's place of business. 			Certificate Number: 2019-454665			
Insituform Technologies, LLC			2019-434003			
Chesterfield, MO United States		Date	Date Filed:			
2 Name of governmental entity or state agency that is a party to the contract for which the form is		02/19	02/19/2019			
being filed.			Date Acknowledged:			
City of Killeen			03/13/2019			
3 Provide the identification number used by the governmental er	titu or state egonoù te treek er identif			rido o		
description of the services, goods, or other property to be prov	vided under the contract.	y the co	ontract, and prov	nue a		
NA						
Sewer Line Rehabilitation Phase 4						
			Nature of	interest		
4 Name of Interested Party City, State, Country (place of bu		ness)	(check ap	plicable)		
			Controlling	Intermediary		
Gordon, Charles	Chesterfield, MO United States		х			
Morris, David	Chesterfield, MO United States		х			
Firsching, Frank	Chesterfield, MO United States		Х			
5 Check only if there is NO Interested Party.						
6 UNSWORN DECLARATION						
My name is	, and my date of birth is					
My address is		, _		,		
(street)	(city) (state)	(zip code)	(country)		
I declare under penalty of perjury that the foregoing is true and correct.						
Executed inCourt	nty, State of, on the	d	lay of	, 20		
			(month)	(year)		
	Signature of authorized agent of contracting business entity					
	(Declarant)					