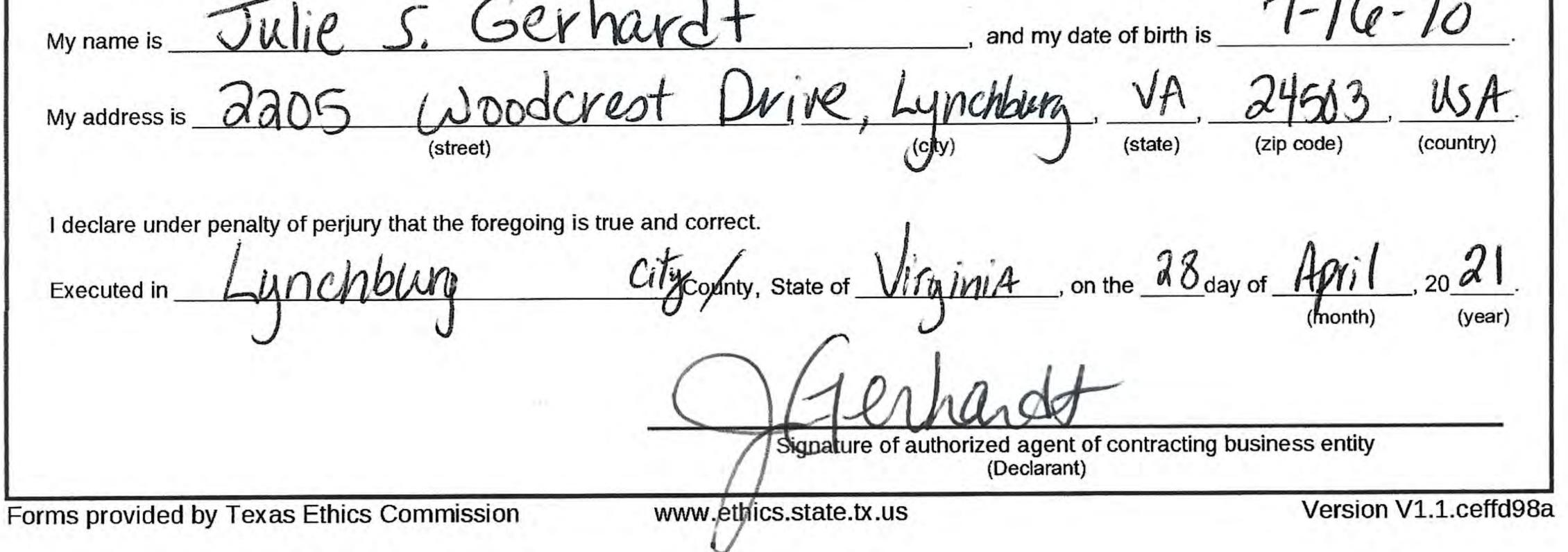
CERTIFICATE OF INTERESTED	PARTIES		FOR	м 1295	
Complete Nos. 1 - 4 and 6 if there are interested parties. Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties. 1 Name of business entity filing form, and the city, state and country of the business entity's place of business. Valley View Consulting, L.L.C. Huddleston, VA United States			1 of 1 OFFICE USE ONLY CERTIFICATION OF FILING Certificate Number: 2021-744577 Date Filed: 04/28/2021 Date Acknowledged:		
Provide the identification number used by the government description of the services, goods, or other property to Investment Advisory Services Cash and Investment Management	mental entity or state agency to track or identif o be provided under the contract.	y the c			
Name of Interested Party	City, State, Country (place of busin	ness)	Nature of interest (check applicable)		
Long, Jr., Richard	Huddleston, VA United States		Controlling X	Intermedia	
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CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

					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.	CE	OFFICE USE ONLY CERTIFICATION OF FILING						
1	Name of business entity filing form, and the city, state and coun of business.	ntity filing form, and the city, state and country of the business entity's place							
	Valley View Consulting, L.L.C.	Consulting, L.L.C.							
	Huddleston, VA United States								
2	Name of governmental entity or state agency that is a party to the				04/28/2021				
	being filed.								
	City of Killeen			Acknowledged:					
		05/2	05/26/2021						
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.								
	Investment Advisory Services Cash and Investment Management								
4				Nature of interest					
Ľ	Name of Interested Party	City, State, Country (place of bus	ness)						
				Controlling	Intermediary				
Lo	Long, Jr., Richard Huddleston, VA United States			x					
5 Check only if there is NO Interested Party.									
6	UNSWORN DECLARATION								
	My name is	is, and my date of birth is							
	My address is		, (state)	(zip code)	_, (country)				
				、 i ···/	· · · //				
	I declare under penalty of perjury that the foregoing is true and correct.								
	Executed inCount	ty, State of, on the	e	day of	, 20				
				(month)					
	Signature of authorized agent of contracting business entity (Declarant)								