

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

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
 Landmark Structures I, L.P.
 Fort Worth, TX United States

Certificate Number:
 2021-767811

Date Filed:
 06/17/2021

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, Texas

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.
 Bid No. 21-32
 Chaparral Elevated Storage Tank

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Talley, Benjie	Ft. Worth, TX United States		X
	Fields, Jr., Willam O.	Ft. Worth, TX United States		X
	Lamon, Chris	Ft. Worth, TX United States		X
	Mike Lamon Family Trust	Ft. Worth, TX United States	X	
	Chris Lamon Family Trust	Ft. Worth, TX United States	X	

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Chris Lamon, and my date of birth is 11/29/60.

My address is 1665 Harmon Road, Fort Worth, Texas, 76177, Tarrant.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Tarrant County, State of Texas, on the 8th day of July, 2021.
(month) (year)


 Signature of authorized agent of contracting business entity (Declarant)
Chris Lamon, President of Landmark Structures Management Inc., General Partner

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Certificate Number:
 2021-767811

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Date Acknowledged:
 08/12/2021

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	Mike Lamon Family Trust	Ft. Worth, TX United States	X	
	Chris Lamon Family Trust	Ft. Worth, TX United States	X	

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 in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

 Signature of authorized agent of contracting business entity
 (Declarant)