	CERTIFICATE OF INTERESTED PAR	TIES		FOR	M 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.		CEF	OFFICE USE	
1	Name of business entity filing form, and the city, state and count of business. CALDWELL COUNTRY CHEVROLET	try of the business entity's place		fi cate Number: -805435	
	CALDWELL, TX United States		1	Filed: 3/2021	
2	Name of governmental entity or state agency that is a party to th being filed. City of Killeen	e contract for which the form is		Acknowledged:	
3	Provide the identification number used by the governmental entidescription of the services, goods, or other property to be provide	ity or state agency to track or identify ded under the contract.	/ the co	ontract, and prov	/ide a
	BUYBOARD 601-19 2022 CHEVROLET TAHOE PURCHASE FOR FIRE DEPAR	TMENT			
4				Nature of	f interest
	Name of Interested Party	City, State, Country (place of busin	iess)	(check ap	
L				Controlling	Intermediary
s	ater, RYAN	Caldwell, TX United States		×	
н	ESTER, ZACH	Caldwell, TX United States		×	
к	NAPP, AVERYT	Caldwell, TX United States		x	
	Check only if there is NO Interested Party.				
6	UNSWORN DECLARATION			3 D	
	My name is Kristm Zapata	, and my date o	f birth is	D709	1983
	My address is PO BOX 27	<u>Caldwell</u>		77831	e USA
	(street)		state)	(zip code)	(country)
	I declare under penalty of perjury that the foregoing is true and corre Executed in BWICDW Coun	ect. hty, State of <u>TOXAS</u> , on the	23	day of <u>Sept</u> (month)	, 20 <mark>_21</mark> (year)
	KA	Signature of authorized agent of co	ntractir	ng business entity	

FORM 1295

Complete Nos. 1 - 4 and 6 if there are interested parties. OFFICE USE ONLY Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties. CERTIFICATION OF FIL						
1 Name of business entity filing form, and the city, state and cour of business.	Certificate Number: 2021-805435					
CALDWELL COUNTRY CHEVROLET		2021-003433				
CALDWELL, TX United States		Date Filed:				
2 Name of governmental entity or state agency that is a party to t	he contract for which the form is	09/23/2021				
being filed.		Date Acknowledged:				
City of Killeen		10/27/2021				
- Provide the identification number used by the governmental on	titu or ototo ogonov to trock or identifu		vido o			
3 Provide the identification number used by the governmental endescription of the services, goods, or other property to be prov		ine contract, and pro	vide a			
BUYBOARD 601-19 2022 CHEVROLET TAHOE PURCHASE FOR FIRE DEPAR	RTMENT					
		Nature o	of interest			
4 Name of Interested Party	City, State, Country (place of busin	iess) (check a	pplicable)			
		Controlling	Intermediary			
Slater, RYAN	Caldwell, TX United States	x				
HESTER, ZACH	Caldwell, TX United States	x				
KNAPP, AVERYT	Caldwell, 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)	tate) (zip code)	_, (country)			
I declare under penalty of perjury that the foregoing is true and corre	ct.					
Executed inCoun	ty, State of, on the	day of(month)				
	Signature of authorized agent of con (Declarant)	tracting business entity				

L				1 of 1
ſ	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 US	
1	Name of business entity filing form, and the city, state and country of business. Chastang Autocar Houston, TX United States	y of the business entity's place	Certificate Number 2021-805040 Date Filed:	
2	Name of governmental entity or state agency that is a party to the	contract for which the form is	09/22/2021	
	being filed. City of Killeen		Date Acknowledge	d:
3	Provide the identification number used by the governmental entity description of the services, goods, or other property to be provide 601-19 Refuse trucks		the contract, and p	rovide a
4	Name of Interested Party	City, State, Country (place of busine	ess) (check	of interest applicable)
┝			Controlling	Intermediary
┝				
L				
┝				
┡				
5	Check only if there is NO Interested Party.		=	
6	UNSWORN DECLARATION			
	My name is John C. CHASTANG	and my date of b	pirth is	·
	My address is 19506 SANCTUARY PLACE D (street)		x . 77388 ate) (zip code)	(country)
	I declare under penalty of perjury that the foregoing is true and correct.			
	Executed in <u>HARRIS</u> County,	State of IEXAS, on the		
		A	(monti	h) (year)
	A	ohn C. Charla		
	O	Signature of authorized agent of contr (Declarant)	racung pusiness enti	y

FORM 1295

					1 07 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 count of business.	try of the business entit		Certificate Number: 2021-805040			
	Chastang Autocar			2021-003040			
	Houston, TX United States			Date Filed:			
2	Name of governmental entity or state agency that is a party to th	e contract for which the		09/22/2021			
Ē	being filed.						
	City of Killeen			Date Acknowledged	:		
3	Provide the identification number used by the governmental enti description of the services, goods, or other property to be provide		ack or identify t	the contract, and pro	ovide a		
	601-19						
	Refuse trucks						
4					of interest		
	Name of Interested Party	City, State, Country (p	place of busine	, ,	pplicable)		
				Controlling	Intermediary		
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
	My name is	, a	ind my date of b	irth is	·		
	My address is	,			,		
	(street)	(city)	(sta	te) (zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and correc	ct.					
	Executed inCounty	y, State of	, on the	day of	, 20		
				(month) (year)		
		Signature of authorize (I	d agent of contr Declarant)	acting business entity	/		

CERTIF	ICATE OF INTERES	TED PARTIES		FOF	км 1295
					1 of 1
Complete Nos. Complete Nos.	. 1 - 4 and 6 if there are interested pa . 1, 2, 3, 5, and 6 if there are no intere	ties. sted parties.		OFFICE US	EONLY
1 Name of busin	ness entity filing form, and the city,	state and country of the business	entity's place		OF FILING
CLS Sewer E	quipment Co. Inc	in the publicity		tificate Number: 21-804465	
	TX United States rnmental entity or state agency tha	t is a party to the contract for which	Dat the form is 09/	e Filed: 21/2021	
City of Killeer			Dat	e Acknowledged	
Cooperative (Standard Buil	Contract 597-19	vernmental entity or state agency to erty to be provided under the contra fraulics, 350 Gallon Spoils Tank A	ACT.		
4	Name of Interacted Dates			Nature o	finterest
	Name of Interested Party	City, State, Countr	y (place of business)		oplicable)
CLS Sewer Equi	amont Caller			Controlling	Intermediary
		Richardson, TX	United States	X	
5 Check only if th	nere is NO Interested Party.				
	erry Sonnier		, and my date of birth is		-71
My address is 🗌	(street)	, MKine	щ, ТХ, (state)		(country)
l declare under r	enalty of perjury that the foregoing is	true and correct			
Executed in			on the	dov of	00
		County, State of	, on the((month)	, 2U (year)
		Sontare of authori	zed agent of contracting (Declarant)	g business entity	
orms provided by	Texas Ethics Commission	www.ethics.state.tx.us	,	Vorsion	/1.1.191b5cdd

FORM 1295

	Complete Nos. 1 - 4 and 6 if there are interested parties.OFFICE USE ONLYComplete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.CERTIFICATION OF FILIN						
1	Name of business entity filing form, and the city, state and country of business.		Certificate Number: 2021-804465				
	CLS Sewer Equipment Co. Inc		20	21 004403			
	Richardson, TX United States		Da	te Filed:			
2	Name of governmental entity or state agency that is a party to the	e contract for which the form	n is 09	/21/2021			
	being filed.						
	City of Killeen			te Acknowledged: /27/2021			
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provid		r identify the	contract, and prov	/ide a		
	Cooperative Contract 597-19 Standard Builder, Power Pack, Diesel with Hydraulics, 350 Ga Exercisor and Rehabilitator	llon Spoils Tank Assembly	y, ERV-750	Automated Valve	Operator,		
4				Nature of	interest		
-	Name of Interested Party	City, State, Country (place	of business) (check ap	plicable)		
				Controlling	Intermediary		
Cl	S Sewer Equipment Co. Inc	Richardson, TX United S	States	x			
-							
-							
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
	My name is	, and m	y date of birth	ı is			
	My address is	,(city)	, (state)	_,(zip code)	, (country)		
			(sidie)	(zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and correct						
	Executed inCounty	, State of	_, on the	day of (month)	, 20 (year)		
				(month)	(year)		
		Signature of authorized age (Declar		ing business entity			
_	me provided by Toyoe Ethios Commission	· · · · · · · · · · · · · · · · · · ·		Manaian	V1 1 101bEad		

FORM 1295

					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	
1	Name of business entity filing form, and the city, state and cou of business.	untry of the business entity's place		icate Number: -804683	
	Crafco, Inc.		2021	-004003	
	Chandler, AZ United States		Date I	Filed: ./2021	
2	Name of governmental entity or state agency that is a party to being filed.	the contract for which the form is	09/21	./2021	
	City of Killeen, Texas		Date /	Acknowledged:	
3	Provide the identification number used by the governmental en	ntity or state agency to track or identify	the co	ontract, and prov	vide a
	description of the services, goods, or other property to be prov 597-19	vided under the contract.			
	SS250 #44100BASE				
4					f interest
	Name of Interested Party	City, State, Country (place of busine	ess)	(check ap	• •
				Controlling	Intermediary
K	elly, Nelson Thomas	Chandler, AZ United States		×	
B	ırns, John Baxter	Jackson, MS United States		x	
Lá	Impton, Robert	Jackson, MS United States		х	
La	mpton, William W.	Jackson, MS United States		х	
EI	gon, Inc.	Jackson, MS United States		х	
	Check only if there is NO Interested Party.	·			
6	UNSWORN DECLARATION				
	My name is <u>N. Thomas Kelly</u>	, and my date of I	birth is	6/6/1958	@
	My address is 6165 West Detroit Street	, Chandler	<u>ΔΖ,</u>	85226	,_USA
	(street)	(city) (st	ate)	(zip code)	(country)
	I declare under penalty of perjury that the foregoing is true and corre	ect.			
	Executed in Maricopa Con	nty, State of <u>Arzona</u> , on the 2	2 <u>1st_</u> d	ay of <u>Septembe</u>	er_, 20 <u>21_</u> .
	0	Hond		(month)	(year)
	4	Signature of authorized agent of cont (Declarant)	racting	business entity	
=0	ms provided by Texas Ethics Commission	ethics.state.tx.us	-	Version	V1.1.191b5cdc

FORM 1295

			1011				
Complete Nos. 1 - 4 and 6 if there are interested parties.OFFICE USE ONLYComplete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.CERTIFICATION OF FILING							
1 Name of business entity filing form, and the city, state and cour of business.	Certificate Number: 2021-804683						
Crafco, Inc.							
Chandler, AZ United States		Date Filed:					
2 Name of governmental entity or state agency that is a party to the being filed.	ne contract for which the form is	09/21/2021					
City of Killeen, Texas		Date Acknowledged: 10/27/2021					
3 Provide the identification number used by the governmental end description of the services, goods, or other property to be provided.		the contract, and prov	ride a				
597-19 SS250 #44100BASE							
4		Nature of	interest				
A Name of Interested Party	City, State, Country (place of busin	ess) (check ap	plicable)				
		Controlling	Intermediary				
Kelly, Nelson Thomas	Chandler, AZ United States	Х					
Burns, John Baxter	Jackson, MS United States	х					
Lampton, Robert	Jackson, MS United States	x					
Lampton, William W.	Jackson, MS United States	tates X					
Ergon, Inc.	Jackson, MS 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)		tate) (zip code)	, (country)				
I declare under penalty of perjury that the foregoing is true and corre	ct.						
Executed inCoun	ty, State of, on the	day of(month)	, 20 (year)				
	Signature of authorized agent of contracting business entity						
	(Declarant)						

FORM 1295

						20.2
Γ	Complete Nos. 1 - 4 and 6 if there are interested parties.				FFICE USE	
Ŀ	Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.			CERTIFICATION OF FILING		
1	Name of business entity filing form, and the city, state and coun of business.	-	Certificate Number: 2021-804612			
	Deere & Company					
L	Cary, NC United States			Date Fil 09/21/2		
2	Name of governmental entity or state agency that is a party to th being filed.	e contract for which the	form is	09/21/2	.021	
	City of Killeen Airport			Date Ac	knowledged:	
3	description of the services, goods, or other property to be provide		ck or identify	the cont	ract, and prov	/ide a
	Sourcewell 110719-JDC					
	Purchase of John Deere Equipment from Sourcewell Ag Equi	ipment Contract 110/19	9-JDC			
4					Nature of	f interest
ľ	Name of Interested Party	City, State, Country (pl	lace of busine		(check ap	oplicable)
				(Controlling	Intermediary
┢						
┝						
┢						
┝						
┡						
				I		
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	My name is <u>Tamara Hebert</u>	, ar	nd my date of t	pirth is	10-2-1973	·
	My address is 2000 John Deere Run	, Cary	, _NC		27513	. U.S.
	(street)	(city)		ate)	(zip code)	(country)
	I declare under penalty of perjury that the foregoing is true and correc	ct.				
	Executed in <u>Wake</u> Count	ty, State of <u>North Carolina</u>	a, on the	<u>21st_</u> day	of Sept.	, 20_21
					(month)	(year)
	- Ya	mara Hebert				
	Signature of authorized agent of contracting business entity					
			eclarant)	0	,	

FORM 1295

					-			
	Complete Nos. 1 - 4 and 6 if there are interested parties.OFFICE USE ONLYComplete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.CERTIFICATION OF FILING							
1	Name of business entity filing form, and the city, state and countr of business.	Certificate Number: 2021-804612						
	Deere & Company							
	Cary, NC United States		Date	Filed:				
2	Name of governmental entity or state agency that is a party to the	contract for which the form is	09/2	1/2021				
	being filed.							
	City of Killeen Airport			Acknowledged:				
			10/2	7/2021				
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provide	y or state agency to track or identif ed under the contract.	y the c	ontract, and prov	vide a			
	Sourcewell 110719-JDC							
	Purchase of John Deere Equipment from Sourcewell Ag Equip	ment Contract 110719-JDC						
4				Nature of				
Ľ	Name of Interested Party	City, State, Country (place of busi	ness)	(check ap				
				Controlling	Intermediary			
5	Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION							
	My name is	المراجع المراجع	· استا					
	My name is	, and my date o	dirth is		·			
	My address is		,		,			
	(street)	(city) (i	state)	(zip code)	(country)			
	I declare under penalty of perjury that the foregoing is true and correct							
	Evented in E			davi of	00			
	Executed inCounty	, State of, on the						
				(month)	(year)			
		Signature of authorized agent of co	ntractin	g business entity				
		(Declarant)						

Г	CERTIFICATE OF INTERESTED PAR	TIES				
				FOR	м 1295	
╞			1		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.		CEF	OFFICE USE RTIFICATION		
1	Name of business entity filing form, and the city, state and coun of business. Freightliner of Austin Austin, TX United States	try of the business entity's place		Certificate Number: 2021-805086		
2	Name of governmental entity or state agency that is a party to th	e contract for which the form is		2/2021		
	being filed. City of Killeen		Date	Acknowledged:		
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provide	ity or state agency to track or identify ded under the contract.	the co	ontract, and pro	vide a	
	TIPS200206 Brush Truck Purchase					
4	Name of Interested Party	City, State, Country (place of busin	ess)	(check ap		
Н	empel, Carlton	Austin, TX United States		Controlling X	Intermediary	
┝			-			
_						
5	Check only if there is NO Interested Party.					
	My name is	and mudate of b		12-5-	17	
	L	Austria T		18721	USA	
	(street)	, A-shi , T (city) , (sta	, ate)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct Executed inCounty	Terros	77	Sept	21	
	Executed inCounty	, State of <u>Tescas</u> , on the <u>Rull</u>	da	(month)	_, 20 (year)	
		Signature of authorized agent of contr (Declarant)	racting	business entity		
For	ms provided by Texas Ethics Commission www.ethi	ics.state.tx.us		Version \	/1.1.191b5cdc	

Version V1.1.191b5cdc

FORM 1295

					1011	
	Complete Nos. 1 - 4 and 6 if there are interested parties.			OFFICE USE	ONLY	
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.				CERTIFICATION OF FILING		
1	Name of business entity filing form, and the city, state and coun	try of the business entity's place		Certificate Number:		
	of business.			1-805086		
	Freightliner of Austin					
	Austin, TX United States			e Filed:		
2	Name of governmental entity or state agency that is a party to the being filed.	e contract for which the form is	09/2	22/2021		
	City of Killeen		Date	e Acknowledged:		
				27/2021		
-	Provide the identification number used by the governmental ent	ty or state agancy to track or iden			vide a	
3	description of the services, goods, or other property to be provide		ary the t	contract, and prov	nue a	
	TIPS200206					
	Brush Truck Purchase					
4	Nome of Interacts of Dentry	City State Country Inland of her	`	Nature of		
	Name of Interested Party	City, State, Country (place of bu	siness)	(check ap	. ,	
				Controlling	Intermediary	
He	empel, Carlton	Austin, TX United States		Х		
				+		
				1		
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)		(-1 : `	,	,	
	(street)	(city)	(state)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correc	xt.				
	Executed in Count	v State of an t	h0	day of	20	
	Executed inCount	y, State of, on t	ie	_day of(month)	, 20 (year)	
				(monut)	(year)	
		Signature of authorized agent of ((Declarant)	contractii	ng business entity		
		(Decidiant)				

FORM 1295

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F						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. 				ficate Number:		
	Holt Texas, LTD.			2021	-805992		
L	San Antonio, TX United States			Date	Date Filed:		
2		party to th	e contract for which the form is	09/24	4/2021		
	being filed. Killeen, City of			Date	Acknowledged:		
				Duit	Aonnomeugeu.		
3	Provide the identification number used by the governm description of the services, goods, or other property to Sourcewell 032119-Cat	nental enti be provic	ity or state agency to track or identify led under the contract.	the co	ontract, and pro	vide a	
	Cat 420EX backhoes and 938 WHA						
4						f interest	
	Name of Interested Party		City, State, Country (place of busine			applicable)	
Ę			Wass TV United States		Controlling	Intermediary	
Ľ	AYLOR, Bryan		Waco, TX United States			Х	
н	OLT RICHTER, Corinna		San Antonio, TX United States		x		
н	OLT, Peter J.		San Antonio, TX United States		x		
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
	My name is		, and my date of b	oirth is	10/06/1	948	
	My address is5665 SE Loop 410		,San Antonio, TX		78222	USA	
	(street)		(city) (sta	ite)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true a	ind correct.					
	Executed in Bexar	County,	, State of, on the, on the	24th		, 20 <u>21</u>	
	(month) (year) Digitally signed by Angela M. Graf DN: cn=Angela M. Graf, o=Holt Texas, LTD., ou=Contracts, email=angela.graf@holtcat.com, c=US Date: 2021.09.24 15:20:23 -05'00'					(year)	
	Signature of authorized agent of contracting business entity (Declarant)						

FORM 1295

			_				
	Complete Nos. 1 - 4 and 6 if there are interested parties.OFFICE USE ONLYComplete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.CERTIFICATION OF FILING						
1	Name of business entity filing form, and the city, state and cou of business.		Certificate Number: 2021-805992				
	Holt Texas, LTD.			2021-000332			
	San Antonio, TX United States		Date	e Filed:			
2	Name of governmental entity or state agency that is a party to t being filed.	the contract for which the form is	09/2	09/24/2021			
	Killeen, City of		Date	Date Acknowledged:			
				10/27/2021			
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.						
	Sourcewell 032119-Cat Cat 420EX backhoes and 938 WHA						
4				Nature of			
-	Name of Interested Party	City, State, Country (place of bus	iness)	(check ap			
				Controlling	Intermediary		
T/	YLOR, Bryan	Waco, TX United States			x		
н	DLT RICHTER, Corinna	San Antonio, TX United States		x			
н	DLT, Peter J.	San Antonio, TX United States		x			
	Check only if there is NO Interested Party.						
	My name is	, and my date of	of birth i	S			
	My address is(street)		(state)	,(zip code)	, (country)		
	I declare under penalty of perjury that the foregoing is true and corre						
	. accurate and or periody or perjory that the foregoing is that and cont						
	Executed inCour	nty, State of, on the	e				
				(month)	(year)		
		Signature of authorized agent of co (Declarant)	ontractir	ng business entity			
	me merided by Teylog Ethics Commission				11 1 101bEada		

	CERTIFICATE OF INTERESTED PART	TIES		FOF	км 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 US CERTIFICATION		
1	Name of business entity filing form, and the city, state and count of business. SILSBEE FORD	ry of the business entity's	2	Certificate Number: 2021-805103		
2	SILSBEE, TX United States Name of governmental entity or state agency that is a party to the	e contract for which the fo		Date Filed: 09/22/2021		
	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. 200206 FLEET VEHICLES					
_				Nature	of interest	
4	Name of Interested Party	City, State, Country (plac	e of busines		pplicable)	
D	ONALSON, DREW	SILSBEE, TX United S	States	Controlling X	Intermediary	
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	My name is SETH GAMBLIN	, and	my date of bir	rth is12/24/1985	·	
	My address is1211 US HIGHWAY 96 N.	,SILSBEE	, _тх	,77656	_,USA	
	(street)	(city)	(state	e) (zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct		0			
	Executed in HARDIN County	v, State of	, on the	day of <u>SEPTEN</u> (month)		
		STHGK	TMBL	AN		
		Signature of authorized a (Deci	gent of contra larant)	acting business entity	,	

	CERTIFICATE OF INTERESTED PAR	TIES		FOR	M 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	
1	Name of business entity filing form, and the city, state and count of business. SILSBEE FORD	try of the business entity's place	Certificate Number: 2021-805103		
	SILSBEE, TX United States		Date I		
2	Name of governmental entity or state agency that is a party to the	ncy that is a party to the contract for which the form is 09/22/2021			
	being filed. City of Killeen		Date Acknowledged: 10/27/2021		
3	description of the services, goods, or other property to be provid		/ the co	ontract, and prov	ride a
	200206 FLEET VEHICLES				
4				Nature of	
	Name of Interested Party	City, State, Country (place of busin	iess)	(check ap	
				Controlling	Intermediary
D	ONALSON, DREW	SILSBEE, TX United States		х	
5	Check only if there is NO Interested Party.		1	I	
6	UNSWORN DECLARATION				
	My name is, and my date of birth is				
	My address is(street)		, _	(zip code)	, (country)
			ale)	(zip code)	(country)
	I declare under penalty of perjury that the foregoing is true and correc				
	Executed inCounty	y, State of, on the	d	ay of(month)	, 20 (year)
	Signature of authorized agent of contracting business entity (Declarant)				

				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.	CEI	OFFICE USE			
1	Name of business entity filing form, and the city, state and country of the business entity's place of business. STERLING MCCALL FORD HOUSTON, TX United States	Certi 2021	Certificate Number: 2021-805471 Date Filed:			
2	Name of governmental entity or state agency that is a party to the contract for which the form is being filed.	09/23	3/2021			
	CITY OF KILLEEN	Acknowledged:				
3	Provide the identification number used by the governmental entity or state agency to track or iden description of the services, goods, or other property to be provided under the contract. AM10-20 AMBULANCE	ntify the co				
4	Name of Interested Party City, State, Country (place of bu	usiness)		f interest pplicable)		
			Controlling	Intermediary		
				·		
	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	My name is YAOO (AND A., and my date	e of birth is	10-9-1	970		
	My address is 6445 SOUTHWEST FRWY, HOUSTON, (city)	, (state)	<u>77074</u> (zip code)	, <u>USA</u> . (country)		
	I declare under penalty of perjury that the foregoing is true and correct.					
	Executed in <u>HArn's</u> County, State of <u>TEXAS</u> , on t	the <u>33_</u> di	ay of <u>SEPT</u> (month)	_, 20 <u>, 21</u> . (year)		
	Signature of authorized agent of contracting business entity (Declarant)					

Forms provided by Texas Ethics Commission

Version V1.1.191b5cdc

	CERTIFICATE OF INTERESTED PAR	TIES		FOR	м 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.		CEI	OFFICE USE		
1	of business.	ry of the business entity's place		Certificate Number: 2021-805471		
	STERLING MCCALL FORD					
2	HOUSTON, TX United States	e contract for which the form is		Filed: 3/2021		
[being filed.	al entity or state agency that is a party to the contract for which the form is 09/23/2021				
	CITY OF KILLEEN			Acknowledged: 7/2021		
3	Provide the identification number used by the governmental enti description of the services, goods, or other property to be provid AM10-20		the c	ontract, and prov	vide a	
	AMBULANCE					
4	Name of Interested Party	City, State, Country (place of busi	ness)	Nature of (check ap		
				Controlling	Intermediary	
┝						
L						
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)		state)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correc	t.				
	Executed inCounty	/. State of	; ;	dav of	. 20 .	
		,, outo o, o		(month)	,o (year)	
	Signature of authorized agent of contracting business entity (Declarant)					