CERTIFICATE OF INTERESTED PARTIES

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 ONLY CERTIFICATION OF FILING				
1	ame of business entity filing form, and the city, state and country of the business entity's place f business.			Certificate Number: 2023-1097774				
	FLOORING SOLUTIONS IN		2023-1097774					
	Hutto, TX United States		Date	Filed:				
2		a contract for which the form is	11/27/2023					
12	being filed.							
	Williamson County		Date	Acknowledged:				
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provid	tion number used by the governmental entity or state agency to track or identify the contract, and provide a vices, goods, or other property to be provided under the contract.						
	080819-SII-S & 080819-TFU							
	JAIL NORTH FLOORING REPLACEMENT FLOORING DEM	IO AND INSTALLATION						
4			Nature of interest					
	Name of Interested Party City, State, Country (place	City, State, Country (place of busin	ess)	(check applicable)				
				Controlling	Intermediary			
) ¹						
	Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION			1	1			
	My name is, and my date of birth is							
	My address is,	Hutto 1	Ϋ́,	78634	Willimer			
	(street)	(city) (st	tate)	(zip code)	(country)			
	I declare under penalty of perjury that the foregoing is true and correct.							
	Executed in Willianson County, State of on the 77 day of Noreman, 2023.							
	(month) (year)							
1	Signature of authorized agent of contracting business entity							
1	(Declarant)							

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	CERTIFICATE OF INTERESTED PARTIES				FORM 1295				
					1 of 1				
	mplete Nos. 1 - 4 and 6 if there are interested parties. mplete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.			OFFICE USE ONLY RTIFICATION OF FILING					
1				ertificate Number: 023-1097774					
	OORING SOLUTIONS IN utto, TX United States Dat			Filed:					
2		vernmental entity or state agency that is a party to the contract for which the form is $11/2$							
				Acknowledged: 8/2023					
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provid		ify the c	ontract, and prov	/ide a				
	080819-SII-S & 080819-TFU								
	JAIL NORTH FLOORING REPLACEMENT FLOORING DEM	IO AND INSTALLATION							
4		Nature of interest							
	Name of Interested Party	City, State, Country (place of business)		(check ap Controlling	plicable) Intermediary				
					internetitary				
┝									
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)	(city)	(state)	(zip code)	(country)				
	I declare under penalty of perjury that the foregoing is true and correct.								
	Executed inCounty	v, State of, on th	e						
				(month)	(year)				
	Signature of authorized agent of contracting business entity								
1	(Declarant)								