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 count of business.	Certificate Number: 2024-1166094								
	Williamson County									
	Georgetown, TX United States				Date Filed:					
2	Name of governmental entity or state agency that is a party to the being filed.	he form is	05/24/2024							
	Villiamson County				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.									
	24RFP46 HVAC Air Fi l ter Maintenance Services for Williamson County, Texas.									
4			talaan of husing		Nature of interest (check applicable)					
	Name of Interested Party	City, State, Country	, ,		. ,					
-				c	ontrolling	Intermediary				
	Check only if there is NO Interested Party.									
6	UNSWORN DECLARATION									
	My name is Patrick Rosenthal	,	and my date of	birth is		L				
	My address is	,Austin	,	X	78758	, USA				
	(street)	(city)	(st	ate)	(zip code)	(country)				
	I declare under penalty of perjury that the foregoing is true and correc	t.								
	Executed in Travis County	y, State of Texa	is, on the _	<u>31 day</u>		, 20 <u>24</u> .				
			Λ.		(month)	(year)				
	Fit & Kontal									
	Signature of authorized agent of contracting business entity (Declarant)									

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FORM 1295

1 of 1

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	Williamson County		-024-1								
1	Georgetown, TX United States	•				Date Filed:					
2	Name of governmental entity or state agency that is a party t being filed.	ency that is a party to the contract for which the form is				05/24/2024					
	Villiamson County				Date Acknowledged:						
					05/31/2024						
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	24RFP46										
	HVAC Air Filter Maintenance Services for Williamson Cou	unty, Texas.									
-					Nature of	interest					
4	Name of Interested Party City, State, Country (place of busine										
				_ ۲	Controlling	Intermediary					
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				\rightarrow							
5	Check only if there is NO Interested Party.										
6	UNSWORN DECLARATION										
			. .								
	My name is	and my date of b	birth is								
	My address is	1	,								
	(street)	,(city)	,, (sta	, ate)	(zip code)	, (country)					
	I declare under penalty of perjury that the foregoing is true and co										
Executed in, on theday of											
			_		(month)	(year)					
		Signature of authorized agent of contracting business entity (Declarant)									
Fo	s provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.d378ab										