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	of broadcasts			Certificate Number: 2022-966911		
	a William Control No. 1 and Control No.			Date Filed:		
2				12/22/2022		
	being filed.			Date Acknowledged:		
	Burleson Police Department					
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.					
	S32MCC-35463-22 Design and manufacture of a mobile command center for the Burleson Police Department.					
4					Nature of interest	
Name of Interested Party		City, State, Country (place of business)		(check applicable) Controlling Intermediary		
_	arii - Mara	Durlington Milltriad Control		Controlling	intermediary	
۲	trie, Kurt	Burlington, WI United States		X		
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_			_			
5 Check only if there is NO Interested Party.						
UNSWORN DECLARATION						
	My name is and my date of birth is					
	My address is 30518 Durand Que Ruling fon W 53105 USA (street) (city) (state) (zip code) (country)					
	I declare under penalty of perjury that the foregoing is true and correct.					
	Executed in Racino County, State of UI , on the 22 day of Occ. 20 22 (month) (year)					
	Signature of authorized agent of contracting business entity (Declarant)					