

# 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.**  
Armstrong Forensic Laboratory, Inc.  
Arlington, TX United States

Certificate Number:  
2024-1229753

Date Filed:  
10/22/2024

Date Acknowledged:


**2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.**  
City of Burleson

**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.**  
2022-189  
Analytical Testing and Consulting Services

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Armstrong, Kay	Arlington, TX United States	X	
	Armstrong, Marion	Arlington, TX United States	X	
	Armstrong, Michael	Arlington, TX United States	X	
	Armstrong, Benjamin	Arlington, TX United States	X	

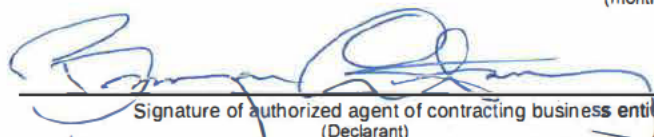
**5 Check only if there is NO Interested Party.**

**6 UNSWORN DECLARATION**

My name is , and my date of birth is ██████████.  
My address is 330 Lockin Green Trail (street), Arlington (city), TX (state), 76012 (zip code), USA (country).

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

Executed in Tarrant County, State of Texas, on the 22 day of October, 2024.  
(month) (year)

  
Signature of authorized agent of contracting business entity (Declarant)