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	lame of business entity filing form, and the city, state and country of the business entity's place of business.			Certificate Number: 2024-1117474			
	ne PlayWell Group, Inc.						
	oerne, TX United States			Date Filed:			
2	ame of governmental entity or state agency that is a party to the contract for which the form is			01/29/2024			
-	being filed.	filed.					
	ity of Burleson			Date Acknowledged:			
3	rovide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a escription of the services, goods, or other property to be provided under the contract.						
	Provisions						
	Custom Playground Equipment						
4				Nature of interest			
4	Name of Interested Party	City, State, Country (place of business)		ess)			
					Controlling	Intermediary	
_							
_							
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
	Maria Powell My name is	, and my date of			birth is		
	My address is203A State Highway 46 East	Boerne		exas_	78006	_,_US	
	(street)	(city)	(5	state)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct.						
	Executed inCount	ty, State of <u>Texas</u>	, on the	29th	day of January	, 20_24 (year)	
		Signature of authorized agent of contracting business entity					
	(Declarant)						