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.		CE	OFFICE USE		
1	Name of business entity filing form, and the city, state and country of the business entity's place of business.			Certificate Number: 2023-1090117		
	Texas Disposal Systems		202	3-1030117		
	Creedmoor, TX United States		Date	e Filed:		
2	Name of governmental entity or state agency that is a party to the	e contract for which the form is	11/0	01/2023		
	being filed.		Date	e Acknowledged:		
	Williamson County			02/2023		
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provided.		tify the o	contract, and prov	vide a	
	23RFP101					
	Williamson County Solid Waste and Recycling Services					
4				Nature of		
	Name of Interested Party	City, State, Country (place of bu	ısiness)	(check ap		
				Controlling	Intermediary	
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	rt.				
					00	
	Executed inCounty	/, State of, on t	ine	_day of (month)	, 20 (year)	
				(month)	(year)	
		Signature of authorized agent of	contractir	ng business entity		
		(Declarant)		-		

CERTIFICATE OF INTERESTED PART	TIES	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				
Name of business entity filling form, and the city, state and count of business.	Certificate Number: 2023-1090117				
Texas Disposal Systems Creedmoor, TX United States	Date Filed: 11/01/2023				
Name of governmental entity or state agency that is a party to th being filed. Williamson County	nental entity or state agency that is a party to the contract for which the form is				
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. 23RFP101 Williamson County Solid Waste and Recycling Services					
Name of Interested Party	City, State, Country (place of busi	Nature of interest (check applicable)			
Name of interested Party		Controlling Intermedia			
Check only if there is NO Interested Party.					
UNSWORN DECLARATION					
My name is					
My address is 12200 Carl Rd. (street)	. Creedmoor (city)	(state) 7860 , US (country)			
declare under penalty of perjury that the foregoing is true and correct.					
Executed in Travis Cour	nty, State of VEXAS, on the	e day of November 20 23 (month) (year			
	Signature of Authorized agent of contracting business entity				
	Signature of authorized agent of c (Declarant)				
forms provided by Texas Ethics Commission www.e	ethics.stateAtx.us	Version V3.5.1.9b43			