

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.

Northeast & Bucks Co. T/A Mullin & Lonergan Associates
Mechanicsburg, PA United States

Certificate Number:
2024-1119751

Date Filed:
02/05/2024

Date Acknowledged:
02/06/2024

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

Williamson County

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.

24RFP18
Consultant to Develop 2014-2028 HUD Consolidated Plan 2024-2025 Annual Action Plan

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Wasielewski, William	Sewickley, PA United States	X	
	Lonergan, Thomas	Jamison, PA United States	X	
	Northup, Laura	Mechanicsburg, PA 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 _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

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

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

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	Northup, Laura	Mechanicsburg, PA United States	X	

5 Check only if there is NO Interested Party.

☐

6 UNSWORN DECLARATION

My name is William Wasielewski, and my date of birth is .

My address is 2625 Syracuse Court, Sewickley, PA, 15143, USA.
(street) (city) (state) (zip code) (country)

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

Executed in Allegheny County, State of Pennsylvania, on the 5th day of February, 20 24.
(month) (year)



Signature of authorized agent of contracting business entity
(Declarant)