## **CERTIFICATE OF INTERESTED PARTIES**

FORM 1295

							1 of <b>1</b>
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 filing form, and the city, state and country of the business entity's place of business. FACILITIES RESOURCE, INC. Cedar Park, TX United States					Certificate Number: 2024-1134037 Date Filed:		
Name of governmental entity or state agency that is a party to the contract for which the form is being filed.  Williamson County, Texas					03/12/2024  Date Acknowledged:		
3 Provide the Identification number used by the governme description of the services, goods, or other property to be 24098A Furniture				ck or identify	the co	ntract, and prov	/ide a
4 Name of Interested Party		City, State, Country (place of business)			ess)	Nature of interest (check applicable)  Controlling Intermediary	
Teinert Ross, Margaret		Georget	own, TX Un	ited States		Х	memeralary
Ross, Darren		Georget	own, TX Un	ited States			Х
Ornelas, Cynthia		Cedar P	ark, TX Uni	ed States			Х
Ornelas, Robert		Cedar P	ark, TX Uni	ed States			Х
					_		
				· · · · · · · · · · · · · · · · · · ·			
					_		
5 Check only if there is NO Interested Party.							
6 UNSWORN DECLARATION							
My name ls <u>Margaret Teinert Ross</u>			, a	nd my date of	bi <b>r</b> th is _		<u> </u>
My address is(street)		Ge	eorgeto		<u>TX</u> , _	78626 (zlp code)	, <u>USA</u> .
I declare under penalty of perjury that the foregoing is true as	nd correct	t.	,	,		, ,	
Executed in Williamson			Texas	, on the _	12 <sub>da</sub>	ay of March	1_, <b>20</b> 24.
	Mai	Margaret Teinert Distra			(month) (year) ly signed by Margaret Teinert Ross =Margaret Teinert Ross, o=Facilities Resource, ı, email=mteinert@fri-texas.com, c=US 1024.03.12 16:49:10 -05'00'		
_	Signature of authorized agent of contracting business entity (Declarant)						

## **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			
	Name of business entity filing form, and the city, state and country of the business entity's place of business.			Certificate Number:			
	FACILITIES RESOURCE, INC.			2024-1134037			
	Cedar Park, TX United States			Date Filed:			
	Name of governmental entity or state agency that is a party to th	as sentract for which the		03/12/2024			
	hame of governmental entity of state agency that is a party to the being filed.	le contract for which the	e form is	00/12/202 :			
	Williamson County, Texas		Date Acknowledged:	:			
				03/19/2024			
	Provide the identification number used by the governmental entidescription of the services, goods, or other property to be provided 24098A  Furniture			the contract, and pro	vide a		
4	Name of Interested Posts	Site State Country (	leee of busines		of interest		
Name of Interested Party		City, State, Country (p	place of busine	· -	pplicable)		
		<del> </del>		Controlling	Intermediary		
Tei	inert Ross, Margaret	Georgetown, TX Ur	nited States	X			
Ros	ss, Darren	Georgetown, TX Ur	nited States		X		
Orr	nelas, Cynthia	Cedar Park, TX Uni	ited States		Х		
Orr	nelas, Robert	Cedar Park, TX Uni	ited States		X		
5	Check only if there is NO Interested Party.						
6 I	UNSWORN DECLARATION						
	My name is	, and my date of birth is					
ı	My address is	,	,	,	-,·		
	(street)	(city)		ate) (zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and correc	ct.					
	Executed inCount	ty, State of	, on the _	day of	, 20		
				(month)	(year)		
		Signature of authorize	ed agent of contr	racting business entity			