

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

Certificate Number:
2024-1154390

Date Filed:
04/30/2024

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Falkenberg Construction Co., Inc.
Grand Prairie, TX United States

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

Williamson County Facilities Management

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.

581-19
Inner Loop Annex IT-Risk New Offices

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Castro, John	Grand Prairie, TX United States	X	
	Gomez, Moses	Grand Prairie, TX United States	X	
	Arnold, Christopher	Grand Prairie, TX United States	X	

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is John E. Castro, and my date of birth is [REDACTED]

My address is [REDACTED] (street), Grand Prairie TX (city), TX (state), 75050 (zip code), USA (country)

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

Executed in Dallas County, State of Texas, on the 30 day of April, 2024.
(month) (year)

[Signature]
Signature of authorized agent of contracting business entity
(Declarant)

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 Falkenberg Construction Co., Inc.
 Grand Prairie, TX United States

Certificate Number:
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2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
 Williamson County Facilities Management

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	Castro, John	Grand Prairie, TX United States	X	
	Gomez, Moses	Grand Prairie, TX United States	X	
	Arnold, Christopher	Grand Prairie, 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 _____, _____, _____, _____, _____.
(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)