CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 1

						1011		
	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	ame of business entity filing form, and the city, state and country of the business entity's place			Certificate Number:				
	ymer Communication Services, LLC dba BryComm, LLC			2024-1189245				
	utto, 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 eing filed.			07/18/2024				
	Williamson County Commissioners Court			Date Acknowledged: 07/22/2024				
3	Provide 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.							
	2024244	aca ander the contract	•					
	FY 2024 Fiber Maintenance							
4					Nature of interest			
	Name of Interested Party City, State, Country (place of busin			ness) (check applicable) Controlling Intermediary				
Brymer, Cory		Hutto, TX United S	X	itroning	intermediary			
5	Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION							
	My name is	ne is, and my date of				f birth is		
	My address is			,	,	.		
	(street)	(city)	(sta	ate) (z	ip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and correct	et.						
	Executed inCount	y, State of	, on the _	day of				
					(month)	(year)		
								
	Signature of authorized agent of contracting business entity (Declarant)							

CERTIFICATE OF INTERESTED PARTIES FORM 1295 1 of 1. **OFFICE USE ONLY** 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. **CERTIFICATION OF FILING** Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2024-1189245 Brymer Communication Services, LLC dba BryComm, LLC Hutto, TX United States Date Filed: Name of governmental entity or state agency that is a party to the contract for which the form is 07/18/2024 being filed, Williamson County Commissioners Court Date Acknowledged: 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. 2024244 FY 2024 Fiber Maintenance Nature of interest Name of Interested Party City, State, Country (place of business) (check applicable) Controlling Intermediary Brymer, Cory Hutto, TX United States Х 5 Check only if there is NO Interested Party. **6 UNSWORN DECLARATION** My name is _, and my date of birth is ___ US My address is _____ (street) (state) (zip code) (country) I declare under penalty of perjury that the foregoing is true and correct. Executed in ____ July 24 _____, on the _ ¹⁸_day of _ ___County, State of _

Signature of authorized agent of contracting business entity (Declarant)