## **CERTIFICATE OF INTERESTED PARTIES**

FORM **1295** 

1 of 1

|  |   |  |                    |  | 1 07 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<br>CERTIFICATION OF FILING |              |  |  |  |  |
| 1  | me of business entity filing form, and the city, state and country of the business entity's place business.   |  |                    | Certificate Number:<br>2024-1244484        |              |  |  |  |  |
|  | Iliance Engineering Group, Inc.<br>aylor, 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.  |  |                    | 12/02/2024                                 |              |  |  |  |  |
|  | /illiamson County   |  |                    | Date Acknowledged:                         |              |  |  |  |  |
| 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. |  |                    |  |              |  |  |  |  |
|  | 24RFSQ12 Professional Engineering and Construction Materials Testing Services   |  |                    |  |              |  |  |  |  |
| 4  | Name of Interested Party  | City, State, Country (place of busines |                    | Nature of interest ess) (check applicable) |              |  |  |  |  |
|  |   |  |                    | Controlling                                | Intermediary |  |  |  |  |
| Eddins, Wayne  |   | Rosharon, TX United States             | , TX United States |  |              |  |  |  |  |
|  |   |  |                    |  |              |  |  |  |  |
|  |   |  |                    |  |              |  |  |  |  |
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|  |   |  |                    |  |              |  |  |  |  |
|  |   |  |                    |  |              |  |  |  |  |
| 5 Check only if there is NO Interested Party.                              |   |  |                    |  |              |  |  |  |  |
| 6  | UNSWORN DECLARATION   |  |                    |  |              |  |  |  |  |
|  | My name is Wayate A. EDOINS   | , and my date of                       | birth is           | 5  |              |  |  |  |  |
|  | My address is(street)   | (city) (sl                             | tate)              | (zip code)                                 | (country)    |  |  |  |  |
| I declare under penalty of perjury that the foregoing is true and correct. |   |  |                    |  |              |  |  |  |  |
| Executed in LILIAN SON County, State of TEXAS, on the 2 day of DEC, 20 24. |   |  |                    |  |              |  |  |  |  |
|  | PRES IPEN /CEO  |  |                    |  |              |  |  |  |  |
|  | Signature of authorized agent of contracting business entity (Declarant)  |  |                    |  |              |  |  |  |  |

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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:                     |                |  |
|  | of business. Alliance Engineering Group, Inc.   | 202                        | 2024-1244484 |   |                |  |
|  | Taylor, TX United States  | Date                       | Date Filed:  |   |                |  |
| 2  | Name of governmental entity or state agency that is a party to the contract for which the form is   |                            |              | 12/02/2024                              |                |  |
|  | being filed.  |                            |              | Bata Aslan and admed                    |                |  |
|  | Williamson County   |                            |              | Date Acknowledged:<br>12/03/2024        |                |  |
|  |   |                            |              |   |                |  |
| 3  | Provide the identification number used by the governmental entit description of the services, goods, or other property to be provided as a service of the services. |                            | ity the o    | contract, and prov                      | vide a         |  |
|  | 24RFSQ12 Professional Engineering and Construction Materials Testing  | Services                   |              |   |                |  |
| 4  |   |                            |              | Nature of interest                      |                |  |
| _  | Name of Interested Party  City, State, Country (place of busin  |                            | iness)       | ·                                       |                |  |
|  |   |                            |              | Controlling                             | Intermediary   |  |
| Eddins, Wayne  |   | Rosharon, TX United States | X            |   |                |  |
|  |   |                            |              |   |                |  |
|  |   |                            |              |   |                |  |
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|  |   |                            |              |   |                |  |
|  |   |                            |              |   |                |  |
| 5  | Check only if there is NO Interested Party.   |                            |              |   |                |  |
| 6  | UNSWORN DECLARATION   |                            |              |   |                |  |
|  | My name is  | , and my date of birth is  |              |   |                |  |
|  | My addraga is   |                            |              |   |                |  |
|  | My address is(street)   | ,,,,                       | (state)      | (zip code)                              | (country)      |  |
|  | I declare under penalty of perjury that the foregoing is true and correct   | t.                         |              |   |                |  |
|  |   |                            |              |   | 00             |  |
|  | Executed inCounty   | , state of, on th          | ie           | _day of<br>(month)                      | , 20<br>(year) |  |
|  |   |                            |              |   |                |  |
|  |   | Olamatana af illia i       |              |   |                |  |
| Signature of authorized agent of contracting business entity (Declarant) |   |                            |              |   |                |  |