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 | me of business entity filing form, and the city, state and country of the business entity's place | | | Certificate Number: | | | | | |
| | f business. Separation Systems Consultants, Inc. | | | 2025-1267488 | | | | | |
| | Houston, TX United States | | | Date Filed: | | | | | |
| 2 | Name of governmental entity or state agency that is a party to the contract for which the form is | | | 02/10/2025 | | | | | |
| | being filed. Williamson County | | | Date Acknowledged: 02/11/2025 | | | | | |
| | | | | | | | | | |
| 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. | | | | | | | | |
| | 2025136 | | | | | | | | |
| | Abatement Services | | | | | | | | |
| 4 | | | | Nature of interest | | | | | |
| 4 | Name of Interested Party City, State, Country (place of busin | | of busines | | pplicable) | | | | |
| | | | | Controlling | Intermediary | | | | |
| Hodges, Helen | | Houston, TX United Stat | Х | | | | | | |
| Hodges, Donald E. | | Houston, TX United Stat | Х | | | | | | |
| Marks, Lynn | | Houston, TX United States | | Х | | | | | |
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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 address is | | | | | | | | |
| | My address is(street) | (city) | , (state | e) (zip code) | (country) | | | | |
| | I declare under penalty of perjury that the foregoing is true and correct | ct. | | | | | | | |
| | Executed inCount | y, State of | _, on the | day of | , 20 | | | | |
| | | | | (month) | | | | | |
| | | Signature of outherined | ont of occiti | noting business antiti | | | | | |
| | | Signature of authorized age (Declar | | icung business entity | | | | | |

CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

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|--|--|--|----------|--|---|--|--|--|--|
| | 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. Separation Systems Consultants, Inc. Houston, TX United States | | | Certificate Number: 2025-1267488 Date Filed: | | | | | |
| 2 | peing filed. | | | 02/10/2025 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. 2025136 Abatement Services | | | | | | | | |
| 4 | Name of Interested Party | City, State, Country (place of b | usiness) | (check a | Nature of interest (check applicable) Controlling Intermediary | | | | |
| H | odges, Helen | Houston, TX United States | | X | memediary | | | | |
| Н | odges, Donald E. | Houston, TX United States | | × | | | | | |
| M | arks, Lynn | Houston, TX United States | | х | | | | | |
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| | | | | | | | | | |
| 5 | Check only if there is NO Interested Party. | | | | ::::::::::::::::::::::::::::::::::::::: | | | | |
| | UNSWORN DECLARATION | | | | | | | | |
| | My name is Donald E. Hodges, PE Secretary | d E. Hodges, PE Secretary, and my date of birth is | | | | | | | |
| | My address is(street) | (city) | (state) | (zip code) | , USA (country) | | | | |
| I declare under penalty of perjury that the foregoing is true and correct. | | | | | | | | | |
| Executed in Harris Coun | | y, State of <u>Texas</u> , on | the 10 c | day of Feb. | , 20 <u>25</u> (year) | | | | |
| | | The SA | 4 | | ()/ | | | | |
| Signature of authorized agent excontracting business entity (Declarant) | | | | | | | | | |