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	lame of business entity filing form, and the city, state and country of the business entity's place f business.			Certificate Number:					
	quaLogic Water Consulting			2025-1281071					
	ustin, TX United States			Date Filed:					
2	Name of governmental entity or state agency that is a party to the being filed.	03/13/2025							
	Williamson County	unty			Date Acknowledged:				
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provided		the co	ontract, and pro	vide a				
	2025.03.11 Water Treatment Services								
4	Name of Interested Party	City, State, Country (place of busine		Nature of interest					
				(check ap	pplicable) Intermediary				
AquaLogic Water Consulting		Austin, TX United States		X	,				
5	Check only if there is NO Interested Party.								
6	UNSWORN DECLARATION								
	My name is Nina Helburn	, and my date of birth is							
	My address is			, , , , ,	USA.				
	(street)	(city) (st	ate)	(zip code)	(country)				
	declare under penalty of perjury that the foregoing is true and correct.								
Executed in Williamson County, State of Texas, on the 13th day of Marc (month)									
		ma Haller							
	Signature of authorized agent of contracting business entity (Declarant)								

CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 1

						1011				
	omplete Nos. 1 - 4 and 6 if there are interested parties. omplete 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.			Certificate Number:						
	AquaLogic Water Consulting				2025-1281071					
	Austin, TX United States			Date File	ad.					
2		o contract for which t	ho form is	03/13/2						
_	Name of governmental entity or state agency that is a party to the contract for which the form is being filed.									
	Williamson County				Date Acknowledged: 03/17/2025					
						••				
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.									
	2025.03.11									
	Water Treatment Services									
4					Nature of interest					
•	Name of Interested Party City, State, Country (place of busi		(place of busine	ness) (checl		plicable)				
				- 0	Controlling	Intermediary				
Αd	quaLogic Water Consulting	Austin, TX United States			<					
5	Check only if there is NO Interested Party.									
6	UNSWORN DECLARATION									
	My name is	, and my date of birt				·				
	My address is									
	My address is(street)	(city)	,,,,	, ate)	(zip code)	(country)				
	I declare under penalty of perjury that the foregoing is true and correc	†								
			- d.		o.f	20				
	Executed inCounty	y, State of	, on the _	day	of(month)	, 20 (year)				
		Signature of authoriz	zed agent of cont (Declarant)	racting bu	ısiness entity					