

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:
2025-1299028

Date Filed:
04/22/2025

Date Acknowledged:

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

Chasco Constructors
Round Rock, 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.

23081
Berry Springs Park Restroom Renovation

| 4 | Name of Interested Party | City, State, Country (place of business) | Nature of interest (check applicable) | |
|---|---|--|--|--------------|
| | | | Controlling | Intermediary |
| | Williamson County Facilities Management | Georgetown, TX United States | X | |
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5 Check only if there is NO Interested Party. ☐

6 UNSWORN DECLARATION

My name is Cullen Tugue, and my date of birth is [REDACTED].

My address is [REDACTED]
(city) (state) (zip code) (country)

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

Executed in WILLIAMSON County, State of TEXAS, on the 22 day of APRIL, 2025.
(month) (year)

Cullen Tugue
Signature of authorized agent of contracting business entity
(Declarant)

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Chasco Constructors
Round Rock, TX United States

Certificate Number:
2025-1299028

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04/22/2025

Date Acknowledged:
04/24/2025

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Williamson County Facilities Management

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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 _____, _____, _____, _____, _____.
(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)