CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 1

_	Complete Nos. 1 - 4 and 6 if there are interested parties.			OFFICE USE ONLY		
	Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.			CERTIFICATION OF FILING		
1	ame of business entity filing form, and the city, state and country of the business entity's place f business.			Certificate Number: 2025-1306282		
	Incircle Management Inc					
_	Westlake, TX United States			te Filed: /07/2025		
2	Name of governmental entity or state agency that is a party to th being filed.	e contract for which the form i	s 05/	07/2025		
	Williamson County			te Acknowledged: /08/2025		
3	Provide the identification number used by the governmental enti description of the services, goods, or other property to be provide		dentify the	the contract, and provide a		
	24IFB56	acu unuci ine contract.				
	Mowing Services for County Right of Way					
4				1	Nature of interest (check applicable)	
	Name of Interested Party City, State, Country (place of bus		r business)	Controlling	Intermediary	
_				Controlling	intermediary	
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	ot.				
	Executed inCount		on the	day of	20	
	County	y, State 01,	OII IIIE	day of(month)		
		Signature of authorized agent	t of contract	ing business entity		
	(Declarant)					

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	Name of business entity filing form, and the city, state and country of business.	Certificate Number:				
	Incircle Management Inc		2025-1306282			
	Westlake, TX United States		Date Filed:			
2	Name of governmental entity or state agency that is a party to the	e contract for which the form is	05/07/2025			
	being filed.	Date Acknowledged:				
	Williamson County					
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provided.	e identification number used by the governmental entity or state agency to track or identify the contract n of the services, goods, or other property to be provided under the contract.				
	24IFB56					
	Mowing Services for County Right of Way		* * * * * * * * * * * * * * * * * * *			
4	Name of Interested Party City, State, Country (place of busin		313 310 115 1	re of interest		
			Controlling	k applicable) g Intermediary		
			Controlling	g intermediary		
				*		
_						
_				- 1		
_						
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
(country)						
	I declare under penalty of perjury that the foregoing is true and correct	t.				
Executed in						
(month) (year						
	Signature of authorized agent of contracting business entity (Declarant)					