

# 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

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

Komatsu/Rangel, Inc. dba Komatsu Architecture  
Fort Worth, TX United States

**Certificate Number:**  
2025-1339963

**Date Filed:**  
07/22/2025

**Date Acknowledged:**

**2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.**

Williamson County

**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.**

4100.1063  
Williamson County Facilities Service Center and North Campus Impound Awnings

| 4 | Name of Interested Party | City, State, Country (place of business) | Nature of interest<br>(check applicable) |              |
|---|--------------------------|------------------------------------------|------------------------------------------|--------------|
|   |                          |                                          | Controlling                              | Intermediary |
|   | Komatsu, Karl            | Fort Worth, TX United States             | X                                        |              |
|   |                          |                                          |                                          |              |
|   |                          |                                          |                                          |              |
|   |                          |                                          |                                          |              |
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**5 Check only if there is NO Interested Party.**

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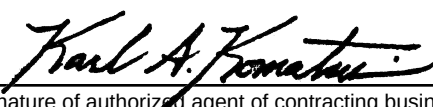
**6 UNSWORN DECLARATION**

My name is Karl Komatsu, and my date of birth is [REDACTED].

My address is [REDACTED] Fort Worth, TX, [REDACTED].  
(city) (state) (zip code) (country)

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

Executed in Tarrant County, State of Texas, on the 22nd day of July, 2025.  
(month) (year)

  
Signature of authorized agent of contracting business entity  
(Declarant)

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|   | Komatsu, Karl            | Fort Worth, TX United States             | X                                        |              |
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|   |                          |                                          |                                          |              |

**5 Check only if there is NO Interested Party.**

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**6 UNSWORN DECLARATION**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(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)