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:					
	Capital Area Council of Governments		2025	5-1363754					
	Austin, TX United States		Date	Filed:					
2		ame of governmental entity or state agency that is a party to the contract for which the form is			09/16/2025				
_	being filed.								
	Williamson County			Date Acknowledged: 09/16/2025					
3		mental entity or state agency to track or identify the contract, and provide a							
	description of the services, goods, or other property to be provided	red under the contract.							
	n/a Agreement allowing CAPCOG permission to use Williamson (County law enforcement training fa	cilities	5.					
_	·	<u> </u>		Nature of interest					
4	Name of Interested Party City, State, Country (place of busin	iess)	(check applicable)						
				Controlling	Intermediary				
5	Check only if there is NO Interested Party.								
6	UNSWORN DECLARATION								
	name is, and my date of birth is								
	My address is	,,			,				
		(city) (s	tate)	(zip code)	(country)				
	I declare under penalty of perjury that the foregoing is true and correct.								
	Executed inCounty	y, State of, on the		day of	, 20				
				(month)	(year)				
	Signature of authorized agent of contracting business entity (Declarant)								

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

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	capital Area Council of Governments austin, TX United States			Date Filed:				
2	lame of governmental entity or state agency that is a party to the contract for which the form is			09/16/2025				
	being filed. Williamson County			Date Acknowledged:				
3	rovide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a escription of the services, goods, or other property to be provided under the contract.							
	202362 Agreement allowing CAPCOG permission to use Williamson County law enforcement training facilities.							
4	Name of Interested Party City, State, Country (place of busine		Nature of interest					
				(check applicable) Controlling Intermediary				
_			-+	Controlling	Intermediary			
5	Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION			9				
	My name is		-					
	My address is _	(city) (sta	'	(zip code)	(country)			
		Ī						
	Executed in	y, State of Texas, on the \	64h da	y of Septents (month)	<u>v</u> , 20 <u>25</u> . (year)			
	Carley & Dr							
	Signature of authorized agent of contracting business entity (Declarant)							