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 Certificate Number:		
1	Name of business entity filing form, and the city, state and coun of business.	ame of business entity filing form, and the city, state and country of the business entity's place				
	Facilities Resource, Inc.	20,	2025-1374291			
	Cedar Park, TX United States		Da	Date Filed:		
2	Name of governmental entity or state agency that is a party to the contract for which the form is			10/08/2025		
_	being filed.				l	
	Williamson County, Texas			te Acknowledged:	l	
	•			/09/2025		
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provided.		entify the	contract, and prov	/ide a	
	Quote #25013A Office Furniture					
_		I		Nature of	finterest	
4	Name of Interested Party	City, State, Country (place of b	ousiness)) (check ap	plicable)	
_				Controlling	Intermediary	
Margaret, Teinert-Ross		Georgetown, TX United Stat	Х			
Darren, Ross		Georgetown, TX United Stat		Х		
Cynthia, Ornelas		Cedar Park, TX United State		Х		
Robert, Ornelas		Cedar Park, TX United States			Х	
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	My name is	ate of birth	ı is	·		
	My address is	,	_,	_,	.,	
		(city)	(state)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct	ct.				
	Executed inCount	State of, or	n the	day of	, 20	
				(month)	(year)	
		Signature of authorized agent o		ting business entity		

CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

						1 of 1			
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	acilities Resource, Inc.			Date Filed:					
2	edar Park, TX United States ame of governmental entity or state agency that is a party to the contract for which the form is			10/08/2025					
_	ing filed.								
	illiamson County, Texas			Date Acknowledged:					
3	Provide the identification number used by the governmental ent description of the services, goods, or other property to be provi Quote Office Furniture			the con	tract, and prov	ide a			
4	Name of Interested Party City, State, Country (place			Nature of interest					
			(place of busine	′ ⊢	(check ap	•			
					Controlling	Intermediary			
Margaret, Teinert-Ross		Georgetown, TX United States			×				
Darren, Ross		Georgetown, TX United States				Х			
Cy	rnthia, Ornelas	Cedar Park, TX U	nited States			Х			
Robert, Ornelas		Cedar Park, TX United States				Х			
5	Check only if there is NO Interested Party.								
6	UNSWORN DECLARATION								
	My name is	, and my date							
	My address is	,			,				
		(city)	(st	ate)	(zip code)	(country)			
I declare under penalty of perjury that the foregoing is true and correct.									
	Executed in Williamson Count	WilliamsonCounty, State ofTexas		n the 8th day of October , 20 25 . (month) (year)					
	Margaret Teinert Ross Digitally signed by Margaret Teinert Ross Dic., cou, email=mteinert@fri-texas.coom, c=US Date: 2025.10.08 10:48:47-05'00'								
	Signature of authorized agent of contracting business entity (Declarant)								