## **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 the business entity's place of business.  Wapco Distribution LLC  Lakeway, TX United States  Name of governmental entity or state agency that is a party to the contract for which the form is		Certificate Number: 2018-423995  Date Filed: 11/08/2018			
2						
	being filed. North Richland Hills			Date Acknowledged:		
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.					
	Sole Source Fire, EMS, Emergency Management tools					
4	Name of Interested Party	City, State, Country (place of busines		Nature of interest (check applicable)		
	,		Controlling Intermediary			
Byron, Dan		Lakeway, TX United States		X	,	
	,					
					, and a second s	
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
My name is $DAN$ $B4RON$ , and my date of birth is $8.16$					- 195C	
	My address is 109 CRESCENT Sluff LAKWAY, TX, 78734 USA. (state) (country)					
	I declare under penalty of perjury that the foregoing is true and correct.					
	Executed in TRAVIS Count	County, State of $1x$ , on the $9$ day of $800$ , $2018$ .				
		$\wedge$ $\wedge$ $\wedge$ $\wedge$	00	(monar)	( <b>yca</b> i)	
		Signature of authorized agent of con	tracting	g business entity		
		(Declarant)	•			