## **CERTIFICATE OF INTERESTED PARTIES**

FORM 1295

1 of 1

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.			Certificate Number:		
	Netsync Network Solutions			2017-282874		
	Houston, TX United States		Date Filed:			
2	Name of governmental entity or state agency that is a party to the contract for which the form is		11/13/2017			
-	being filed.					
	Collin County		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.					
	2018-020					
	Annual Contract for Cisco Phones and Accessories					
4			Nature of interest			
ľ	Name of Interested Party City, Stat	City, State, Country (place of business)		(check applicable)		
H			-	Controlling	Intermediary	
L					-	
r						
r						
H						
H			-			
$\vdash$			-			
L			_			
5 Check only if there is NO Interested Party.						
6	AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.					
	ALLISON RHEA RIGGS Notary Public, State of Texas Comm. Expires 09-20-2020 Notary ID 130828924  Signature of authorized agent of contracting business entity					
	AFFIX NOTARY STAMP / SEAL ABOVE					
	Sworn to and subscribed before me, by the said, this the, this the, and subscribed before me, by the said, this the, this the, and subscribed before me, by the said, this the, and subscribed before me, by the said, this the, and subscribed before me, by the said, this the, and subscribed before me, by the said, this the, this the, and subscribed before me, by the said, this the, and subscribed before me, by the said, this the, and subscribed before me, by the said, this the, and subscribed before me, by the said, this the, and subscribed before me, by the said, this the, and subscribed before me, by the said, this the, the said, the said					
	2017, to certify which, witness my hand and seal of office.					
	allow for ALLISON PHEA	ALLISON PHEA RIGGS Notary				
1	Signature of officer administering oath Printed name of officer adm		Title of o	officer administer	ing oath	