

# 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

Certificate Number:  
2017-284648

Date Filed:  
11/15/2017

Date Acknowledged:

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

AT&T Mobility  
Dallas, TX United States

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

Collin 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.**

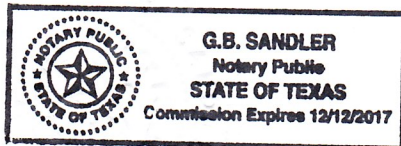
DIR-TSO-3420  
Wireless Voice and Data Services

| 4 | Name of Interested Party | City, State, Country (place of business) | Nature of interest (check applicable) |              |
|---|--------------------------|--|---------------------------------------|--------------|
|   |                          |  | Controlling                           | Intermediary |
|   | Wirtz, Wayne             | Dallas, TX United States                 | X                                     |              |
|   | McGaw, Stephen           | Dallas, TX United States                 | X                                     |              |
|   | Galloway, Julianne       | Dallas, TX United States                 | X                                     |              |
|   | Chow, Anne               | Dallas, TX United States                 | X                                     |              |
|   | Williams, Xavier         | Dallas, TX United States                 | X                                     |              |
|   | Jules, Frank             | Dallas, TX United States                 | X                                     |              |
|   | Arroyo, Thaddeus         | Dallas, TX United States                 | X                                     |              |
|   |                          |  |                                       |              |
|   |                          |  |                                       |              |

**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.



*[Handwritten Signature]*

Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said KENNETH S. ROBBINS, this the 17 day of NOVEMBER 20 17, to certify which, witness my hand and seal of office.

*[Handwritten Signature]*

Signature of officer administering oath

G.B. Sandler

Printed name of officer administering oath

NOTARY PUBLIC

Title of officer administering oath