

**CERTIFICATE OF INTERESTED PARTIES****FORM 1295**

1 of 2

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.		<b>OFFICE USE ONLY CERTIFICATION OF FILING</b>		
<b>1 Name of business entity filing form, and the city, state and country of the business entity's place of business.</b> Tyler Technologies, Inc. Plano, TX United States		Certificate Number: 2016-44701		
<b>2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.</b> Collin County		Date Filed: 04/25/2016		
		Date Acknowledged:		
<b>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.</b> 2016-202 Odyssey Biometric Identification Software				
4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Leinweber, Larry	Plano, TX United States	X	
	Miller, Brian	Plano, TX United States	X	
	Moore, H. Lynn	Plano, TX United States	X	
	Carter, Glenn	Plano, TX United States	X	
	Cline, Brenda	Plano, TX United States	X	
	Womble , Dustin	Lubbock, TX United States	X	
	King, J. Luther	Plano, TX United States	X	
	Brattain, Donald	Plano, TX United States	X	
	Yeaman, John	Plano, TX United States	X	
	Marr, John	Yarmouth , ME United States	X	

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FORM 1295

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2016-44701

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Tyler Technologies, Inc.  
Plano, 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.

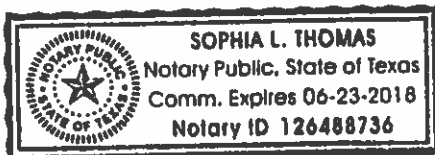
2016-202  
Odyssey Biometric Identification Software

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

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.



AFFIX NOTARY STAMP / SEAL ABOVE

*Wade Riley*  
Signature of authorized agent of contracting business entity

Sworn to and subscribed before me, by the said Wade Riley, this the 3rd day of May, 2016, to certify which, witness my hand and seal of office.

*Sophia L. Thomas*  
Signature of officer administering oath

Sophia L. Thomas  
Printed name of officer administering oath

Notary  
Title of officer administering oath