DocuSign Envelope ID: D29D1A13-46C4-4DC8-AFDF-B3CC941BB4A1 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** Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2019-520435 Tallahassee, FL United States Date Filed: Name of governmental entity or state agency that is a party to the contract for which the form is 07/24/2019 being filed. Collin County, TX Date Acknowledged: 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. Software Maintenance, Records Management System, Contract 2013-019 Nature of interest Name of Interested Party City, State, Country (place of business) (check applicable) Controlling Intermediary Sarafa, Marty Tallahassee, FL United States Χ Zaczepinski, Guy Tallahassee, FL United States Χ Yarymovych, Nick Tallahassee, FL United States Χ Trevino, Tony Tallahassee, FL United States Х Small, Traci Tallahassee, FL United States D'Aurio, Victor Tallahassee, FL United States Χ Barstow, Donald Tallahassee, FL United States 5 Check only if there is NO Interested Party. **6 UNSWORN DECLARATION** Donny Barstow My name is: and my date of birth is My address is (street) (state) (city) (zip code) (country) I declare under penalty of perjury that the foregoing is true and correct. Leon Florida 19 24t July Executed in County, State of on the h day of (month) (year) DocuSigned by

Forms provided by Texas Ethics Commission

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Signature of authorized agent of contracting business entity (Declarant)

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