CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

					1 07 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:			
	SHI Government Solutions				2020-630582		
				Data Filadi			
_	Austin, TX United States			Date Filed: 06/10/2020			
2	e of governmental entity or state agency that is a party to the contract for which the form is g filed.			00/10/2020			
	Collin County				Date Acknowledged:		
3	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. 2020-292						
	McAfee Hardware & Software Maintenance						
4				Nature of interest			
	Name of Interested Party	City, State, Country (place of business)					
				Controlling	Intermediary		
5	Check only if there is NO Interested Party.						
	X						
б	UNSWORN DECLARATION						
	My name isBrian Malnati	, and my date of birth is					
	Mu address is						
	My address is (street)	,,,,,,, _	, (state)	(zip code)	_, (country)		
	I declare under penalty of perjury that the foregoing is true and correc	t.					
	Executed inCounty	/, State of, on t	ne <u>15th</u>	day of	, 20 <u>_20</u>		
				(month)	(year)		
	Brian Malnati Signature of authorized agent of contracting business entity (Declarant)						