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.	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:
	Mythics,Inc.	2020-679097
	Virginia Beach, VA 23462, VA United States	Date Filed:
2	Name of governmental entity or state agency that is a party to the contract for which the form is being filed.	10/15/2020
	Collin County	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.

Contract 2021-064

PeopleSoft, Additional licenses

		Nature of interest	
Name of Interested Party	City, State, Country (place of business)	(check applicable)	
		Controlling	Intermediary
Sirh, Peter	Virginia Beach, VA United States	X	
Welborn, Richard	Virginia Beach, VA United States	X	
Hodgkiss, Kevin	Virginia Beach, VA United States	Х	
Wergley, Albert	Virginia Beach, VA United States	Х	
Seifert, Paul	Virginia Beach, VA United States	Х	
Altamura, Doug	Virginia Beach, VA United States	Х	
Smutz, Shane	Virginia Beach, VA United States	Х	
LaRose, R. Scott	Virginia Beach, VA United States Virginia Beach, VA United States		Х
Hillier, Michael	Virginia Beach, VA United States	х	Х
Mythics Emergent Group, Inc.	Virginia Beach, VA United States	Х	
	<u> </u>		

CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

2 of 2

						2 01 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.			OFFICE USE ONLY CERTIFICATION OF FILING				
1	Name of business entity filing form, and the city, state and cour of business.	ling form, and the city, state and country of the business entity's place			Certificate Number: 2020-679097			
	Mythics,Inc.							
	Virginia Beach, VA 23462, VA United States	rginia Beach, VA 23462, VA United States			Date Filed:			
2	Name of governmental entity or state agency that is a party to the	he contract for which th	ne form is	10/15/2020				
	ng filed. Ilin County			Date Acknowledged:				
3	vide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a cription of the services, goods, or other property to be provided under the contract.							
	Contract 2021-064							
	PeopleSoft, Additional licenses							
4				Nature of interest				
•	Name of Interested Party City, State, Country (place of but		(place of busine	ess)	(check applicable)			
					Controlling	Intermedia	ry	
							_	
5	Check only if there is NO Interested Party.			•				
6	UNSWORN DECLARATION							
	My name is Deonte J. Watters, CCMAP		and my date of I	of birth is				
	My address is (street)	, (city)	,(sta	, _ late)	(zip code)	_,		
	I declare under penalty of perjury that the foregoing is true and corre		·		·			
	Executed in Virginia Beach Coun	ty, State of Virginia	a, on the <u>^</u>	<u>I5th</u> day	of Octobe (month)	er_, 20_ <u>20</u>		
			9. (, L1					
Signature of authoriz⊌d agent of contracting business entity (Declarant)								