## **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			
1	Name of business entity filing form, and the city, state and country of the business entity's place				Certificate Number:				
	of business.					2021-773552			
	Infax, Inc Alpharetta, GA United States				Date Filed:				
2	Name of governmental entity or state agency that is a party to t	s a party to the contract for which the form is			06/30/2021				
	being filed.				Base Astroported and				
	Collin County			l <sup>D</sup>	ate Ackno	wledged:			
3	Provide the identification number used by the governmental en	ntity or state	agency to track	or identify th	e contract	, and prov	ride a		
_	description of the services, goods, or other property to be prov	ided under	the contract.						
	Contract 2021-329 Infax Docket Display System Upgrade								
	illiax Docket Display System Opgrade								
4					1	Nature of interest			
	Name of Interested Party		City, State, Country (place of busin			(check ap	Intermediary		
_					Com	.roming	intermediary		
						$\longrightarrow$			
_						$\longrightarrow$			
					•				
5	Check only if there is NO Interested Party.								
6	UNSWORN DECLARATION								
	My name is Daniel L McWilliams	, and my date o			th is				
	My address is								
	(street)		(city)	(state	e) (zip	code)	(country)		
	I declare under penalty of perjury that the foregoing is true and corre	ect.							
	Executed in Fulton Cour	nty. State of	Georgia	on the	0th <sub>day of</sub>	June	<sub>20</sub> 21		
		, 5.0.0 01	10 1	, 0.1 1110	aay or _	(month)	(year)		
		2	Georgia  OS A	alil	L.				
	Signature of authorized agent of contracting business entity								
	(Declarant)								