## DocuSign Envelope ID: 86BBA18E-B40C-490D-9698-9B212847CAA8 CERTIFICATE OF INTERESTED PARTIES **FORM 1295** 1 of 1 OFFICE USE ONLY 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. **CERTIFICATION OF FILING** Certificate Number: Name of business entity filing form, and the city, state and country of the business entity's place 2024-1119323 of business. GTS Technology Solutions, Inc. Date Filed: Austin, TX United States 02/02/2024 2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Date Acknowledged: Collin County 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. 2024-215 Additional Elastic Cloud Enterprise Software Licenses Nature of interest 4 (check applicable) Name of Interested Party City, State, Country (place of business) Controlling Intermediary Austin, TX United States Grant, Laura 5 Check only if there is NO Interested Party. **6 UNSWORN DECLARATION** My name is Diandra Ford Wing , and my date of birth is My address is (city) (state) (zip code) (country) (street) I declare under penalty of perjury that the foregoing is true and correct. , on the <u>2</u> day of <u>February</u>, 20<u>24</u> \_\_\_\_\_County, State of \_\_\_\_\_\_County Executed in Travis

Forms provided by Texas Ethics Commission

Signature of authorized agent of contracting business entity (Declarant)

(year)