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 | dire of business citally timing form, and are only, called and ordered and ord | | Certificate Number: 2024-1135245 | | | |
| | /aypoint Business Solutions | | | | | |
| 2 | louston, TX United States lame of governmental entity or state agency that is a party to the contract for which the form is | | | Date Filed: 03/15/2024 | | |
| | eing filed. Collin County | | | Date Acknowledged: | | |
| 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. 2024-259 Disaster Recovery SQL Server Storage and Server | | | | | |
| 4 | Situ State Sounday (place of his | | 2007 | Nature of interest (check applicable) | | |
| | Name of Interested Party | City, State, Country (place of business) | | Controlling | Intermediary | |
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| 5 Check only if there is NO Interested Party. | | | | | | |
| 6 | UNSWORN DECLARATION | | | 12 - 422 - 224 | | |
| | My name is Paul Sides | , and my date of birth is | | | | |
| | My address is(street) | (city) (st | , ate) | (zip code) | (country) | |
| | | | , | (, , , , , , , , , , , , , , , , , , , | | |
| | I declare under penalty of perjury that the foregoing is true and correct. Harris County, State of, on the15_day ofMarch, 2024 | | | | | |
| | Executed inCounty, | State of, on the _ | 15 6 | (month) | (year) | |
| | Can On Side | | | | | |
| | Signature of authorized agent of contracting business entity (Declarant) | | | | | |