## **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 count of business.	orm, and the city, state and country of the business entity's place			Certificate Number: 2024-1242270		
	CML Security				2027 22 7227 5		
	San Antonio, TX United States	S			Date Filed:		
2		r state agency that is a party to the contract for which the form is			11/22/2024		
	being filed.				Date Asknowledged:		
	Collin County	)			Date Acknowledged:		
3	ovide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a escription of the services, goods, or other property to be provided under the contract.						
	2023-071	ant/achla					
	IP Video Network Equipment/cable						
		Nature of interest					
4	Name of Interested Party	City, State, Country (place of business)		(check applicable)			
				Controlling	Intermediary		
5 Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION						
	Myname is LAKSHAN PATHIRANA	and my date of	hirth is				
	My name is LAKSHAN +ATHIRANA	and my date of	Dillillia	_			
	My address is(street)	(city) (st	ate)	(zip code)	(country)		
I declare under penalty of perjury that the foregoing is true and correct.							
	Executed in BEXAR County	y, State of, on the _	22	day of NOVEMB	IR 20 24		
(month) (year)							
	signature authorized agent of contracting business entity						
		(Declarant)	. acting	y washess entity			