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		
	Name of business entity filing form, and the city, state and country of the business entity's place of business. Spindlemedia			Certificate Number: 2025-1357050		
	Flower Mound, TX United States		Date Filed:			
	Name of governmental entity or state agency that is a party to the contract for which the form is being filed.		08/29/2025			
	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.					
	2014-271 Software Maintenance Tax Software services					
4	Personal Production of the Control o		Nature of interest			
	Name of Interested Party	City, State, Country (place of busines		(check ap	plicable) Intermediary	
Sto	even, Johnson	Flower Mound, TX United States		X	intermediary	
		, , , , , , , , , , , , , , , , , , , ,				
5 Check only if there is NO Interested Party.						
6 UNSWORN DECLARATION						
	My name is SZEVEN To IINSON and my date of birth is					
	My address is	(city) (si	tate)	(zip code)	(country)	
I declare under penalty of perjury that the foregoing is true and correct.						
	Executed in					
	/ (month) (year)					
	85,00					
	Signature of authorized agent of contracting business entity (Declarant)					