CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 1

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	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 of business.			Certificate Number:		
	Stored Value Cards, Inc. dba Numi Financial			2017-231006		
	Carlsbad, CA United States			Date Filed:		
2	Name of governmental entity or state agency that is a party to the contract for which the form is being filed.			06/29/2017		
	Fort Bend 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.					
	24622					
	Amendment to Agreement					
4			Nature of interest			
	Name of Interested Party City, S	City, State, Country (place of busi		(check ap		
				Controlling	Intermediary	
						
5	Check only if there is NO Interested Party.					
6	A FEIDAVIT					
	I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.					
	Comm. #2099862 Notary Public - California San Diego County Comm. expires Feb. 12, 2019 AFFIX NOTARY STAMP / SEAL ABOVE					
$oldsymbol{\cdot}$						
	Sworn to and subscribed before me, by the said					
	Signature of officer administering oath Printed name of officer ad	O RESENDE Z ministering oath Ti	No	TARY PE	UBLIC	
	Finded name of officer ad	minatering dati []	ue of OIT	cer auministerir	ıy oaın	