

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**

Certificate Number:
2017-258571

Date Filed:
09/09/2017

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Integration Partners Corporation
Lexington, MA United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

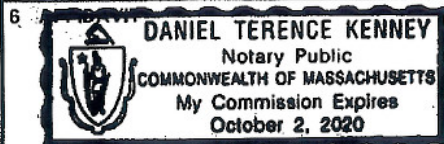
Fort Bend County

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.

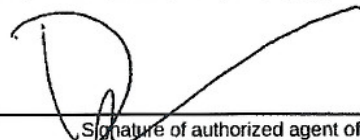
DIR-TSO-2654
Network Equipment

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Nahabedian, David	Lexington, MA United States	X	
	Graf, Bart	Lexington, MA United States	X	

5 Check only if there is NO Interested Party. ☐



I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said David Rafery, this the 11th day of September, 2017, to certify which, witness my hand and seal of office.



Signature of officer administering oath

Daniel Kenney

Printed name of officer administering oath

Notary Public

Title of officer administering oath