

# CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 2

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:  
2017-286139

Date Filed:  
11/20/2017

Date Acknowledged:

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

Tyler Technologies, Inc.  
Plano, TX 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.**

25053

To integrate a document search/retrieval portal, re: Search, TX with the Fort Bend Case Management System

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Moore, Jr., H. Lynn	Plano, TX United States	X	
	Carter, Glenn A.	Plano, TX United States	X	
	Cline, Brenda A.	Plano, TX United States	X	
	Pope, Daniel M.	Plano, TX United States	X	
	Leinweber, Larry D.	Plano, TX United States	X	
	Miller, Brian K.	Plano, TX United States	X	
	Womble, Dustin R.	Lubbock, TX United States	X	
	King, Jr., J. Luther	Plano, TX United States	X	
	Brattain, Donald R.	Plano, TX United States	X	
	Marr, Jr., John S.	Yarmouth, ME United States	X	

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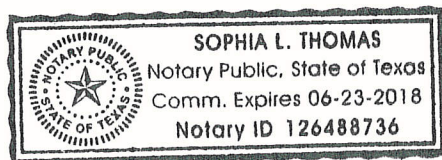
4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

☐

**6 AFFIDAVIT**

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



AFFIX NOTARY STAMP / SEAL ABOVE

*[Signature]*

Signature of authorized agent of contracting business entity

Sworn to and subscribed before me, by the said Sherry Clark, this the 20<sup>TH</sup> day of November  
20 17, to certify which, witness my hand and seal of office.

*[Signature]*

Signature of officer administering oath

Sophia L. Thomas

Printed name of officer administering oath

Notary

Title of officer administering oath