CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 1

| | | | | | 1011 | |
|--|--|---|-------------------|---|----------------|--|
| | 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: | | |
| | t business. IWN Corporation | | | 2024-1234917 | | |
| | Houston, TX United States | | | Date Filed: | | |
| _ | Name of governmental entity or state agency that is a party to the contract for which the form is | | | 11/05/2024 | | |
| 2 | vame of governmental entity of state agency that is a party to the contract for which the form is being filed. | | | , 00, _00 | | |
| | 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. | | | | | |
| | DIR-CPO-5348 | | | | | |
| | Purchase of Cisco branded products and related services. | | | | | |
| 4 | Name of International Professional Professio | | | Nature of interest | | |
| | Name of Interested Party | ity, State, Country (place of business) | | (check applicable) | | |
| | | | | Controlling | Intermediary | |
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| 5 | 5 Check only if there is NO Interested Party. | | | | | |
| 6 | UNSWORN DECLARATION | | | | | |
| | y name isKathy Thomas, and my date of | | | birth is | | |
| | My address is 11070 White Rock Road, Ste. 250 | . Rancho Cordova | CA . | 95670 | . USA . | |
| | (street) | (city) | (state) | (zip code) | (country) | |
| I declare under penalty of perjury that the foregoing is true and correct. | | | | | | |
| | Executed in Sacramento County | /, State of <u>CA</u> , on t | _{he} 5th | day of <u>Nov.</u> | , 20 <u>24</u> | |
| | | | | (month) | (year) | |
| | Kathy Thomas | | | | | |
| | Signature of authorized agent of contracting business entity (Declarant) | | | | | |