

# 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

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

Paradigm Traffic Systems, Inc.  
Arlington, TX United States

Certificate Number:  
2017-190641

Date Filed:  
04/11/2017

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

Date Acknowledged:

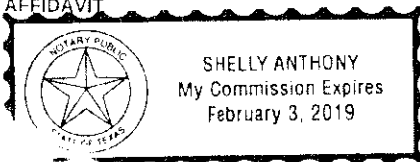
3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

23619  
Paradigm Traffic Systems

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Priester, Jerry	Arlington, TX United States	X	

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.

*Dan Jaynes*  
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

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

*Shelly Anthony*  
Signature of officer administering oath

Shelly Anthony  
Printed name of officer administering oath

Office/Purchasing Manager  
Title of officer administering oath

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Arlington, TX United States

**Certificate Number:**  
2017-190641

**Date Filed:**  
04/11/2017

**Date Acknowledged:**  
04/25/2017

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Fort Bend County

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Paradigm Traffic Systems

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Priester, Jerry	Arlington, TX United States	X	

**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.

\_\_\_\_\_  
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath

\_\_\_\_\_  
Printed name of officer administering oath

\_\_\_\_\_  
Title of officer administering oath