## **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.	CE	OFFICE USE ONLY CERTIFICATION OF FILING					
Name of business entity filing form, and the city, state and country of the business entity's place		Certificate Number:					
	2017	2017-290467					
Austin, TX United States	Date	Date Filed:					
Name of governmental entity or state agency that is a party to the contract for which the form is	12/0	12/05/2017					
being filed.		Cata Aaka sudadaad					
Fort Bend County	Date	Date Acknowledged:					
Provide the identification number used by the governmental entity or state agency to track or iden description of the services, goods, or other property to be provided under the contract.	the Identification number used by the governmental entity or state agency to track or Identify the contract, and provide a tion of the services, goods, or other property to be provided under the contract.						
Buy Board 498-15							
498-15 Computer software, hardware and related products							
		Nature of	interest				
Name of Interested Party City, State, Country (place of bu	City, State, Country (place of business)						
		Controlling	Intermediary				
Charle outs if there is NO later and Dark							
×							
AFFIDAVIT I swear, or affirm, under penalty of perjury, that	he above	disclosure is true	and correct.				
VICTORIA PUBYLSKI Notary Public, State of Texas Comm. Expires 10-11-2020 Notary ID 130868108  Signature of authorized agent of community in the community in th	Signature of authorized agent of contracting business entity						
AFFIX NOTARY STAMP / SEAL ABOVE	<u> تاع</u> ــــ						
Sworn to and subscribed before me, by the said	<u>5</u>	day of	cember				
Signature of officer administering oath  Printed name of officer administering oath	Title of	Magy officer administeri	ng oath				
	Name of business entity filing form, and the city, state and country of the business entity's place of business.  SHI Government Solutions Austin, TX United States  Name of governmental entity or state agency that is a party to the contract for which the form is being filed.  Fort Bend County  Provide the Identification number used by the governmental entity or state agency to track or ident description of the services, goods, or other property to be provided under the contract.  Buy Board 498-15  Computer software, hardware and related products  Name of Interested Party  City, State, Country (place of business)  AFFIDAVIT  I swear, or affirm, under penalty of perjury, that the country public, state of Texas Comm. Expires 10-11-2020  Notary Public, State of Texas Comm. Expires 10-11-2020  Notary 10-130869108  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said  AFFIX NOTARY STAMP / SEAL ABOVE	Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.  Name of business entity filing form, and the city, state and country of the business entity's place of business.  SHI Government Solutions Austin, TX United States  Name of governmental antity or state agency that is a party to the contract for which the form is being filed.  Fort Bend County  Provide the identification number used by the governmental entity or state agency to track or identify the contract of the services, goods, or other property to be provided under the contract.  Buy Board 498-15  Support of the services, goods, or other property to be provided under the contract.  Name of interested Party  City, State, Country (place of business)  Check only if there is NO interested Party.  I swear, or affirm, under penalty of perjury, that the above Notary Public, State of Texas Comm. Expires 10-11-2020  Notary Public, State of Texas Signature of authorized agent of contracting AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to certify which, witness my hand and seal of office.	CERTIFICATION  Name of business entity filing form, and the city, state and country of the business entity's place of business.  SH Government Solutions Austin, TV Indied States  Name of governmental entity or state agency that is a party to the contract for which the form is being filed.  Fort Bend County  Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provided the identification number used by the governmental entity or state agency to track or identify the contract, and provided the identification number used by the governmental entity or state agency to track or identify the contract, and provided the identification number used by the governmental entity or state agency to track or identify the contract, and provided under the contract.  Buy Board 498-15  Computer software, hardware and related products  Name of Interested Party  City, State, Country (place of business)  Nature of (check agency)  Check only if there is NO interested Party.  I swear, or affirm, under penalty of perjury, that the above disclosure is true.  VICTORIA PUBYLSKI  Notary Public, State or Texes  Comm. Expires 10-11-2020  Notary 10 130868108  AFFID ANTARY STAMP / SEAL ABOVE  Swom to and subscribed before me, by the said  20 17 to certify which, witness my hand and seal of office.   W. R. R. W. R.				

## **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 co of business.	Certificate Number: 2017-290467						
	SHI Government Solutions							
	Austin, TX United States	United States			Date Filed:			
2	Name of governmental entity or state agency that is a party t	12/05/2017						
	being filed.		Date Acknowledged:					
	Fort Bend County		12/12/2017					
3	Provide the identification number used by the governmental description of the services, goods, or other property to be pr	by the governmental entity or state agency to track or identify the contract, and provide a ther property to be provided under the contract.						
	Buy Board 498-15							
	498-15 Computer software, hardware and related product	ts						
		1	Nature of interest					
4	Name of Interested Party	City, State, Country (place of busin	ness)	i				
	name of molested i dity	, , , , , , , , , , , , , , , , , , ,	, <u> </u>		Intermediary			
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			<u></u>					
5	Check only if there is NO Interested Party.	<u> </u>	110					
6	AFFIDAVIT I swear	r, or affirm, under penalty of perjury, that the	e above	e disclosure is tru	e and correct.			
		Signature of authorized agent of contracting business entity						
	AFFIX NOTARY STAMP / SEAL ABOVE							
	Sworn to and subscribed before me, by the said			day of	,			
	20, to certify which, witness my hand and seal of office.							
		a of officer administrator and	Title of	officer administra	ing oath			
	Signature of officer administering oath Printed name	e of officer administering oath	THE U	officer administer	nig valii			