



Account Manager: Sean Levesque
Phone Number: (512) 900-9141
Email Address: Sean@apollo-is.com
Mailing Address: Apollo Information Systems Corp.
1 Chisholm Trail Rd., Suite G100
Round Rock, TX 78681

BILL TO: ABC Company
123 Main St
Fremont, CA 94539
ATTN:
PHONE: 510-555-1212
EMAIL: ccopperpot@abc.com
SHIP TO: ABC Company
123 Main St
Fremont, CA 94539
ATTN:
PHONE: 510-555-1212
EMAIL: ccopperpot@abc.com
QUOTE NUMBER: CUST-VEN-DATE-REV
QUOTE DATE: Account Mgr reference
QUOTE VALID UNTIL: Match Dist/Vendor Quote
SHIP VIA: Match Customer PO
PAYMENT TERMS: Net 30
CONTRACT: Texas DIR-CPO-4868

Table with columns: ITEM NO., QTY, MFGR PART NUMBER, MFGR PART # DESCRIPTION, START DATE, END DATE, LIST PRICE / UNIT, DISCOUNT, SALES PRICE / UNIT, EXTENDED SALES PRICE. Includes subtotals for Year 1, Year 2, Year 3, Year 4, and Year 5.

Quote Acknowledgement by Customer
Name: KP George
Title: County Judge
Date: 12.19.2023

CUSTOMER'S SIGNATURE: [Handwritten signature]

Shipping \$
GRAND TOTAL \$ 2,505,006.00

Apollo charges a 3% fee if using a credit card for purchasing.

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:
2023-1099569

Date Filed:
11/30/2023

Date Acknowledged:
12/19/2023

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
Apollo Information Systems Corp
Round Rock, 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 TX

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.
Apollo Information Systems Cor
RE: 24-IT-100262 / R#231202 â Apollo Information Systems Corp. Dark trace

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Guglielmo, Mike	Newport Beach, CA United States	X	
	Tyson , Dave	Houston, TX United States	X	
	MacBeth, Ed	Reno, NV United States	X	
	Bennett , Andy	San Marcos, TX United States	X	
	Watters, John	Dallas, TX United States	X	

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)