

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.
Ricoch USA, Inc.
McAllen, TX United States

Certificate Number:
2016-14592

Date Filed:
02/17/2016

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
State of Texas DIR

Date Acknowledged:

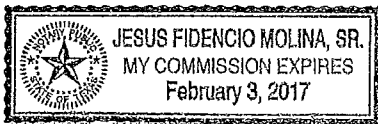
3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the goods or services to be provided under the contract.
DIR-TSO-3041
Req #289745

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
Ricoch USA, Inc.	McAllen, TX United States	X	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]
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Agent, this the 19th day of February, 2016, to certify which, witness my hand and seal of office.

[Signature] Signature of officer administering oath
Jesus Fidencio Molina Sr. Printed name of officer administering oath
Notary Public Title of officer administering oath

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Ricoh USA, Inc.
 McAllen, TX United States

Certificate Number:
 2016-14592

Date Filed:
 02/17/2016

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

State of Texas DIR

Date Acknowledged:
 02/22/2016

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 goods or services to be provided under the contract.

DIR-TSO-3041
 Req #289745

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Ricoh USA, Inc.	McAllen, TX United States	X	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