

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.
 Brightly Software, Inc.
 Cary, NC United States

Certificate Number:
 2024-1162128

Date Filed:
 05/16/2024

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
 Hidalgo 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.
 24-0152
 Asset Management Software as a Service

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
Kemmerer, Kevin	Cary, NC United States	X	
Beierwaltes, Michael	Cary, NC United States	X	
Caputo, Kelly	Cary, NC United States	X	
Ellis, Lonnie	Cary, NC United States	X	
Siemens Corp	Washington D.C., DC United States	X	

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Kelly Caputo, and my date of birth is [REDACTED].

My address is 11000 Regency Parkway, Ste 300, Cary, NC, 27518, USA.
(street) (city) (state) (zip code) (country)

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

Executed in Wake County, State of NC, on the 16 day of May, 2024.
(month) (year)

DocuSigned by:

 Signature of authorized agent of contracting business entity
 (Declarant)

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24-0152
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			Controlling	Intermediary
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	Beierwaltes, Michael	Cary, NC United States	X	
	Caputo, Kelly	Cary, NC United States	X	
	Ellis, Lonnie	Cary, NC United States	X	
	Siemens Corp	Washington D.C., DC 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)