

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 2

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:
 2025-1277331

Date Filed:
 03/04/2025

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
 Egnyte, Inc.
 MOUNTAIN VIEW, CA United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
 County of Hidalgo, 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.
 25-0086
 Egnyte Platform subscription

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Jain, Vineet	MOUNTAIN VIEW, CA United States	X	
	King, Alexa	MOUNTAIN VIEW, CA United States	X	
	Barrett, David	MOUNTAIN VIEW, CA United States	X	
	Staude, Holger	MOUNTAIN VIEW, CA United States	X	
	Kalowski, Jeff	MOUNTAIN VIEW, CA United States	X	
	Faris, Karim	MOUNTAIN VIEW, CA United States	X	
	Murphy, Matt	MOUNTAIN VIEW, CA United States	X	
	Maples, Mike	MOUNTAIN VIEW, CA United States	X	
	Schodorf, Tom	MOUNTAIN VIEW, CA United States	X	

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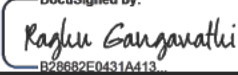
4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Raghu Gangavathi, and my date of birth is [REDACTED].
 My address is 1350 W. Middlefield Road, Mountain View, CA, 94043, U.S.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.
 Executed in Santa Clara County, State of California, on the 5th day of March, 2025.
(month) (year)

DocuSigned by:

 B26682E0431A413
 Signature of authorized agent of contracting business entity (Declarant)

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

County of Hidalgo, TX

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03/07/2025

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	Staude, Holger	MOUNTAIN VIEW, CA United States	X	
	Kalowski, Jeff	MOUNTAIN VIEW, CA United States	X	
	Faris, Karim	MOUNTAIN VIEW, CA United States	X	
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	Maples, Mike	MOUNTAIN VIEW, CA United States	X	
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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)