

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:
2025-1344271

Date Filed:
07/31/2025

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
SherpaDesk
Atlanta, GA United States

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

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.
25-0445
HelpDesk and Asset Management

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Hidalgo Sheriff's Department	Hidalgo, TX United States	X	

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Mike Clements, and my date of birth is [REDACTED].

My address is 12426 Caswell Ave, LA, CA, 90066, US.
(city) (state) (zip code) (country)

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

Executed in Los Angeles County, State of CA, on the 1st day of August, 2025.
(month) (year)



Signature of authorized agent of contracting business entity
(Declarant)

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SherpaDesk
Atlanta, GA United States

Certificate Number:
2025-1344271

Date Filed:
07/31/2025

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

Date Acknowledged:
08/05/2025

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.
25-0445
HelpDesk and Asset Management

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Hidalgo Sheriff's Department	Hidalgo, 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 _____, _____, _____, _____, _____.
(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)