CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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|---|--|--|---------------------------------------|
| | Complete Nos. 1 - 4 and 6 if there are interested par Complete Nos. 1, 2, 3, 5, and 6 if there are no interest | 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. | | Certificate Number: 2016-7156 |
| | SHI Government Solutions | | |
| | Austin, TX United States | | Date Filed: 01/29/2016 |
| 2 | Name of governmental entity or state agency that is a party to the contract for which the form is being filed. | | 01/29/2016 |
| | Williamson 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 goods or services to be provided under the contract. | | |
| | DIR-SDD-2188 | | |
| | General Security Consulting Contract | | |
| 4 | | T | Nature of interest (check applicable) |
| 4 | Name of Interested Party | City, State, Country (place of business) | Controlling Intermediary |
| | | | Controlling Intermediary |
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| 5 | Check only if there is NO Interested Party. | X | |
| 6 | AFFIDAVIT | I swear, or affirm, under penalty of perjury, that the | above disclosure is true and correct. |
| | MARC A. POOLE | | |
| | ID # 2408905 | | |
| | NOTARY PUBLIC OF NEW JERSEY | | |
| | My Commission Expires 5/25/2016 | Signature of authorized agent of contracting business entity | |
| | AFFIX NOTARY STAMP / SEAL ABOVE | | |
| | worn to and subscribed before me, by the said | | |
| | 20, to certify which, witness my hand and seal of office. | | |
| | | 1 | |
| | MarcAPort | Marc A. Poole RF | P Specialist |
| | Signature of officer administering oath | | Title of officer administering oath |