

# 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.**  
GTY Software Inc., dba Bonfire Interactive Ltd.  
Oakville Ontario Canada

**Certificate Number:**  
2023-1092503

**Date Filed:**  
11/08/2023

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

**Date Acknowledged:**  
11/08/2023

**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.**  
202112  
eProcurement/electronic bidding and procurement software and implementation services.

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	GTY Technology Holdings Inc.	Boston, MA United States	X	
	Kerr, Justin	Oakville Ontario Canada	X	
	Crocker, Rob	Oakville Ontario Canada	X	
	Smolen,	Oakville Ontario Canada	X	
	Amburgey, Tom	Oakville Ontario Canada	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)

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	Amburgey, Tom	Oakville Ontario Canada	X	

**5 Check only if there is NO Interested Party.**

**6 UNSWORN DECLARATION**

My name is SARAH PLAYFORD, and my date of birth is [REDACTED].

My address is 20 ELLIS CRES N., WATERLOO, ON, N2J 3N3, CANADA.  
(street) (city) (state) (zip code) (country)

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

Executed in THE REGION OF WATERLOO County, State of ONTARIO, on the 8TH day of NOV, 20 23.  
(month) (year)

  
\_\_\_\_\_  
Signature of authorized agent of contracting business entity (Declarant)