## **CERTIFICATE OF INTERESTED PARTIES**

FORM **1295** 

					1 of 1			
	omplete Nos. 1 - 4 and 6 if there are interested parties.			OFFICE USE ONLY				
	Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.			CERTIFICATION OF FILING				
1	me of business entity filing form, and the city, state and country of the business entity's place business.			Certificate Number: 2024-1108089				
	Freeit Data Solutions, Inc.							
	Austin, TX United States			Date Filed:				
2	Name of governmental entity or state agency that is a party to the contract for which the form is being filed.  Williamson County			01/03/2024  Date Acknowledged: 01/03/2024				
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.							
	2024103							
	Rubrik cloud vault subscription							
1				Nature of interest				
4	Name of Interested Party City, State, Country (place of		y (place of busine	ss) (check a	pplicable)			
				Controlling	Intermediary			
Orchid, Wayne		Austin, TX United	d States	X				
					<u> </u>			
		<u> </u>						
_		<u> </u>			<u> </u>			
		<u> </u>						
5	Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION							
	My name is	oirth is						
				_				
	My address is(street)	(city)		ate) (zip code)	(country)			
	I declare under penalty of perjury that the foregoing is true and correc	ct.						
		ty, State of	, on the	dav of	. 20 .			
		),	,	(month)				
		Signature of author	rized agent of contr	racting business entity				

## **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.			Certificate Number: 2024-1108089		
	Freeit Data Solutions, Inc. Austin, TX United States		Date	Filed:		
2	Name of governmental entity or state agency that is a party to	04/0	01/03/2024  Date Acknowledged:			
	being filed. Williamson County	Date				
3	Provide the identification number used by the governmental edescription of the services, goods, or other property to be proposed 2024103  Rubrik cloud vault subscription		dentify the o	ontract, and provi	ide a	
				Nature of	interest	
4	Name of Interested Party	City, State, Country (place of busines			applicable)	
				Controlling	Intermediary	
Orchid, Wayne		Austin, TX United States		X		
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	My name is Dulari von Christierson	, and my o	date of birth i	s		
	My address is 900 East 6th Street, Suite 102	Austin	_, <u>TX</u> ,	78702	USA	
	(street)	(city)	(state)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and cor	rrect.				
	Executed in TravisCou	unty, State of Texas	on the 3rd	-		
				(month)	(year)	
		(1)		a husings - sett		
		Signature of authorized agent (Declaran		g business entity		