CERTIFICATE OF INTERESTED PARTIES FORM 1295 1 of 1 OFFICE USE ONLY 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. **CERTIFICATION OF FILING** 1. Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number; 2024-1198316 Mobile Communications America Austin, TX United States Date Filed: 08/08/2024 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Williamson County Date Acknowledged: 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. Reassignment of Contract from Knight Security Systems to Mobile Communications America, Inc (MCA) Nature of interest Name of interested Party City, State, Country (place of business) (check applicable) Controlling Intermediary 5 Check only if there is NO Interested Party. X **6 UNSWORN DECLARATION** Executed in Travis Texas on the 8 day of Angust County, State of ____ 20,24 (month) (vear) MARIELLE MAE DELF €Notary Public, State of Texas

Comm. Expires 08-19-2025 Notary ID 193280153

www.ethics.state.tx.us

Signature of authorized agent of contracting business entity

(Declarant)

Version_V4.1.0.48da51f7

CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 1

	Complete 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	Name of business entity filing form, and the city, state and country of the business entity's place of business. Mobile Communications America			Certificate Number: 2024-1198316		
	Austin, TX United States			Date Filed:		
2	e of governmental entity or state agency that is a party to the contract for which the form is gilled.		s 08/	08/08/2024		
	Williamson County		Dat	Date Acknowledged:		
			08/	/09/2024		
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.					
	2024258					
	Reassignment of Contract from Knight Security Systems to Mobile Communications America, Inc (MCA)					
4					Nature of interest	
	Name of Interested Party City, State, Country (place of busing		business)	_ 		
				Controlling	Intermediary	
				+		
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	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 inCount	y, State of,	on the	day of	, 20	
				(month)		
		Signature of authorized agent	ed agent of contracting business entity			
	(Declarant)					