## **CERTIFICATE OF INTERESTED PARTIES**

FORM **1295** 

1 of 1

					1011	
	mplete Nos. 1 - 4 and 6 if there are interested parties. mplete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.		CE	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			Certificate Number:		
	pusiness. 20		202	2024-1218365		
	Catalis Public Works & Citizen Engagement, LLC Alpharetta, GA United States		Date	e Filed:		
2	·				24/2024	
_	being filed.					
	Williamson County			Date Acknowledged: 09/27/2024		
_	Dravide the identification number used by the governmental ent	ity or state agoney to trook or ide				
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provided		nury ure	contract, and prov	iue a	
	202520					
	Software as a service (SAAS)					
4				Nature of interest		
4	Name of Interested Party	City, State, Country (place of b	usiness)	<u> </u>		
				Controlling	Intermediary	
R	oza, Scott	Alpharetta, GA United States	5	Х		
Downs, Brian		Alpharetta, GA United States		X		
Johnson, Eric		Alpharetta, GA United States		X		
Н	ess, Jeff	Alpharetta, GA United States	3	Х		
Yeager, Teresa		Alpharetta, GA United States		Х		
Catalis Holdco, Inc		Alpharetta, GA United States	3	Х		
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	My name is	is	·			
	My address is					
	(street)	(city)	(state)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct	ct.				
	Executed inCount	y, State of, on	the	_day of	, 20	
				(month)	(year)	
	Signature of authorized agent of contracting business entity (Declarant)					

## **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		
of business. Catalis Public Works & Citizen Engagement, LLC			Certificate Number: 2024-1218365 Date Filed: 09/24/2024 Date Acknowledged:		
eing filed.					
Provide the identification number used by the good description of the services, goods, or other proper 202520 Software as a service (SAAS)		ntify the c			
4 Name of Interested Party	City, State, Country (place of b	usiness)	Nature of interest (check applicable)  Controlling Intermedian		
Roza, Scott	Alpharetta, GA United States	5	х		
Downs, Brian	Alpharetta, GA United States	Alpharetta, GA United States			
Johnson, Eric	Alpharetta, GA United States	Alpharetta, GA United States			
Hess, Jeff	Alpharetta, GA United States	5	х		
Yeager, Teresa	Alpharetta, GA United States	aretta, GA United States			
Catalis Holdco, Inc	Alpharetta, GA United States	5	Х		
5 Check only if there is NO Interested Party.					
6 UNSWORN DECLARATION				_	
My name is	ame is, and my date of birth is				
My address is	(city)		(zip code)	_, <u>USA</u> . (country)	
I declare under penalty of perjury that the foregoing is	s true and correct.				
Executed in Duval	County, State of Florida, on	the 24	day of Septemb (month)	oer, 20 <u>24</u> . (year)	
	Signature of authorized agent of	f contracting	g business entity		
	(Declarant)				