## **CERTIFICATE OF INTERESTED PARTIES**

FORM **1295** 

1 of 1

						1011					
	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 count of business.	iness entity filing form, and the city, state and country of the business entity's place			Certificate Number: 2024-1251608						
	una Solutions				2027-1231000						
	Chicago, IL United States				Date Filed:						
2	Name of governmental entity or state agency that is a party to th	overnmental entity or state agency that is a party to the contract for which the form is				12/20/2024					
	being filed.	ed.			Data Aalmandadaad						
	Williamson County				Date Acknowledged: 12/20/2024						
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.										
	202589										
	Budget Software Upgrade										
4					Nature of interest						
+	Name of Interested Party	City, State, Country (place of busine		ess) (check applicable)							
			(	Controlling	Intermediary						
5	Check only if there is NO Interested Party.										
6	UNSWORN DECLARATION										
	My name is	birth is									
	My address is	,	,,	,		,					
	(street)	(city)	(sta	ite)	(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)	(year)					
Signature of authorized agent of contracting business entity (Declarant)											

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	Euna Solutions	202	2024 1201000					
	Chicago, IL United States			Date Filed:				
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	Williamson County				Date Acknowledged:			
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	202589							
	Budget Software Upgrade							
4				Nature o	of interest			
-	Name of Interested Party  City, State, Country (place of busing		ısiness)	(check a	(check applicable)			
				Controlling	Intermediary			
5	Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION							
	My name isMackenzie Unyi	, and my date	e of birth is	s				
	Maradana is							
	My address is (street)	(city)	(state)	(zip code)	(country)			
I declare under penalty of perjury that the foregoing is true and correct.								
	- United States	Texas			20 July December 22			
	Executed in United States County, State of, on the		the <u>20</u>	(month) (year)				
		Mur						
Signature of authorized agent of contracting business entity (Declarant)								