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 coun	try of the business entity's place		ificate Number:		
	of business. Euna Solutions, Inc.		202	5-1283166		
	Chicago, IL United States		Date	Filed:		
Ļ		a continent for rubicle the forms in		.8/2025		
2	Name of governmental entity or state agency that is a party to the being filed.	e contract for which the form is	100/1	.0/2020		
	Williamson County		Date Acknowledged: 03/20/2025			
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provided		y the c	ontract, and prov	vide a	
	202589					
	Computer Software					
4				Nature of interest		
	Name of Interested Party	City, State, Country (place of busi	Country (place of business)		(check applicable)	
				Controlling	Intermediary	
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)		,		,	
	(street)	(city) (state)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct	et.				
	Executed inCount	y State of on the		day of	20	
	Count	y, otate of, off the	·	(month)		
		Signature of authorized agent of co (Declarant)	ntractin	ng business entity		

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.	try of the business entity's place	Certificate Number: 2025-1283166						
	Euna Solutions, Inc.								
	Chicago, IL United States			Filed:					
2	Name of governmental entity or state agency that is a party to the contract for which the form is being filed.			03/18/2025					
	Williamson County				Date Acknowledged:				
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provided 202589	ity or state agency to track or identify ded under the contract.	the c	ontract, and pro	vide a				
	Computer Software								
4			Nature of interest						
4	Name of Interested Party City, State, Country (place of busin								
				Controlling	Intermediary				
				80301170 - P					
				Contract in a social con-					
			1	20 200-2000 1.00					
				x					
					±0.				
	g)								
5	Check only if there is NO Interested Party.	50 X0801 - 557 - 5500 -							
6	UNSWORN DECLARATION			Î					
				1	. 010				
	I declare under penalty of perjury that the foregoing is true and correct	declare under penalty of perjury that the foregoing is true and correct.							
	Executed in <u>Cakville</u> Count	y, State of Ontaio, on the	18	day of Mareh					
		Milal Fred	ዲ	(month)	(year)				
		Signature of authorized agent of con (Declarant)	tractin	g business entity					