CERTIFICATE OF INTERESTED PAR	TIES		FOR	ам 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		
Name of business entity filing form, and the city, state and country of the business entity's place of business. Docting Coffeense.		Certificate Number: 2016-105524		
Destiny Software Woodinville, WA 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		08/29/2016 Date Acknowledged:		
3 Provide the identification number used by the governmental ent description of the services, goods, or other property to be provi Sole Source Destiny Software Web-based Agenda Management Software	ity or state agency to track or Identify ded under the contract.	the co	ntract, and pro	vide a
4 Name of Interested Party	City, State, Country (place of busine		Nature of interest (check applicable)	
			Controlling	Intermediary
Dickinson, Donald	Woodinville, WA United States		X	THE STREET S
Dickinson, Desta	Woodinville, WA United States		Х	
		\perp		
	The contract of the contract o	\perp		
		_		10-20-
6 Check only if that is it in the pested Party.				
SAN GIL VARGOOD				
AFFIDANTO (SOLON EXPORT) I swear, or a	affirm, under penalty of perjury, that the a	bove di	sclosure is true	and correct.
PUBLIC ASHING	Dona DICKING N Signature of authorized agent of contra	acting b	usiness entity	
Sworn to and subscribed before me, by the said 00500 00000	VEDIA, this the _20	Hh	day of Ac	aust .
20 16 to certify which, witness my hand and seal of office.			0	,
0 .0-1/1				

Signature of officer administering oath

Printed name of officer administering oath