	CERTIFICATE OF INTERESTED PAR	TIES		FOR	тм <b>1295</b>	
F					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.  Name of business entity filing form, and the city, state and country of the business entity's place of business.  GTS Technology Solutions, inc.  Austin, TX United States			OFFICE USE ONLY CERTIFICATION OF FILING		
				Certificate Number: 2023-1096873		
				Date Filed:		
2	2 Name of governmental entity or state agency that is a party to the being filed.	he contract for which the fo	contract for which the form is 11/2		21/2023	
	Williamson County			Date Acknowledged:		
3	Provide the identification number used by the governmental ent description of the services, goods, or other property to be provided 202484 Cradlepoint Inc.	ontract, and pro	vide a			
ŀ.		1		Nature o	f interest	
4	Name of Interested Party City, State, Country (place of b		e of business)	(check applicable)		
L					Intermediary	
G	Grant, Laura	Austin, TX United State	Austin, TX United States			
			<u></u>			
	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION				_	
	My name is Diandra Ford Wing	name is, and my date of b			,	
	My address is 9211Waterford Centre Blvd., Suite 2	75, Austin	, <u>TX</u> ,	78758 (zip code)	USA	
	I declare under penalty of perjury that the foregoing is true and correct.	,	(siate)	(zip code)	(country)	
		, State of Texas	on the 21	<sub>day of</sub> Novemb	oer₀ 23	
		(month) (year)				
Kundret						
	Signature of authorized agent of contracting business entity (Declarant)					

## **CERTIFICATE OF INTERESTED PARTIES**

FORM **1295** 

					1 of 1		
	omplete Nos. 1 - 4 and 6 if there are interested parties. omplete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.			OFFICE USE ONLY CERTIFICATION OF FILING			
1	ume of business entity filing form, and the city, state and country of the business entity's place business.  TS Technology Solutions, Inc.			Certificate Number: 2023-1096873			
	Austin, TX United States			te Filed:			
2	Name of governmental entity or state agency that is a party to the contract for which the form is being filed.			11/21/2023			
	Williamson County				Date Acknowledged: 11/21/2023		
3	Provide the identification number used by the governmental entidescription of the services, goods, or other property to be provided 202484  Cradlepoint Inc.			contract, and prov	vide a		
4	Name of Interested Party  City, State, Country (place of busi		(place of business)	· · · · · · · · · · · · · · · · · · ·			
				Controlling	Intermediary		
Grant, Laura		Austin, TX United	States	X			
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
	My name is	ı is	·				
	My address is(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				
				(month)	(year)		
		Signature of authoriz	red agent of contract	ting business entity			