

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**

Certificate Number:
 2024-1170391
 Date Filed:
 06/03/2024
 Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
 Preferred ATM Services
 Georgetown, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
 Williamson County

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.
 112233
 Automatic Teller Provider

Name of interested Party	City, State, Country (place of business)	Nature of interest (check appropriate)	
		Controlling	Intermediary
Preferred ATM Services LLC	Georgetown, TX United States	X	

5 Check only if there is NO interested party.

6 UNSWORN DECLARATION

My name is Ben Daniel and my date of birth is [REDACTED]
 My address is [REDACTED], Flournoy, TX, 76527, USA
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 6/3/24 County, State of TX on the 3rd day of June 2024
(month) (year)

Ben Daniel
 Signature of authorized agent of contracting business entity
(Date)

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Preferred ATM Services
Georgetown, TX United States

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2024-1170391

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2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Williamson County

Date Acknowledged:
06/17/2024

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.

112233
Automatic Teller Provider

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Preferred ATM Services LLC	Georgetown, TX United States	X	

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) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)