## **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 country of the business entity's place		Certificate Number:				
_	of business.	ess.			2024-1252405		
	SHI Government Solutions, Inc. Austin, TX United States			Data Filadi			
2	ne of governmental entity or state agency that is a party to the contract for which the form is			Date Filed: 12/30/2024			
_	being filed.						
	TX-City of Burleson		Date	Acknowledged:			
_	Dury ide the identification wimber used by the resourcemental outil	itu ay atata ayanay ta tuaak ay idantif		antroot and near	vido o		
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provided		y trie cc	milaci, and prov	viue a		
	25522479						
	Arctic Wolf Renewal 1/31/25						
4				Nature of interest			
Ī	Name of Interested Party City, State, Country (place of		ness)	(check applicable)  Controlling Intermediary			
				Controlling	Intermediary		
			-				
			-				
			I				
5	Check only if there is NO Interested Party.						
_							
6	UNSWORN DECLARATION						
	My name is Pamela Wilkinson	Wilkinson, and my date of birth is					
	2020 Dagana Trail	Augstin	TX	78749	USA		
	My address is3828 Pecana Trail(street)	, <u>Austin</u> ,,, (city)	state)	(zip code)	(country)		
	(5.155)	(5.5)	,	(=:P 0000)	(		
I declare under penalty of perjury that the foregoing is true and correct.							
	Travis Executed inCount	y, State of, on the	30th	day of December	er <sub>20.</sub> 24		
	Executed inCount	,, s.a.o or, or the		(month)	, 20 (year)		
	Signature of authorized agent of contracting business entity (Declarant)						