

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:
2023-972860

Date Filed:
01/17/2023

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Medical Priority Consultants Inc. D/B/A Priority Dispatch Corp.
Salt Lake City, UT United States

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

City of Burleson - Public Safety Communications

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.

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Medical Priority Dispatch Software License, Implementation, Training, and License Renewal, Service and Support

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Clawson, Jeffery J.	Salt Lake City, UT United States	X	

5 Check only if there is NO Interested Party.

☐

6 UNSWORN DECLARATION

My name is Simón Cantarero, and my date of birth is October 27, 1974.

My address is 110 South Regent St., Suite 500, Salt Lake City, Utah, 84111, USA.
(street) (city) (state) (zip code) (country)

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

Executed in Salt Lake County, State of Utah, on the 17th day of January, 2023.
(month) (year)

J. Simón Cantarero

Signature of authorized agent of contracting business entity
(Declarant)






2023-01-17 City of Burleson (TX) Form 1295 Certificate. Completed

Final Audit Report

2023-01-17

Created:	2023-01-17
By:	Iman Haddad (iman.haddad@prioritydispatch.net)
Status:	Signed
Transaction ID:	CBJCHBCAABAAC2ToytPg2PjAe9j_M0E-Ht2tUoFHTx6m

"2023-01-17 City of Burleson (TX) Form 1295 Certificate. Completed" History

-  Document created by Iman Haddad (iman.haddad@prioritydispatch.net)
2023-01-17 - 9:03:10 PM GMT
-  Document emailed to Simón Cantarero (simon.cantarero@prioritydispatch.net) for signature
2023-01-17 - 9:03:44 PM GMT
-  Email viewed by Simón Cantarero (simon.cantarero@prioritydispatch.net)
2023-01-17 - 9:35:43 PM GMT
-  Document e-signed by Simón Cantarero (simon.cantarero@prioritydispatch.net)
Signature Date: 2023-01-17 - 9:35:56 PM GMT - Time Source: server
-  Agreement completed.
2023-01-17 - 9:35:56 PM GMT