

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

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

Netsync Network Solutions
Houston, TX United States

Certificate Number:
2022-891022

Date Filed:
05/25/2022

Date Acknowledged:

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

City of Killeen

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.

AAAQ365424 ; AAAQ365421
TD-3100 and Cat9300s 3YR AAAQ365424 and 1YR AAAQ365421

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Abunaja, Khalid	Houston, TX United States	X	
	Gonzales, Diane	Houston, TX United States	X	

5 Check only if there is NO Interested Party.

☐

6 UNSWORN DECLARATION

My name is Tejaswini Bhate, and my date of birth is 9/12/1984.

My address is 2500 West Loop South, Suite 410, Houston, TX, 77027, USA.
(street) (city) (state) (zip code) (country)

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

Executed in Harris County, State of Texas, on the 25th day of May, 2022.

**Tejaswini
Bhate**

Digitally signed by Tejaswini Bhate
DN: cn=Tejaswini Bhate,
o=Netsync, ou=RFP,
email=tbhate@netsync.com, c=US
Date: 2022.05.25 11:34:21 -05'00'

Signature of authorized agent of contracting business entity
(Declarant)

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Houston, TX United States

Certificate Number:
2022-891022

Date Filed:
05/25/2022

Date Acknowledged:
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City of Killeen

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			Controlling	Intermediary
	Abunaja, Khalid	Houston, TX United States	X	
	Gonzales, Diane	Houston, 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)