CERTIFICATE OF INTERESTED PARTIES

FORM 1295

Ь					197	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 an of business.	ame of business entity filing form, and the city, state and country of the business entity's place f business.			Certificate Number:	
	Physio-Control, Inc.			5010	2016-84336	
l	Redmond, WA United States			Date	Filed:	
╞	Name of governmental entity or state agency that is a par	the to th			3/2016	
ľ	being filed.	ity to ui	ie contract for which the form is	0//1	3/2010	
	Killeen Fire Department			Date .	Acknowledged:	
3	Provide the identification number used by the government description of the services, goods, or other property to be	rovide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a escription of the services, goods, or other property to be provided under the contract.				
	Quote# 00045728					
	LIFEPAK 15 Monitor/Defibrillators, accessories, and se	ervice.				
-						
4				\neg	Nature o	f interest
•	Name of Interested Party		City, State, Country (place of busin	ess)	(check applicable)	
		., L				Intermediary
					Controlling	,
					0	
-		_		-		
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	<u>, , , , , , , , , , , , , , , , , , , </u>					
					9-63	
		\neg		1		
_				\dashv		
5	Check only if there is NO Interested Party.					- 4333
6	AFFIDAVITATION CCA M JOURNAL I SWEET	ear, or a	affirm, under penalty of perjury, that the	above (disclosure is true	and correct.
	AFFIX NOTARY BILLING SEAL ABOVE I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct. Signature of authorized agent of contracting business entity					
	AFFIX NOTARY STAMP (SEAL ABOVE					
	**************************************					dia =
	Sworn to and subscribed before me, by the said Brent Vantosen , this the 13th day of 3uly 20 to certify which, witness my hand and seal of office.					~ ```
						1
1	Rebecca M. Joseph Notary Public					
(Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					

CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 2

	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	of business. U.S. Bank Equipment Finance, a division of U.S. Bank Natinal Association	Certificate Number: 2016-85124 Date Filed:
2	Name of governmental entity or state agency that is a party to the contract for which the form is being filed.	07/14/2016 Date Acknowledged:

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.

Quote #00045728

LIFEPAK 15 Monitor/Defibrillators, accessories, and service

Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
•		Controlling	Intermediary
Jacobsen, Chelsea	Tigard, OR United States		X
Denison, Josephine	Tigard, OR United States		Х
Stammer, Erin	Tigard, OR United States		Х
Gannott, Jodi	Tigard, OR United States		Х
Lingl, Nathan	Tigard, OR United States		Х
Pavenko, Anna	Tigard, OR United States		Х
Humphrey, Tracey	Tigard, OR United States		Х
Wilmes, Justin	Tigard, OR United States		Х
Knutson, Susan	Tigard, OR United States		Х
Crosby, Don	Tigard, OR United States		X
Parker, P.W.	Minneapolis, MN United States	х	
Cecere, Andrew	minneapolis, MN United States	х	
Davis, Richard	Minneapolis, MN United States	х	
U.S. Bancorp	Minneapolis, TX United States	х	
Lewis, Chad	San Antonio, TX United States		Х

CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

2 of 2

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	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 business.	Certificate Number: 2016-85124				
	U.S. Bank Equipment Finance, a division of U.S. Bank Natinal . Tigard, OR United States					
2	Name of governmental entity or state agency that is a party to the	contract for which the form is	Date Filed: 07/14/2016			
	being filed. City of Killeen Fire Department	Date Acknowledged:				
3	Provide the identification number used by the governmental entity description of the services, goods, or other property to be provided to the provided the services of the ser	y or state agency to track or identifyed under the contract.	fy the contract, and provide a			
	Quote #00045728 LIFEPAK 15 Monitor/Defibrillators, accessories, and service					
4	Name of Interacted Party		Nature of interest			
	Name of Interested Party	City, State, Country (place of busine	· ' · · · · · · · · · · · · · · · · ·	ntermediary		
_						

5	Check only if there is NO Interested Party.					
6	AFFIDAVIT I swear, or af	ffirm, under penalty of perjury, that the a	above disclosure is true a	nd correct.		
	OFFICIAL STAMP LINDA MULLIGAN NOTARY PUBLIC - OREGON COMMISSION NO. 934880 MY COMMISSION EXPIRES JANUARY 11, 2019 Signature of authorized agent of contracting business entity					
	AFFIX NOTARY STAMP / SEAL ABOVE					
	Sworn to and subscribed before me, by the said <u>Sandi Hanks</u> , this the <u>14</u> day of <u>July</u> , to certify which, witness my hand and seal of office.					
	Signature of officer administering oath Printed name of of		Vo tary Purille of officer administering	<u>blic</u>		