

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.
Sportsman Solutions
Waukee, IA United States

Certificate Number:
2024-1246194

Date Filed:
12/05/2024

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
Harris County Department of Education / Choice Partners

Date Acknowledged:
12/6/2024

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.
HCDE CSP/RFP #2503 TMP-24-543
Consultant for City Park Facilities Sponsorships

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Jake Shandri	Waukee, Iowa, USA, 890 SE Olson Dr		

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Jake Shandri, and my date of birth is 11/20/1984.

My address is 890 Se Olson Dr, Waukee, Iowa, 50263, USA.
(street) (city) (state) (zip code) (country)

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

Executed in Dallas County, State of Iowa, on the 6 day of December, 2024.
(month) (year)



Signature of authorized agent of contracting business entity
(Declarant)