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. Name of business entity filing form, and the city, state and country of the business entity's place			OFFICE USE ONLY CERTIFICATION OF FILING Certificate Number:		
1						
-	of business.	SS.		2025-1338837 Date Filed:		
	eder Public Funds, Inc blin, OH United States		Date			
2	Name of governmental entity or state agency that is a par	rty to the contract for which the form i	07/4	8/2025		
	being filed.			Data Aaknaydadaad		
	City of North Richland Hills		Date	Acknowledged:		
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. 25-027					
	Discretionary Investment Management and Consulting Services					
	Nature of interest					
4	Name of Interested Party	City, State, Country (place of	business)	1	(check applicable)	
				Controlling	Intermediary	
				<u> </u>		
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	My name is Jason Headings	ne is <u>Jason Headings</u> , and my date of birth is				
	My address is 6125 Memorial Drive	, Dublin	_, Ohio ,	43017	USA	
		(city)	(state)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct.					
	Executed in Franklin	_County, State of Ohio,	on the 18	_{day of} July	. 20 25	
			,	(month)	(year)	
Signature of authorized agent of contracting business entity						
		(Declarant)				