
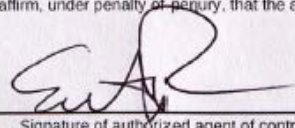
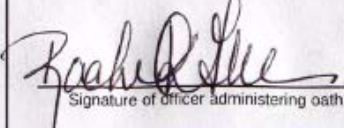


COMPLIANCE WITH HOUSE BILL 1295


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																																											
1 Name of business entity filing form, and the city, state and country of the business entity's place of business. Sciens LLC McKinney, TX United States			CERTIFICATION OF FILING Certificate Number: 2017-285522																																											
2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. City of North Richland Hills			Date Filed: 11/17/2017																																											
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. 18-003 ERP Needs Assessment and Vendor Selection Project Manager			Date Acknowledged:																																											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2" style="width: 40%;">4 Name of Interested Party</th> <th rowspan="2" style="width: 30%;">City, State, Country (place of business)</th> <th colspan="2" style="width: 30%;">Nature of interest (check applicable)</th> </tr> <tr> <th style="width: 15%;">Controlling</th> <th style="width: 15%;">Intermediary</th> </tr> </thead> <tbody> <tr> <td>Gousie, Stephen</td> <td>McKinney, TX United States</td> <td style="text-align: center;">X</td> <td></td> </tr> <tr> <td>Pages, Ernest</td> <td>McKinney, TX United States</td> <td style="text-align: center;">X</td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>					4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)		Controlling	Intermediary	Gousie, Stephen	McKinney, TX United States	X		Pages, Ernest	McKinney, TX United States	X																													
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5 Check only if there is NO Interested Party. <input type="checkbox"/>																																														
6 AFFIDAVIT <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;">  <p style="font-size: small;">AFFIX NOTARY STAMP / SEAL ABOVE</p> </div> <div style="width: 70%;"> <p style="font-size: small;">I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.</p> <div style="text-align: center;">  _____ Signature of authorized agent of contracting business entity </div> </div> </div> <p style="font-size: small;">Sworn to and subscribed before me, by the said <u>Ernest Pages</u>, this the <u>17</u> day of <u>Nov.</u>, 20<u>17</u>, to certify which, witness my hand and seal of office.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 30%;">  Signature of officer administering oath </div> <div style="width: 30%;"> <u>Rachel K. Gillman</u> Printed name of officer administering oath </div> <div style="width: 30%;"> <u>Texas Notary Public</u> Title of officer administering oath </div> </div>																																														

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Version V1.0.3337

CONFLICT OF INTEREST QUESTIONNAIRE

CONFLICT OF INTEREST QUESTIONNAIRE For vendor doing business with local governmental entity		FORM CIQ
<p>This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.</p> <p>This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).</p> <p>By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. See Section 176.006(a-1), Local Government Code.</p> <p>A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.</p>	<div style="border: 1px solid black; padding: 2px; text-align: center;">OFFICE USE ONLY</div> <div style="border: 1px solid black; padding: 2px;">Date Received</div>	
<p>1 Name of vendor who has a business relationship with local governmental entity.</p> <p style="text-align: center;">Sciens LLC</p>		
<p>2 <input type="checkbox"/> Check this box if you are filing an update to a previously filed questionnaire. (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date on which you became aware that the originally filed questionnaire was incomplete or inaccurate.)</p>		
<p>3 Name of local government officer about whom the information is being disclosed.</p> <p style="text-align: center;">_____ Name of Officer</p>		
<p>4 Describe each employment or other business relationship with the local government officer, or a family member of the officer, as described by Section 176.003(a)(2)(A). Also describe any family relationship with the local government officer. Complete subparts A and B for each employment or business relationship described. Attach additional pages to this Form CIQ as necessary.</p> <p style="text-align: center; color: red; font-weight: bold;">None</p> <p>A. Is the local government officer or a family member of the officer receiving or likely to receive taxable income, other than investment income, from the vendor?</p> <p style="text-align: center;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </p> <p>B. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer or a family member of the officer AND the taxable income is not received from the local governmental entity?</p> <p style="text-align: center;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </p>		
<p>5 Describe each employment or business relationship that the vendor named in Section 1 maintains with a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more.</p>		
<p>6 <input type="checkbox"/> Check this box if the vendor has given the local government officer or a family member of the officer one or more gifts as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a-1).</p>		
<p>7</p> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">  _____ Signature of vendor doing business with the governmental entity </div> <div style="text-align: center;"> 20 November 2017 _____ Date </div> </div>		

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Revised 11/30/2015