## **CERTIFICATE OF INTERESTED PARTIES**

## FORM 1295

							1 07 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.				<b>Certificate Number:</b> 2023-1092262			
	otorola Solutions							
	hicago, IL United States				Date Filed:			
2	ame of governmental entity or state agency that is a party to the contract for which the form is				11/08/2023			
	being filed.							
	th Richland Hills, City of				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. USC000004849							
	SVC02SVC0030C LOCAL REPAIR WITH ONSITE F	02SVC0030C LOCAL REPAIR WITH ONSITE RESPONSE						
4				Nature of interest				
7	Name of Interested Party		City, State, Country (place of business)			(check applicable)		
						Controlling	Intermediary	
					I			
5	Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION							
	name is <u>Travis Trevino</u> , and my date of birth is, and my date of birth is,							
						75000		
	My address is <u>415 E Exchange Pkwy</u> (street)	Allen	, (city		<u>TX</u> , <u> </u> . ite)	/5002, (zip code)	US (country)	
	I declare under penalty of perjury that the foregoing is true and correct.							
	Executed in <u>Collin</u> County,		State ofTX	<u></u> , on the	<u>8_</u> da	ay of _ <u>11</u>	, <u>2023</u>	
			<b>4</b>	is Tre		(month)	(year)	
			irav	us ire	M	no		
	Signature of authorized agent of contracting business entity (Declarant)							