

# 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**

Certificate Number:  
 2026-1462039

Date Filed:  
 05/14/2026

Date Acknowledged:

**1 Name of business entity filing form, and the city, state and country of the business entity's place of business.**  
 Midwest Tape LLC  
 Holland, OH United States

**2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.**  
 Round Rock Texas

**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.**  
 00000  
 Digital Materials

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	JJ Eldred LLC	Holland, OH United States	X	
	Intrinsic Partners, LP	Holland, OH United States	X	

**5 Check only if there is NO Interested Party.**


**6 UNSWORN DECLARATION**

My name is Sue Bascuk, and my date of birth is [REDACTED].

My address is 1417 Timberwolf Drive, Holland, Ohio, 43528, USA  
(city) (state) (zip code) (country)

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

Executed in Lucas County, State of Ohio, on the 14 day of May, 2026  
(month) (year)

  
 Signature of authorized agent of contracting business entity  
 (Declarant)

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			Controlling	Intermediary
	JJ Eldred LLC	Holland, OH United States	X	
	Intrinsic Partners, LP	Holland, OH United States	X	

**5 Check only if there is NO Interested Party.**

**6 UNSWORN DECLARATION**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(city) (state) (zip code) (country)

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

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

\_\_\_\_\_  
Signature of authorized agent of contracting business entity  
(Declarant)