CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

	Complete Nos. 1 - 4 and 6 if there are interested parties.	amplete Nec 1 - 4 and 6 if there are interested parties			OFFICE USE ONLY		
	Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.			CERTIFICATION OF FILING			
1	Name of business entity filing form, and the city, state and country of the business entity's place			Certificate Number:			
	of business.			2017-293379			
	Smart Energy Systems, LLC						
Ļ	Irvine, CA United States			Date Filed:			
2	Name of governmental entity or state agency that is a pa being filed.	of governmental entity or state agency that is a party to the contract for which the form is filed.			12/12/2017		
	City of Round Rock			Date Acknowledged:			
3	rovide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a escription of the services, goods, or other property to be provided under the contract.						
	Change Request ID # CR001						
	Change Request to the Professional Services Agreement between Smart Energy Systems, LLC and the City of Round Rock for the addition of the Text Messaging Module to the existing SCM Software Platform.						
_	addition of the Text Wessaging Woulde to the existing	SCM Software Platform,	Nature of interest				
4	Name of Interested Party	City, State, Country (place of busine	ess)				
				Controlling	Intermediary		
-							
-							
5	Chack only if there is NO Intersected Barty						
5 Check only if there is NO Interested Party.							
6	FIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.						
	ERIKA SORIA COMM #2108939 Notary Public - California ORANGE COUNTY My Commission Expires Apr. 26, 2019 Signature of authorized agent of contracting business entity						
	Sworn to and subscribed before me, by the said Amah Singha , this the 12 day of December , to certify which, witness my hand and seal of office.						
	Signature of officer administering path	EVIKA SOVIA	N	otary			
	Signature of officer administering oath Printed na	ame of officer administering oath Tit	le of o	fficer admihisterir	ng oath		

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