

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:
2018-398543

Date Filed:
08/30/2018

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Minnesota Life Insurance Company
Saint Paul, MN United States

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

City of Round Rock

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.

RFP No. 18-020
Group Term Life and AD&D

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Securian Financial Group, Inc.	St. Paul, MN United States	X	
	Hilger, Chris	St. Paul, MN United States	X	
	Zaccaro, Warren	St. Paul, MN United States	X	
	Shay, Bruce	St. Paul, MN United States	X	
	Connolly, George	St. Paul, MN United States	X	

5 Check only if there is NO Interested Party.

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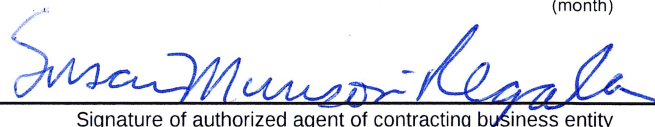
6 UNSWORN DECLARATION

My name is Susan Munson-Regala, and my date of birth is 11/10/1966.

My address is 400 Robert St N, St. Paul, MN, 55101, USA.
(street) (city) (state) (zip code) (country)

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

Executed in Ramsey County, State of Minnesota, on the 4 day of 9, 2018.
(month) (year)


Signature of authorized agent of contracting business entity
(Declarant)