## **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		
<ul> <li>Name of business entity filing form, and the city, state and country of the business entity's place of business.</li> <li>GT DISTRIBUTORS, INC AUSTIN, TX United States</li> </ul>					Certificate Number: 2017-182869 Date Filed:		
2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. CITY OF SAN ANTONIO					03/24/2017 Date Acknowledged:		
3 Provide the identification numbers description of the services, good 6100008781 NIGHT VISION EQUIPMENT	ods, or other property to	mental enti o be provic	ity or state agency to track or ded under the contract.	identify the c	contract, and pro	vide a	
4 Name of Interested Party		City, State, Country (place of business)		Nature of interest (check applicable) Controlling Intermediary			
l 							
5 Check only if there is NO Intere	sted Party.						
6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.  NANCY L. KERN MY COMMISSION EXPIRES June 23, 2017 Signature of authorized agent of contracting business entity  AFFIX NOTARY STAMP / SEAL ABOVE							
Sworn to and subscribed before me, by the said <u>ALEXIS M. HOSTETTER</u> , this the <u>24th</u> day of <u>MARCH</u> , 20_17, to certify which, witness my hand and seal of office.							
Signature of officer administer	ing oath Printed	aname of o	m L. Kern fficer administering oath	Accon Title of c	e Hry M	alayt	