Γ				
	CERTIFICATE OF INTERESTED PARTIES			ORM 1295
	Complete Nos. 1 - 4 and 6 if there are interested p Complete Nos. 1, 2, 3, 5, and 6 if there are no interested	OFFICE USE ONLY CERTIFICATION OF FILING		
]	Name of business entity filing form, and the city, state and country of the business entity's place of business.  Infor (US), Inc.		Certificate Number: 2016-40195	
2	Alpharetta, GA United States  Name of governmental entity or state agency that is a party to the contract for which the form is being filed.		Date Filed: 04/14/2016	
	City of Corpus Christi		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 goods or services to be provided under the contract.  XXX  Services related to Utility Billing and CDR contracts			
4	Name of Interested Party	City, State, Country (place of business)		(check applicable)
			Controlling	Intermediary
 5	Check only if there is NO Interested Party.			
š	AFFIDAVIT X			
	I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.			
	ELIZABETH A HAMMETT  NOTARY PUBLIC - MINNESOTA  MY COMMISSION EXPIRES 01/31/2021  Signature of authorized agent of contracting business entity			
	FFIX NOTARY STAMP / SEAL ABOVE			
	Sworn to and subscribed before me, by the said Associate General Counse, this the 14th day of Opri), to certify which, witness my hand and seal of office.			

Signature of officer administering oath

Printed name of officer administering oath

Exec. Assistant-Lea Title of officer administering gath