CERTIFICATE OF INTERESTED PARTIES

FORM 1295

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:
2023-1015352

Date Filed:
05/02/2023

Date Acknowledged:

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

Savvas Learning Company LLC
Paramus, NJ United States

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

El Paso Independent School District

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.

23-075
Sheltered Instruction Observation Protocol (SIOP) Model

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
Yoo, Young J. (Andy)	Paramus, NJ United States	X	
Wolford, Susan	New Hope, PA United States	X	
Schutz, Kevin	Chandler, AZ United States	X	
Milano, Patrick	Lawrence Township, NJ United States	X	
Glucoft, Evan	Los Angeles, CA United States	X	
Giangiacomo, Damian	Los Angeles, CA United States	X	
Gateway Education LLC	Los Angeles, CA United States	X	
Forsa, Bethlam	Paramus, NJ United States	X	
Fletcher, Paul	Folsom, CA United States	X	
Flesh, Daniel	Folsom, CA United States	X	

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

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:
2023-1015352

Date Filed:
05/02/2023

Date Acknowledged:

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

Savvas Learning Company LLC
Paramus, NJ United States

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

El Paso Independent School District

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.

23-075
Sheltered Instruction Observation Protocol (SIOP) Model

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary

5 Check only if there is NO Interested Party. ☐

6 UNSWORN DECLARATION

My name is Pamela McNair, and my date of birth is 9/30/1977.

My address is 15 E. Midland Ave Ste 502 (street), Paramus (city), NJ (state), 07652-2938 (zip code), USA (country).

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

Executed in Bergen County, State of New Jersey, on the 02nd day of May (month), 2023 (year).

Pamela McNair, Ed.D.

Signature of authorized agent of contracting business entity
(Declarant)