

**This Form Must Accompany RFP**

**Exhibit E**

**STOCKHOLDER/PARTNERSHIP DISCLOSURE AND STATEMENT OF OWNERSHIP**

Please check one type of Ownership, complete the form, and execute where provided.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> <u>Corporation</u>    | <input type="checkbox"/> <u>Limited Partnership</u>           |
| <input type="checkbox"/> <u>Partnership</u>               | <input type="checkbox"/> <u>Limited Liability Corporation</u> |
| <input type="checkbox"/> <u>Sole Proprietorship</u>       | <input type="checkbox"/> <u>Limited Liability Partnership</u> |
| <input type="checkbox"/> <u>Sub Chapter S Corporation</u> | <input type="checkbox"/> Other: _____                         |

All Respondents must submit this statement setting forth the names of all individuals who own a 10% or greater interest in the Respondent as the case may be. If one or more such stockholder or partner is itself a corporation or partnership, the stockholders/partners holding 10% or more of that corporation or partnership, as the case may be, shall also be listed. The disclosure shall be continued until names and addresses of every non-corporate stockholder and individual partner exceeding the 10% ownership has been listed.

If there is no stockholder, partner or individual that owns 10% or more of the Respondent, write "None" or similar language below.

**List of Stockholders/Partners with Ten Percent (10%) or More Interest in Respondent:**

<u>Owner's Name</u>	<u>Home Address</u>	<u>Title/Office Held</u>	<u>Percent (%) of Partnership Share Owned</u>
Convergence Technologies, Inc.	5875 Castle Creek Parkway N. Dr., Ste. 320 Indianapolis, IN 46250	Owner	100%

**List of Stockholders/Partners with Ten Percent (10%) or More Interest in Any Organization Listed Above:**

<u>Owner's Name</u>	<u>Home Address</u>	<u>Title/Office Held</u>	<u>Percent (%) of Partnership Share Owned</u>

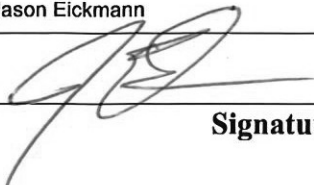
Use additional paper if needed. Check here  if additional sheets are attached.

**Name of Company** Core BTS, Inc., d/b/a NRI

**Address** 5875 Castle Creek Parkway North Drive Suite 320

**City, State, Zip Code** Indianapolis, IN 46250

**Authorized Agent** Jason Eickmann **Title** SVP & General Counsel

  
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**Signature of Authorized Agent**