

# 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

**1 Name of business entity filing form, and the city, state and country of the business entity's place of business.**  
 VERITIV OPERATING COMPANY  
 Atlanta, GA United States

Certificate Number:  
 2018-299048

Date Filed:  
 01/05/2018

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

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 services, goods, or other property to be provided under the contract.**  
 2018-128 - COPY PAPER  
 COPY PAPER

| 4 Name of Interested Party | City, State, Country (place of business) | Nature of interest (check applicable) |              |
|----------------------------|--|---------------------------------------|--------------|
|                            |  | Controlling                           | Intermediary |
| VERITIV CORPORATION        | Atlanta, GA United States                | X                                     |              |
|                            |  |                                       |              |
|                            |  |                                       |              |
|                            |  |                                       |              |
|                            |  |                                       |              |
|                            |  |                                       |              |
|                            |  |                                       |              |
|                            |  |                                       |              |
|                            |  |                                       |              |

**5 Check only if there is NO Interested Party.**


**6 UNSWORN DECLARATION**

My name is KEVIN CARRIER, and my date of birth is 05/24/57.

My address is 7016 AC SKINNER PKWY., JACKSONVILLE, FL, 32256, USA.  
(street) (city) (state) (zip code) (country)

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

Executed in DUVAL County, State of FLORIDA, on the 5TH day of JANUARY, 2018.  
(month) (year)

  
 \_\_\_\_\_  
 Signature of authorized agent of contracting business entity  
 (Declarant)