CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

Lof 1

_					1011	
_	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	ame of business entity filing form, and the city, state and country of the business entity's place f business. ohnson Burks Supply Co Inc			Certificate Number: 2019-519842		
	Sherman, TX United States		Date Filed:			
2	ame of governmental entity or state agency that is a party to the contract for which the form is eing filed. Collin County			07/23/2019 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.					
	IFB 2016-113 Plumbing Supplies					
4			Nature of interest			
	Name of Interested Party City, State, Country (place of busin		ess)		oplicable)	
Ea	rles, Chris	Sherman, TX United States		Controlling	Intermediary X	
W	pody, Mike	Sheman, TX United States			X	
Te	rrell, Lester	Sherman, TX United States		Х	:	
		,				
			\dashv			
 5	Check only if there is NO Interested Party.	· .				
6	UNSWORN DECLARATION	<u>.</u>				
	My name is, and my date of birth is					
	My address is					
	(street)	(city) (sta	ite)	(zip code)	(country)	
	declare under penalty of perjury that the foregoing is true and correct.	_		<u></u> /		
	Executed inCounty,	, State of, on the	<u> </u>	y of Joly (month)	, 20 <u>/9</u> . (year)	
Signature of authorized agent of contracting business entity (Declarant)						