CERTIFICATE OF INTERESTED PARTIES

FORM 1295

F	Complete Nos 1 4 and 6 // /				1 of	
	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 US		
1	Name of business entity filing form, and the city state and country of the last			CERTIFICATION OF FILIN		
				Certificate Number: 2019-530232		
2				Date Filed:		
	Name of governmental entity or state agency that is a party to the contract for which the form is being filed.		08/1	9/2019		
	Collin County			Date Acknowledged:		
3				•		
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.					
	2018-304	acci under the contract.				
	Morgue Transport Service, Contract 2018-304					
1				Nature of interest		
	Name of Interested Party	City, State, Country (place of busines		ss) (check applicable)		
il denne				Controlling	Intermedia	
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and gaven						
-						
С	heck only if there is NO Interested Party.					
U	NSWORN DECLARATION		- Milda - Antonio - Antonio			
M	y name is GERALD DEON WERTHENALL, Sand my date of birth is					
h #.	y address is _/					
		. (4		
IVI		,,,,				
IVI	(street)	(city) (stat	e)	(zip code)	(country)	
	(street)	(e)	(zip code)	(country)	
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Id	(street)		day	y of Automonth)	_, 20	