## CERTIFICATE OF INTERESTED PARTIES

FORM 1295

.

1 of 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		
<ol> <li>Name of business entity filing form, and the city, state and country of the business entity's place of business.</li> </ol>		Certificate Number: 2020-580227		
JBI, Ltd. dba Justice Benefits, Inc.		2020 000227	.020-300227	
		Date Filed:		
2 Name of governmental entity or state agency that is a party to the contract for which the form is		01/23/2020		
being filed.				
Collin County		Date Acknowledged:		
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. 2017-198				
Consulting Services				
Nature of interest				
4 Name of Interested Party	City, State, Country (place of busine	ess) (check a	pplicable)	
· · · · · · · · · · · · · · · · · · ·		Controlling	Intermediary	
Brewer, Alexander N.	Coppell, TX United States	x		
Liu, C. Robin	Coppell, TX United States	x		
Brewer, Donald E.	Coppell, TX United States	x		
Brewer, Edward A.	Coppell, TX United States	х		
Wolf, Teresa	Coppell, TX United States	х		
5 Check only if there is NO Interested Party.				
6 UNSWORN DECLARATION				
My name is, and my date of birth is				
My address is(street)	(City) (Sta	ate) (zip code)	(country)	
I declare under penalty of perjury that the foregoing is true and correct.				
Executed in Dallas County, State of $x$ , on the day of $day of day and $				
Signature of authorized agent of contracting business entity				
Signature of authorized agent of contracting business entry (Declarant)				