CERTIFICATE OF INTERESTED PARTIES

FORM 1295

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	lame of business entity filing form, and the city, state and country of the business entity's place of business.			Certificate Number: 2016-68336		
	e office pal			Contractive Country Benefits and Country Los		
	kewood, NJ United States		Date Filed:			
2		mental entity or state agency that is a party to the contract for which the form is		06/09/2016		
	being filed.			Date Acknowledged:		
	Collin County		Date	Ackilomicages.		
_					14	
3	ovide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a scription of the services, goods, or other property to be provided under the contract.					
IFB-2015-344						
	toner cartridges				S-	
				Nature of	interest	
4	Name of Interested Party City, State, Country (place of busing		ress) (check applicable)		plicable)	
			Controlling Intermediary			
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			. 10			
_		<u> </u>				
5	Check only if there is NO Interested Party.			1		
6	AFFIDAVIT I swear, or a	affirm, under penalty of perjury, that the	above	e disclosure is tru	e and correct.	
	* ***	1 1				
•		11 61				
-5		R L				
	-	Signature of authorized agent of contracting business entity				
	*					
	FIX NOTARY STAMP / SEAL ABOVE					
Sworn to and subscribed before me, by the said <u>Brenda Friedman</u> , this the <u>7</u> day of <u>July</u> 20 10, to certify which, witness my hand and seal of office. My Commission exp 3/14/2030					ily.	
					J	
	Jun B Pompie Janet B.	Pompei D	orch	145/17 g ago	nt/Nothry	
1	Signature of officer administering oath Printed name of o	officer administering oath	Title of	officer administer	ing oath	
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