CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

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	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.				Certificate Number:		
	Ecolab Inc.				2016-64731		
	St. Paul, MN United States				Date Filed:		
2	Name of governmental entity or state agency that is a party to the contract for which the form is				06/02/2016		
-	being filed.			00/			
	Collin County			Date	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.						
	2014-139						
	Detergents and Dispenser for Laundry and Kitchen						
4	Name of Interested Party City, State, Country (place of busin						
			City, State, Country (place of business				
				····	Controlling	Intermediary	
		***************************************	**************************************				
			778 P. A. B. A.				
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		-					
,	Check only if there is NO Interested Party.						
	AFFIDAVIT	ewear or s	offirm under papally of parius, that	the character	diadaguais		
	I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.						
	MICHELE M KENNEDY Notary Public						
	Minnesota My Comm. Expires Jan 31, 2020						
Signature of authorized agent of contracting business e							
AFFIX NOTARY STAMP / SEAL ABOVE							
	Sworn to and subscribed before me, by the said Bruce Kottom , this the 2nd day of June ,						
•	2016, to certify which, witness my hand and seal of office.						
	main de						
Tylichele Bernedy Michele Kennedy			y Sr.	Sr. Contract Sales Specialist			
Signature of officer administering eath Printed name of officer administering oath Title of officer administering oa							