CERTIFICATE OF INTERESTED PARTIES FORM 1295 1 of 1 OFFICE USE ONLY 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. CERTIFICATION OF FILING Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: 2016-95237 Phoenix Trading, Inc. dba Amercare Products, Inc. Woodinville, WA United States Date Filed: 08/04/2016 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Date Acknowledged: Collin County 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. Supplies: Jail/Personal Inmate Shampoo provided to the county jail and juvenile detention. Nature of interest Name of Interested Party City, State, Country (place of business) (check applicable) Controlling Intermediary Wendy, Hemming Seattle, WA United States 5 Check only if there is NO Interested Party. 6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct. Signature of authorized agent of contracting business entity Sworn to and subscribed before me, by the said , to certify which, witness my hand and seal of office