Γ	CERTIFICATE OF INTERESTED PAR	TIES		***		
	Confilir Collins Of 119 1 mar than Colonies 1 / 11 /	ii		FOF	10f1	
F	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.		CE	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.  Meier Veterinary Service LLC., dba All Heart Veterinary Center			Certificate Number: 2016-135430		
2	Farmersville, TX United States  Name of governmental entity or state agency that is a party to the contract for which the form is being filed.  Collin County Animal Services			Date Filed: 11/10/2016  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.  2017-072  Professional Services: Veterinary					
4	Name of interested Party	City, State, Country (place of business)			of interest pplicable)	
Meier, Cassandra		Farmersville, TX United States		Controlling	Intermediary	
5	Check only if there is NO Interested Party.		·		<u> </u>	
	Signature of authorized agent of contracting business entity  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said **LUY TIVBLY** this the **LUY TIVBLY** this the **LUY TIVBLY** Statt of Texas**  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said **LUY TIVBLY** this the **LUY TIVBLY** this the **LUY TIVBLY** Statt of Texas**  AUTHORITIAN STAMP / SEAL ABOVE  SWORN to certify which, witness my hand and seal of office.  AUTHORITIAN STAMP / SCARTARY  Statt of Texas**  Statt of Texas**  Statt of Texas**					
	Weller Tingly Lelly ting	Vally timaley State of Texas				

Signature of officer arministering oath

Printed name of officer administering oath

Title of officer administering oath