

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 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 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Justice Benefits, Inc.
Coppell, TX United States

Certificate Number:
2017-191413

Date Filed:
04/12/2017

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Collin County

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.

2017-198

Government consulting firm specializing in Federal reimbursement assistance for Sheriff's offices with the SCAAP and SSI programs.

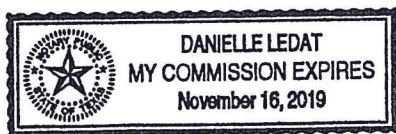
4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

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.



April Farmer

Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said April Farmer, this the 12th day of April, 20 17, to certify which, witness my hand and seal of office.

[Signature]

Signature of officer administering oath

DANIELLE LEDAT

Printed name of officer administering oath

Office Manager

Title of officer administering oath