CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 1

| | | | | 1011 | |
|------------------------------------|---|-----------------------------|---|--------------|--|
| | 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: 2017-252162 | | |
| | Tabb Textiles Co., Inc. Opelika, AL United States | | 2017-252162 | | |
| 2 | Name of governmental entity or state agency that is a party to the contract for which the form is | | Date Filed: 08/21/2017 | | |
| | 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. | | | | |
| | 2014-122 | | | | |
| Supplies: Jail and Personal Inmate | | | | | |
| 4 | Name of Interested Party City, State, Country (place of busin | | | | |
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| | | | Controlling | Intermediary | |
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| 5 | Check only if there is NO Interested Party. | | | | |
| 5 | X X | | | | |
| 6 | AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct. | | | | |
| | and corre | | | | |
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| | exan tempt | | | | |
| | Signature of authorized agent of contracting business entity | | | | |
| | AFFIX NOTARY STAMP / SEAL ABOVE | | | | |
| | Sworn to and subscribed before me, by the said Alan Fenster , this the 2156 day of August, 2017 , to certify which, witness my hand and seal of office. | | | | |
| | Marsha Jhriff Marsha Thrift Notary Public Signature of officer administering bath Printed name of officer administering oath Title of officer administering oath | | | | |