

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.

PARAMEDICS LOGISTICS TEXAS LLC
GREENWICH, CT United States

Certificate Number:
2018-312255

Date Filed:
02/09/2018

Date Acknowledged:

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

COLLIN COUNTY

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.

2015-024
AMBULANCE AND RELATED EMERGENCY AND NON-EMERGENCY SERVICES

| 4 | Name of Interested Party | City, State, Country (place of business) | Nature of interest (check applicable) | |
|---|---|--|---------------------------------------|--------------|
| | | | Controlling | Intermediary |
| | HAISCH, ROBERT | GREENWICH, CT United States | X | |
| | CLAYTON, TOM | GREENWICH, CT United States | X | |
| | ODRICH, MICHAEL | GREENWICH, CT United States | X | |
| | PARAMEDICS LOGISTICS OPERATING COMPANY, LLC | GREENWICH, CT United States | X | |
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5 Check only if there is NO Interested Party.

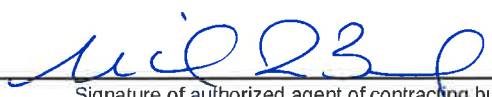
6 UNSWORN DECLARATION

My name is MICHAEL BARDORF, and my date of birth is 03/14/1973.

My address is 289 GREENWICH AVENUE, GREENWICH, CT, 06830, USA.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in FAIRFIELD County, State of CONNECTICUT, on the 9TH day of FEB, 20 18.
(month) (year)


Signature of authorized agent of contracting business entity
(Declarant)