CERTIFICATE OF INTERESTED PARTIES

FORM 1295

H				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: 2018-309478		
	Ed's Lawn Equipment Addison, TX United States		Data Filada		
2	Name of governmental entity or state agency that is a party to the contract for which the form is		Date Filed: 02/02/2018		
	being filed.				
	Collin County		Date Acknowledged:		
3	Provide the identification number used by the governmental entity or state agency to track or ide description of the services, goods, or other property to be provided under the contract.	entify the c	ontract, and pro	vide a	
IFB 2017-344					
	Grounds Maintenance Equipment				
	Wall of Districting 11				
4	Name of Interested Party City, State, Country (place of busing		Nature of interest ess) (check applicable)		
	Name of Interested Party City, State, Country (place of b	usiness)	Controlling		
Th	horman, Joel Addison, TX United States			Intermediary	
"	norman, Joel Addison, TX United States		X		
	De complètes				
	the new status that a graveromental entity or state lightly may make after into	certain c	milačis witi	à	
	and the state abone at the time the business series a colonia to the state and		Chit (Constmin	ental	
	panelty or state extency. The law appears only to a collinact of a downwarmental e			注题	
	distance (1) requires an action or vote by the reverse is body of the entity or an			PIGIL Less	
	curve to signed or (2) has a value of at least \$1 million. The disclosure requirem		ses to a cont	act	
	A CONTRACTOR OF THE CONTRACTOR				
	Section The discussive form may be accessed and electronically completed a				
	THE RESIDENCE OF THE PROPERTY	35A Clines	lons for		
	33 395" in the sacrace base of 200 PM on Yuesday, February 6".		The facility was		
5 Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION		A SCHOOL STATES	1795	
	My name is JOEC THORMAN, and my date of birth is 10-29-59.				
	address is 4206 IRVIN SIMMONS DALLAS TX 75229 USA				
	(street) (city)	(state)	(zip code)	(country)	
				(,	
I declare under penalty of perjury that the foregoing is true and correct.					
Executed in DAIAS County, State of EXAS, on the 3 day of Feb.					
			(month)	(year)	
	PATTY LYNN FANNIN				
	My Notary ID # 5160648				
	Expires March 26, 2021 Signature of authorized agent of (Declarant)	contracting	business entity	7	
orr	ms provided by Texas Ethics Commission www.ethics.state.tx.us		Vers	sion V1.0.5523	