CERTIFICATE OF INTERESTED PARTIES

FORM 1295

Į				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		
	Name of business entity filing form, and the city, state and country of the business entity's place of business. ABM Building Services, LLC		Certificate Number: 2018-370900		
ŀ	Fort Worth, TX United States Name of governmental entity or state agency that is a party to the contract for which the form is		Date Filed: 06/20/2018		
ľ	being filed.		00/20/2010		
	Collin County, Texas		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. 2018-162 Addendum 3 Change 300+ pneumatic actuators to DDC Control				vide a	
4			Nature of interest		
Name of Interested Party City,		State, Country (place of busines	(41111111111111111111111111111111111111	(check applicable)	
_			Controlling	Intermediary	
_					
Check only if there is NO Interested Party.					
	UNSWORN DECLARATION				
d	My name is, and my date of birth is, and my date of birth is				
ľ	My address is 7/00 S I 35F , (street)	Denten TX	76210.	115	
	, .	(city) (state)	(zip code)	(country)	
I declare under penalty of perjury that the foregoing is true and correct.					
E	Executed in				
	Di Pl				
	Signatur	e of authorized agent of contracting	na business entity		
		((Declarant)	-S		