## **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		
of bus	Name of business entity filing form, and the city, state and country of the business entity's place of business.				Certificate Number: 2019-446335			
	Osburn Associates, Inc Logan, OH United States					an ease a		
	Name of governmental entity or state agency that is a party to the contract for which the form is					Date Filed: 01/29/2019		
being	being filed.							
Collin	County				Date Aci	knowledged:		
3 Provid	e the identification number used by the govern ption of the services, goods, or other property t	mental entity to be provide	or state agency to track d under the contract.	or identify	the conti	ract, and prov	vide a	
2018- Signs	260 , Sign Materials & Barriers							
4	Name of Interested Party City, State, Country (place of busi			no of harmin	Nature of interest ness) (check applicable)			
	Tame of interested Faity		ony, state, country (place of business)			(check ap	Intermediary	
					_			
					_			
5 Check	only if there is NO Interested Party.							
6 UNSW	ORN DECLARATION				_			
My nam	eis Robbie Jenks		, and	my date of bi	irth is			
My add	ress is							
	(street)		(city)	(stat	te)	(zip code)	(country)	
l declar	e under penalty of perjury that the foregoing is true	e and correct.						
Execute	ed in Hocking	County,	State of 64.0	, on the	day o	of January	_, 20	
			De	7		(month)	(year)	
	*		Signature of authorized a	gent of contra	acting bus	siness entity		
orms pro	vided by Texas Ethics Commission	www.ethics	s.state.tx.us			Version V	1.1.28ab6150	