CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

					1 of 1	
	omplete Nos. 1 - 4 and 6 if there are interested parties. omplete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.			OFFICE USE ONLY CERTIFICATION OF FILING		
1	ame of business entity filing form, and the city, state and country of the business entity's place business.			Certificate Number: 2019-504215		
	Central Poly-Bag Corp. INDEN, NJ United States			Date Filed:		
2	Name of governmental entity or state agency that is a party to the contract for which the form is being filed.			06/13/2019		
	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 lescription of the services, goods, or other property to be provided under the contract.					
	FB 2018-251 Ianitorial Supplies					
4	Name of Interested Party City,	City, State, Country (place of busine	Nature of interest ess) (check applicable)			
	Thanks of interested Larry	City, State, Country (place of busine		Controlling	Intermediary	
Ho	offer, Andrew	Linden, NJ United States		X		
Se	erhofer, Agnes	Linden, NJ United States		X		
5 Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION					
	My name is PMW HOFFET	, and my date of birth is				
	My address is _ (street)	(city) (sta	ate)	(zip code)	 (country)	
I declare under penalty of perjury that the foregoing is true and correct.						
Executed in						
	Signature of authorized agent of contracting business entity (Declarant)					