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.			Certificate Number: 2019-520589		
	Galls, LLC					
	Lexington, KY United States			Date Filed: 07/24/2019		
2	Name of governmental entity or state agency that is a party to the contract for which the form is being filed.			07/24/2019		
	Collin County			Date Acknowledged:		
3	rovide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a escription of the services, goods, or other property to be provided under the contract.					
	017-288					
	Jniforms, Law Enforcement & Related Items					
4	Name of Interested Party City, State, Country (place of bus	\	Nature of interest			
	Name of Interested Party City, State, Country (place		ess)	(check applicable) Controlling Intermediary		
			\dashv	Controlling	intermediary	
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_						
_			_			
_			-			
_						
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	My name isTiffany Brewer	, and my date of birth is _				
	My address is (street)	(city) (s	tate)	(zip code)	 (country)	
	I declare under penalty of perjury that the foregoing is true and correct.					
	Executed in FayetteCounty	, State of Kentucky, on the	24th d			
		, 11 0		(month)	(year)	
		Uffor				
	Signature of authorized agent of contracting business entity (Declarant)					