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 Certificate Number: 2019-526001 Date Filed:		
1 Name of bu	Name of business entity filing form, and the city, state and country of the business entity's place of business. JERRY BARNETT MCKINNEY, TX United States					
2 Name	lame of governmental entity or state agency that is a party to the contract for which the form is leing filed. COLLIN COUNTY			08/06/2019 Date Acknowledged:		
COL	EIN COONTT					
3 Provi	ide the identification number used by the go	vernmental entity or state agency to track or identi	fy the c	ontract, and pro	vide a	
desci	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.					
2017	7-249					
PRO	IVIDING PHARMACIST SERVICES					
		T T		Nature o	of interest	
4	Name of Interested Party City, State, Country (place of bus		iness) (check applicable)			
				Controlling	Intermediary	
BARNETT, JERRY		MCKINNEY, TX United States		х		
5 Ohaa	de andre Market in NO Leasured Bart					
5 Chec	k only if there is NO Interested Party.					
	WORN DECLARATION					
My na	ame isJERRY BARNETT	, and my date	of birth is			
My ac	ddress is					
	(street)	(city)	(state)	(zip code)	(country)	
i deci	are under penalty of perjury that the foregoing i	is true and correct.				
Exec	uted inCOLLIN	County, State ofTX, on th	e_7TH	day of AUGUST	, 20_19 .	
				(month)		
		0 0 ++				
		Signature of authorized agent of co	ontractin	g business entity	/	
		(Declarant)				