CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 1

				1011	
	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: 2020-599594		
	Galls, LLC		2020-33334		
	Lexington, KY United States		Date Filed:		
2	lame of governmental entity or state agency that is a party to the contract for which the form is		03/17/2020		
	eing filed.		Dato Acknowledged		
	Collin County		Date Acknowledged	•	
3	Provide the identification number used by the governmental entity or state agency to track or identify the contract, and description of the services, goods, or other property to be provided under the contract.				
	2020-125				
	Firearms, Ammunition & Accessories				
4			Nature of interest		
	Name of Interested Party	City, State, Country (place of busine	· · · · · · · · · · · · · · · · · · ·	(check applicable)	
			Controlling	Intermediary	
_					
_					
				1	
_					
5	Check only if there is NO Interested Party.				
6	UNSWORN DECLARATION				
	My name is, Tiffany Brewer,	and my date of birth is _			
	My address is,,,,	(city) (sta	, (zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct.				
	Executed in _FayetteCounty,	State ofKY, on the17	_day ofMarch, 2 (month)		
		Tiffany Brew	er		
		Signature of authorized agent of cont		,	
(Declarant)					