CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 1

1 Name of business entity filing form, and the city, state and country of the business entity's place Certificate Numb	ION OF FILING	
of business. 2020-636114 Zones, LLC		
Auburn, WA United States Date Filed:	i	
2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.		
COLLIN COUNTY Date Acknowled	ged:	
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.	provide a	
2020-309		
mice and magnetic card readers		
4	Nature of interest (check applicable)	
Controllin	-	
Zones IT Solutions, Inc. Auburn, WA United States X		
	<u> </u>	
	_	
5 Check only if there is NO Interested Party.	:	
Greek unly it there is NO interested Party.		
6 UNSWORN DECLARATION		
My name is, and my date of birth is, and my date of birth is		
My address is	e) (country)	
I declare under penalty of perjury that the foregoing is true and correct.		
	une , 20 <u>20</u> .	
· · · · · · · · · · · · · · · · · · ·	· (year)	
Jon Bailey, Vice President, Bus		
Signature of authorized agent of contracting business e	entity	