## **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.  Mat and Nuri Incorporated			Certificate Number: 2020-680555			
	rooklyn, NY United States			Date File	d:		
2	ame of governmental entity or state agency that is a party to the contract for which the form is ping filed.  Ollin County Purchasing			10/20/2020			
				Date Acknowledged:			
3	Provide the identification number used by the governmental entity description of the services, goods, or other property to be provide IFB 2020-368 Supplies: Jail Ki Janitorial and Jail Kitchen supplies			the contra	act, and prov	ide a	
4					Nature of interest		
	Name of Interested Party	City, State, Country	(place of busine	· '	(check applicable)		
					ontrolling	Intermediary	
G	benebitse, Omatie	Brooklyn, NY Unit	ed States	×			
				_			
				_			
5	Check only if there is NO Interested Party.				1		
6	UNSWORN DECLARATION						
	My name is Omatie Gbenebitse	Omatie Gbenebitse, and my date of					
	My address is	, (cit )		,	(zip code)		
	(street)	(city)	(St	ate)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct.						
	Executed inKINGSCounty,	State of New York,	o n the 20th day	/ of	October, (month)	2020 (year)	
		Omatic G	benebits	2			
		Signature of authoria	zed agent of cont (Declarant)	racting bu	siness entity	_	