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		
	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 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.		Certificate Number: 2020-662732			
Jerry			2020	2020-602132		
			Date Filed: 08/31/2020			
COLL	IN COUNTY	DUNTY		Date Acknowledged:		
	le the identification number used by the govern ption of the services, goods, or other property	nmental entity or state agency to track or identi to be provided under the contract.	fy the co	ontract, and pro	vide a	
2017 PRO	249 /IDING PHARMACIST SERVICES					
4	Name of Interested Party City, State, Country (place of business)		Nature of interest (check applicable)			
			iness)	Controlling	Intermediary	
BARNETT, JERRY		MCKINNEY, TX United States		X		
5 Chec	conly if there is NO Interested Party.					
6 UNSV	ORN DECLARATION					
My na	My name is, and my date of birth is					
My ad	dress is					
	(street)	(city)	(state)	(zip code)	(country)	
I decla	are under penalty of perjury that the foregoing is tr	ue and correct.				
Execu	nted inCOLLIN	County, State ofTEXAS, on the	e 31st	day of AUGU		
		Juny Bornet	<u>t</u>			
		Signatur of authorized agent of c (Declarant)	ontractin	y pusiness entity		