## **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.			Certificate Number: 2021-727619			
	merican Fire Protection Group			2021-727019			
	Dallas, TX United States			Date Filed:			
2	ume of governmental entity or state agency that is a party to the contract for which the form is ing filed.			03/16/2021			
	Collin County			Date Acknowledged:			
3	rovide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a						
J	description of the services, goods, or other property to be provided under the contract.  IFB 2021-099  Construction, Collin County Sheriff's Office Fire Sprinkler Modification						
4			Nature of interest				
	Name of Interested Party	City, State, Country (place of busin	iess)	(check ap			
				Controlling	Intermediary		
			-				
			$\overline{}$				
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
	My name is Robert M. Seda	,					
	(street)	(city) (s	tate)	(zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and correct	ct.					
	Executed in DallasCounty	y, State ofTexas, on the	16th d	<sub>ay of</sub> <u>Marc</u> h	, 20_20		
			_	(month)	(year)		
		B-M.	$\leq$	7-/			
			Signature of authorized agent of contracting business entity  (Declarant)				