CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

<u>_</u>				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 cou of business.	Certificate Number: 2021-765503			
	G T DISTRIBUTORS, INC.	2021-703303			
ı	AUSTIN, TX United States		Date Filed:		
2	Name of governmental entity or state agency that is a party to the contract for which the form is		06/11/2021		
	being filed.				
	COLLIN COUNTY		Date Acknowledged:		
_					
3	Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.				
	IFB 2020-186				
	Safety Wear				
_	Nature of interest				
4	Name of Interested Party	City, State, Country (place of busine	I	(check applicable)	
		Coop, Councy Council, (prince or Culcin	Controlling	Intermediary	
	,				
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		- 11			
	ye.				
5 Check only if there is NO Interested Party.					
6 (JNSWORN DECLARATION				
ı	My name isDAVID CURTIS	and my date of b	oirth is	-	
١	My address is(street)	(city) (sta	ite) (zip code)	(country)	
I declare under penalty of perjury that the foregoing is true and correct.					
	TDAVIS TEVAS ILINE OF				
E	executed in TRAVISCounty	, State of TEXAS , on the 11	ITH day of JUNE	, 20_21	
	(month) (year)				
	Signature of authorized agent of contracting business entity (Declarant)				
	(Decialari)				