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		
1	, , , , , , , , , , , , , , , , , , , ,			Certificate Number:		
	irkhoff, Hendricks & Carter, LLP			021-831782		
	Dallas, TX United States			Filed:		
2	Name of governmental entity or state agency that is a party to the contract for which the form is			12/10/2021		
	being filed. 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 escription of the services, goods, or other property to be provided under the contract.					
	2016-229 Frontier Parkway Improvements, ESA Amendment No. 12					
4		City, State, Country (place of business		Nature of interest		
	Name of Interested Party			(check ap	plicable) Intermediary	
Kerkhoff, Craig		Dallas, TX United States		X	intermediary	
Chaney, Derek		Dallas, TX United States	as, TX United States			
Mata, Andrew		Dallas, TX United States		Х		
Carter, Joe		Dallas, TX United States		Х		
Hickey, Matt		Dallas, TX United States		х		
Birkhoff, John		Dallas, TX United States		х		
Hendricks, Gary		Dallas, TX United States		х		
5 Check only if there is NO Interested Party.						
6 UNSWORN DECLARATION						
	My name is Gary C. Hendricks, P.E., R.P.L.S, and my date of birth is					
	My address is	,		(min code)		
	(street)	(city) (st	ate)	(zip code)	(country)	
I declare under penalty of perjury that the foregoing is true and correct.						
	Executed in DallasCounty	y, State of <u>Texas</u> , on the	10th_c		, 20 <u>21</u>	
	Oglasty signed by Gary C. Hendricks, P.B., (month) (year) Disc Culfs, E-sphandricksdighted by com, O-flightfill bendricks & Carle, L.D*, Offschaft it bendricks & Carle, L.D*, Gary C. Hendricks, P.E., R.P.L.S Gary C. Hendricks, P.E., R.P.L.S Reisson, I status to the accuracy and theapty of the document that Comment the L.T. A. S.					
Signature of authorized agent of contracting business entity						
	(Declarant)					