

# 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.**  
Armstrong Forensic Laboratory, Inc.  
Arlington, TX United States

Certificate Number:  
2022-867510

Date Filed:  
03/31/2022

**2 Name of governmental entity or state agency that is a party to the contract for which the form is 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 2020-151 Forensic Testing  
Analytical Testing

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
Armstrong, Benjamin	Arlington, TX United States		X
Armstrong, Marion	Arlington, TX United States		X
Armstrong, Michael	Arlington, TX United States		X
Armstrong, Andrew	Arlington, TX United States		X
Armstrong, Kay	Arlington, TX United States	X	

**5 Check only if there is NO Interested Party.**

**6 UNSWORN DECLARATION**

My name is Benjamin Armstrong, and my date of birth is [REDACTED]

My address is [REDACTED] (street) [REDACTED] (city) [REDACTED] (state) [REDACTED] (zip code) [REDACTED] (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Tarrant County, State of Texas, on the 31 day of March, 2022.  
(month) (year)

[Signature]  
Signature of authorized agent of contracting business entity (Declarant)