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	Name of business entity filing form, and the city, state and country of the business entity's place of business.			Certificate Number:			
	ctory Supply LLC			2022-893053			
	Mount Pleasant, TN United States				Date Filed:		
2	lame of governmental entity or state agency that is a party to the contract for which the form is		05/31/2022				
	being filed.	iled.					
	Collin County Office of the Purchasing Agent		Date Acknowledged:				
3	de the identification number used by the governmental entity or state agency to track or identify the contract, and provide a ription of the services, goods, or other property to be provided under the contract.						
	B 2019-188						
	Jail and Personal Inmate Supplies						
			Nature of interest		f interest		
4	Name of Interested Party	City, State, Country (place of busin	ess)	ess) (check applicable)			
				Controlling	Intermediary		
_							
		1					
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
	My name is Kathleen Trommer	, and my date of	birth is				
	My address is	,			,		
	(street)	(city) (s	tate)	(zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and correc	ct.					
	Executed in Manatee Count	ty, State of Florida, on the	31st _d		, <u>20</u> _22		
		14.		(month)	(year)		
		pon					
		Signature of authorized agent of con (Declarant)	tracting	pusiness entity			