CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

					1 07 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:		
	Kristi Compton, PhD PC			2022-933681		
	Dallas, 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			09/14/2022		
	ing filed.					
	in 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.					
2015-227						
	Psychological Services					
_				Nature of interest		
4	Name of Interested Party City, State, Country (place of bus		ness)	(check a	(check applicable)	
				Controlling	Intermediary	
_						
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	_{Iy name is} Kristi Compton, and my date of				·	
	My address is	,,,	,		_,	
	(street)	(city) (state)	(zip code)	(country)	
I declare under penalty of perjury that the foregoing is true and correct.						
	Executed in Dallas County	/, State of <u>Texas</u> , on the	he <u>14th_</u> day of <u>September</u> , 20 <u>22</u> . (month) (year)			
	Signature of authorized agent of contracting business entity					
í I	(Declarant)					