## **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.			Certificate Number:		
	aw Office of Carolyn Skogman, PLLC			2022-935385		
	ustin, 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		09/19/2022			
	eing filed.		Data Asknowladged			
	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.					
	2022-429					
	2022-429 Professional Service; Attorney, Law Library Form Review Project					
_				Nature of interest		
4	Name of Interested Party	City, State, Country (place of busin	ess)	(check a	pplicable)	
				Controlling	Intermediary	
La	w Office of Carolyn Skogman, PLLC	Austin, TX United States		х		
Skogman, Carolyn		Austin, TX United States		х		
5 Check only if there is NO Interested Party.						
6	6 UNSWORN DECLARATION					
	My name is,					
	(street)	(city) (st	tate)	(zip code)	(country)	
I declare under penalty of perjury that the foregoing is true and correct.						
	Executed inTravisCounty, State ofTexas_	, on the _19thday of		Septemb (month)	er, 2022. (year)	
		Carolyn Skogmi	an	(month)	() 501/	
		<b>v</b>				
		Signature of authorized agent of con (Declarant)	tracting	g business entity		