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			Certificate Number:		
	of business.	only, state and scanny of the sasmess only a place			2023-995052	
	alls, LLC exington, KY United States		Date	Date Filed:		
2	Name of governmental entity or state agency that is a party to t	hat is a party to the contract for which the form is		03/16/2023		
	being filed.			Date Acknowledged:		
	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.					
	2023-225					
	Ballistic Bullet Resistant Shields, Level III					
4				Nature of interest		
	Name of Interested Party	City, State, Country (place of busing		(check ap		
				Controlling	Intermediary	
5	Check only if there is NO Interested Party. $\begin{tabular}{c} X \end{tabular}$					
6	UNSWORN DECLARATION					
	My name is Tiffany Brewer	, and my date of birth is				
	My address is					
	(street)	(city)	(state)	(zip code)	(country)	
I declare under penalty of perjury that the foregoing is true and correct.						
	Executed in Fayette Cour	nty, State of Kentucky	on the 16th	l _{lav of} March	20 23	
		, oldio oi,	SIT 1110	(month)	, 20 (year)	
	lith Bon					
	Signature of authorized agent of contracting business entity (Declarant)					