

# 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

Certificate Number:  
 2023-1048018

Date Filed:  
 07/19/2023

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Courage Tactical LLC (DBA: CopsPlus)  
 Grosse Pointe Farms, MI United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Collin County

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.

2023-218 Addendum 1  
 Firearms, Ammunition, and Accessories

| 4 | Name of Interested Party | City, State, Country (place of business) | Nature of interest (check applicable) |              |
|---|--------------------------|--|---------------------------------------|--------------|
|   |                          |  | Controlling                           | Intermediary |
|   | Petrus, Michael          | Macomb, MI United States                 | X                                     |              |
|   |                          |  |                                       |              |
|   |                          |  |                                       |              |
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|   |                          |  |                                       |              |
|   |                          |  |                                       |              |
|   |                          |  |                                       |              |

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Michael T Petrus IV, 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 Macomb County, State of Michigan, on the 19 day of July, 2023.  
 (month) (year)

ADAM BERCH  
 NOTARY PUBLIC - MICHIGAN  
 MACOMB COUNTY  
 MY COMMISSION EXPIRES 09/03/2023  
 ACTING IN Macomb COUNTY

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