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	ame of business entity filing form, and the city, state and country of the business entity's place f business.			Certificate Number:		
	aw Office of Carolyn Skogman, PLLC			2023-1055513		
	ustin, TX United States			Date Filed:		
2	ame of governmental entity or state agency that is a party to the contract for which the form is			08/03/2023		
-	sing filed.					
	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 Professional Service: Attorney, Law Library Form Review Project					
4				Nature of interest		
7	Name of Interested Party	City, State, Country (place of business)		(check a	oplicable)	
				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	UNSWORN DECLARATION					
	My name is Carolyn Skogman	, 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 correct.					
	Executed inEagle	County, State of Colorado, on the 3rd day of August, 2023. (month) (year)				
		Carolyn Skogman				
	Signature of authorized agent of contracting business entity (Declarant)					