					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. Name of business entity filing form, and the city, state and country of the business entity's place of business. Denise Martinez Allen, TX United States			OFFICE USE ONLY CERTIFICATION OF FILING Certificate Number: 2023-1096018 Date Filed:			
						being filed.
description of 2024-122	entification number used by the govern the services, goods, or other property Valor Program	nmental entity or state agency to track or identity to be provided under the contract.	ify the co	ontract, and pro	vide a	
4	Name of Interested Party City, State, Country (place o		iness)	Nature of Interest (check applicable) Controlling Intermediary		
5 Check only if	there is NO Interested Party.					
6 UNSWORN DE	Derise Martinez	, and my date of	of birth is			
My address is	(street)	(city)	(state)	(zip code)	(country)	
I declare under Executed in	penalty of perjury that the foregoing is tru		11th	ay of Novemb (month)		
		Signature of authorized agent of co	ontracting	business entity		