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	time of business entity filing form, and the city, state and country of the business entity's place business. Certificate Number: 2024-1114927					
	Perry Office Plus		Data	Tilad.		
2	Temple, TX United States Name of governmental entity or state agency that is a party to the contract for which the form is			Date Filed: 01/23/2024		
_	being 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.					
	2024-139 OEM Toner, Ink Cartri					
	2024-139 OEM Toner, Ink Cartridges, and Supplies for Printers					
		Nature of interest				
4	Name of Interested Party	ested Party City, State, Country (place of business		(check applicable)		
				Controlling	Intermediary	
			\dashv			
			_			
5 Check only if there is NO Interested Party.						
S UNSWORN DECLARATION						
	y name is, and my date of birth is					
	My address is(street)	(city) (state	te)	(zip code)	(country)	
I declare under penalty of perjury that the foregoing is true and correct.						
	Executed in Bell					
Executed in State of County, State of Co						
H3 Yyen II						
	Signature of authorized agent of contracting business entity (Declarant)					
	(Decidation)					