## CERTIFICATE OF INTERESTED PARTIES **FORM 1295** 1 of 1 OFFICE USE ONLY Complete Nos. 1 - 4 and 6 if there are interested parties. CERTIFICATION OF FILING Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties. 1 Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2024-1115071 COMPLETE SUPPLY Date Filed: FARMERS BRANCH, TX United States 01/23/2024 2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Date Acknowledged: 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. Janitorial Supplies through Buyboard 649-21 Nature of interest 4 City, State, Country (place of business) (check applicable) Name of Interested Party Controlling Intermediary Farmers Branch, TX United States Х COMPLETE SUPPLY 5 Check only if there is NO Interested Party. **6 UNSWORN DECLARATION** and my date of birth is My name is PRICE BAHCALL My address is I declare under penalty of perjury that the foregoing is true and correct. \_, on the 24TH day of JANUARY County, State of TEXAS , 20 24 Executed in DALLAS (month) (year) Signature of authorized agent of contracting business entity

(Declarant)