## **CERTIFICATE OF INTERESTED PARTIES**

FORM 1295

1 of 1

					T 01 T		
	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			
1	Name of business entity filing form, and the city, state and country of the business entity's place		CERTIFICATION OF FILING Certificate Number:				
•	of business.	my of the business entity a place	2024-1115295				
	MANS DISTRIBUTORS, INC.						
2	Carrollton, TX United States  Name of governmental entity or state agency that is a party to the	is a party to the contract for which the form is		Date Filed: 01/23/2024			
2	being filed.	gency that is a party to the contract for which the form is		01/20/202-1			
	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 lescription of the services, goods, or other property to be provided under the contract.						
	2023-108						
	JANITORIAL SUPPLIES						
4			Nature of interest				
4	Name of Interested Party	City, State, Country (place of busin	ess)	(check ap			
				Controlling	Intermediary		
-							
					:		
5 Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION						
	My name is SADHNA ATEL	, 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 in DALLAS County, State of TEXAS, on the 25 day of TALAK 20 2 (month) (y					M, 20 24.		
					(year)		
	Signature of authorized agent of contracting business entity						
	(Declarant)						