## CERTIFICATE OF INTERESTED PARTIES

FORM 1295

				1 of 1
Complete Nos. 1 - 4 and 6 if there are interested p Complete Nos. 1, 2, 3, 5, and 6 if there are no inte	parties. Prested parties.		OFFICE US	
Name of business entity filing form, and the city, state and country of the business entity's place     of business.		CERTIFICATION OF FILING		
FOUR BROTHERS OUTDOOR POWER		Certificate Number: 2024-1125731		
Name of governmental entity or state agency that is a party to the contract for which the form is being filed. COLLIN COUNTY		02/20/2024		
				COLLIN COUNTY
3 Provide the identification number used by the				
description of the services, goods, or other pro	governmental entity or state agency to track or identif	y the co	ntract, and pro	vide a
2024-123	perty to be provided under the contract.			
GROUNDS MAINTENACE EQUIPMENT				
1			Nature of interest	
Name of Interested Party	City, State, Country (place of busin	ness)	(check applicable)	
			Controlling	Intermediary
	AND			
		-		
		-		
	ALCOHOLOGICA CONTRACTOR OF THE			
		_		
Check only if there is NO Interested Party.	<b>9</b>			
	X			
UNSWORN DECLARATION			/ /	
My name is (Add) (Adde)				
JOHN CIARCIO	, and my date of b	irth is		<u> </u>
My address is				
	(City) / (Sia	ie)	(zip code)	(country)
I declare under penalty of perjury that the foregoing is	true and correct			
			-00/032	
Executed in	County, State of, on the 6	21 day	of Felina	20 24
	on the z	uay	OT / E/West)	20 <u></u>
			/	(year)
	an F			
	Signature of authorited anoth of and	Indian bu		
	Signature of authorized agent of contra (Declarant)	aceng bu	siness entity	3
ns provided by Texas Ethics Commission	www.ethics.state.tx.us			5.1.9000c47f
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