

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 Name of business entity filing form, and the city, state and country of the business entity's place of business.
 Compu-Vision Consulting, Inc.
 North Brunswick, NJ United States

Certificate Number:
 2024-1130147

Date Filed:
 03/01/2024

2 Name of governmental entity or state agency that is a party to the contract for which the form is 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.
 2024-198
 TEMPORARY PERSONNEL SERVICES

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Mital, Shaloo	North Brunswick, NJ United States	X	
	Mital, Bharat	North Brunswick, NJ United States	X	

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Shaloo Mital, and my date of birth is [REDACTED].

My address is [REDACTED] (street), [REDACTED] (city), [REDACTED] (state), [REDACTED] (zip code), [REDACTED] (country).

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Middlesex County, State of NJ, on the 1st day of March, 2024.
 (month) (year)

Shaloo
 Signature of authorized agent of contracting business entity (Declarant)