CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

					1011		
	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	lame of business entity filing form, and the city, state and country of the business entity's place f business.			Certificate Number:			
	DKO LLC			2024-1150756			
	TYLER, TX United States				Date Filed:		
2	lame of governmental entity or state agency that is a party to the contract for which the form is			04/23/2024			
_	eing filed.						
	Collin County			Date Acknowledged:			
3	Provide the identification number used by the governmental entity description of the services, goods, or other property to be provided.	n number used by the governmental entity or state agency to track or identify the contract, and provide a ces, goods, or other property to be provided under the contract.					
	IFB 2024-183 HERBICIDE TREATMENT						
4	Name of Interested Party City, State, Country (place o			Nature of interest			
		City, State, Country (place of busine	ess)	(check applicable)			
_				Controlling	Intermediary		
5 Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION						
	My name is, and my date of birth is						
	My address is _						
	(street)	(city) (sta	ate)	(zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true and correct.						
	Executed inSouthCounty, State of, on theday of, 20						
	herpels						
	Signature of authorized agent of contracting business entity (Declarant)						