## **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.  Kristi Compton PhD PC			Certificate Number: 2024-1155078			
_	Arlington, TX United States			<b>Date Filed:</b> 05/01/2024			
2	lame of governmental entity or state agency that is a party to the contract for which the form is eing filed.						
	Collin County	inty			Date Acknowledged:		
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provided.			the con	tract, and prov	ride a	
	2015-227 Psychological Services						
4	Name of Interested Party City, Stat		, State, Country (place of busines		Nature of interest (check applicable)		
				$\bot$	Controlling	Intermediary	
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
	My name is Kristi Compton		, and my date of I	oirth is	<u>/</u>		
	My address is (street)	, (city)	, (st.	, <b>a</b> te)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct		(0.0	,	( 1)	,	
		, State of Texas	on the	1st <sub>da</sub>	<sub>v of</sub> May	. 20 24	
			,		(month)	(year)	
	Kristi Compton, PhD						
		Signature of authorized agent of contracting business entity (Declarant)					