

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.
SEDALCO - Fort Worth, TX
Fort Worth, TX United States

Certificate Number:
2024-1167710

Date Filed:
05/29/2024

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.
2023-398 CCADF Medical Exp.
Additional scope for addition/renovation to existing jail facility.

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Will Burgess, and my date of birth is [REDACTED].

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

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

Executed in Tarrant County, State of TX, on the 29 day of May, 2024.
(month) (year)

Will Burgess

Digitally signed by Will Burgess
DN: C=US, E=wburgess@sedalco.com, O=SEDALCO
Construction, OU=SEDALCO Construction, CN=Will Burgess
Date: 2024.05.29 10:54:20-05'00'

Signature of authorized agent of contracting business entity
(Declarant)