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.			Certificate Number: 2024-1169668		
	enise Martinez					
2	Allen, TX United States Name of governmental entity or state agency that is a party to the contract for which the form is			Date Filed: 06/02/2024		
-	sing 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 lescription of the services, goods, or other property to be provided under the contract.					
	2024-122					
	Collin County Valor Program					
4		Nature of interest				
•	Name of Interested Party	City, State, Country (place of busine			plicable)	
_				Controlling	Intermediary	
			\neg			
			\dashv			
			\dashv			
			_			
5 Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION					
	y name is Denise Martinez, and my date of birth is.					
	My address is	1-4.4	de)	(min and -)	(on the A	
(street) (city) (state) (zip code) (country)						
	I declare under penalty of perjury that the foregoing is true and correct.					
	Executed in					
	Signature of authorized agent of contracting business entity					
	(Declarant)					