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. Name of business entity filing form, and the city, state and country of the business entity's place		OFFICE USE ONLY CERTIFICATION OF FILING	
1			Certificate Number:	
-	business.		2024-1192605	
	Amanda Garcia			
	McKinney, TX United States		Date Filed:	
2	Name of governmental entity or state agency that is a party to the contract for which the form is being filed.		07/25/2024	
	Collin County		Date Acknowledge	d:
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.			
	2023-101			
	Personal Services Agreement, VALOR, Amanda Garcia			
4			Nature of interest	
	Name of Interested Party City, State, Country (place of busing			
			Controlling	Intermediary
	-			
5	Check only if there is NO Interested Party.			
6	UNSWORN DECLARATION			
	My name isAmanda Garcia	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	t.		
	Executed inCOLLINCounty,	State ofTEXAS, on the _25	5THday ofJULY (mont	
		Allner		
		Signature of authorized agent of cont	tracting business enti	ty
		(Declarant)		