## CERTIFICATE OF INTERESTED PARTIES **FORM 1295** 1 of 1 OFFICE USE ONLY 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. CERTIFICATION OF FILING Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2024-1206903 SEDALCO - Fort Worth, TX Fort Worth, TX United States Date Filed: 08/28/2024 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Date Acknowledged: **Collin County** 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 Mental Additional scope for addition/renovation to existing jail facility. Nature of interest 4 Name of Interested Party City, State, Country (place of business) (check applicable) Controlling Intermediary 5 Check only if there is NO Interested Party. Х 6 UNSWORN DECLARATION

6 UNSWORN DECLARATION

My name is \_\_\_\_\_\_, and my date of birth is \_\_\_\_\_\_\_

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

(street)

Will Burgess

(city)

Digitally signed by Will Burgess
DN: C=US, E=wburgess@sedalco.com, O=SEDALCO
Construction, OU=SEDALCO Construction, CN=Will Burgess
Date: 2024.08.28 12:48:23-05'00'

(zip code)

Signature of authorized agent of contracting business entity (Declarant)

(state)

My address is

(country)