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.				OFFICE USE ONLY CERTIFICATION OF FILING		
1	ame of business entity filing form, and the city, state and country of the business entity's place f business.			Certificate Number: 2024-1235714			
	SEDALCO - Fort Worth, TX						
	Fort Worth, TX United States				Date Filed:		
				11/06/2024			
2	ame 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	ovide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a scription of the services, goods, or other property to be provided under the contract.						
	2023-398 CCADF Medical Mental	edical Mental					
	Added Scope for Construction						
			Nature of interest				
4	Name of Interested Party	City, State, Country (place of business)			(check applicable)		
					ntrolling	Intermediary	
5	5 Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION	·					
	My name is Will Burgess		, and my date of	birth is			
	My address is						
	(street)	(city)	(s	tate) (zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct.						
	Executed inCount	y, State ofTX	, on the	6_day of	(month)	er 20 24 (year)	
	Will Burgess DN: C=US, E=wburgess@sedalco.com, O=SEDALCO Construction, OU=SEDALCO Construction, CN=Will Burgess Date: 2024.11.06 14:42:45-06'00'						
	Signature of authorized agent of contracting business entity (Declarant)						