	CERTIFICATE OF INTERESTED PARTIES FORM 1295					
	1 of 1					
F	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. Spartan Psychological Consulting			Certificate Number: 2025-1254057		
	GRAND PRAIRIE, 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.		01/06/2025			
	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.					
	2023-25 Psychological Services					
4				Nature of interest ess) (check applicable)		
1	Name of Interested Party City, State, Country		y (place of business)		Intermediary	
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5	5 Check only if there is NO Interested Party.					
6	6 UNSWORN DECLARATION					
	My name is, Robert D. Lackey, Pho, and my date of birth is					
	My address is					
	- COL PUD					
	Signature of authorized agent of contracting business entity (Declarant)					