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			
L	Name of business entity filing form, and the city, state and count of business.	Certificate Number: 2025-1264424			
	colab Inc.				
	St. Paul, MN United States		Date Filed:		
2	Name of governmental entity or state agency that is a party to the contract for which the form is		02/04/2025		
	peing 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 description of the services, goods, or other property to be provided under the contract.				
	2025-037				
	Janitorial Supplies				
4			Nature of interest		
	Name of Interested Party	City, State, Country (place of busine	· ·	pplicable)	
			Controlling	Intermediary	
Зá	ates III, William H.	Kirkland, WA United States	Х		
5 Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION				
	My name is Ben Zuniga	, and my date of	birth is	L	
	My address is	_,,		_,_	
	(street)	(city) (st	cate) (zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct.				
	Executed in Ramsey County	y, State of <u>Minnesota</u> , on the <u>.</u>	4th_day of Februa (month)	•	
	Ben Zungs				
	Signature of authorized agent of contracting business entity (Declarant)				