## **CERTIFICATE OF INTERESTED PARTIES**

FORM 1295

1 of 1

▭						
	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.			Certificate Number:		
	Richardson Saw and Lawn Mower Company, Inc.	2025-1271107				
	Richardson, 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.			02/18/2025		
	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 lescription of the services, goods, or other property to be provided under the contract.					
l	2025-024					
	Grounds Equipment					
-				Nature o	f interest	
4	Name of Interested Party	City, State, Country (place of busines				
				Controlling	Intermediary	
Richardson Saw and Lawn Mower Company, Inc.		Richardson, TX United States		x		
		*****				
5 Check only if there is NO Interested Party.						
	UNSWORN DECLARATION					
	y name is, 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 in <u>Dallas</u> County	/, State of <u>Texas</u> , on the _	10	day of <u>125</u> (month)	, 20 <u>7-&gt;</u> .	
				(monan)	(year)	
		mes K				
	Signature of authorized agent of contracting business entity					
	(Declarant)					