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	lame of business entity filing form, and the city, state and country of the business entity's place f business.			Certificate Number: 2025-1283464		
	KO LLC					
	ER, TX United States			Date Filed:		
Ž	ame of governmental entity or state agency that is a party to the contract for which the form is eing filed.			03/19/2025		
	ollin County			Date Acknowledged:		
	Comit County			3	(
3	Provide the identification number used by the governmental entit	entification number used by the governmental entity or state agency to track or identify the contract, and provide a				
3		ription of the services, goods, or other property to be provided under the contract.				
	IFB 2024-183					
	HERBICIDE TREATMENT					
_				Nature of	finterest	
4	Name of Interested Party	City, State, Country (place of business)		(check applicable)		
	·			Controlling	Intermediary	
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION A					
	My name is, and my date of birth is					
	My address is					
	My address is(street)	(city) (sta	ate)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct.					
	Executed in Sm. He county, State of, on the day of					
	Executed in					
	J J J					
	Jan Illan					
	Signature of authorized agent of contracting business entity					
	(Declarant)					