## **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		Certificate Number:				
	of business.	and only, duale and double you are business only o place			2025-1315641		
	GALLS, LLC Lexington, KY United States				Date Filed:		
2	Name of governmental entity or state agency that is a party to the	that is a party to the contract for which the form is		05/27/2025			
_	being filed.						
	Collin County		Date /	Acknowledged:			
3		the identification number used by the governmental entity or state agency to track or identify the contract, and provide a stion of the services, goods, or other property to be provided under the contract.					
	2025-252 Law Enforcement Unis						
	Law Enforcement Uniforms						
_			Nature of interest				
4	Name of Interested Party	City, State, Country (place of busine	ess)	(check ap			
				Controlling	Intermediary		
			$\dashv$				
			$\longrightarrow$				
				l.			
5	Check only if there is NO Interested Party.						
6	UNSWORN DECLARATION						
	My name isMike Fadden	, and my date of	birth is				
	My address is(street)	(city) (sta	, _	,,,	(country)		
	(citoti)	(oily) (oild	10)	(21) 0000)	(oouniny)		
I declare under penalty of perjury that the foregoing is true and correct.							
	Executed in _FayetteCounty,	State ofKentucky, on the	e _28th	day of May	, 2025		
		_		(month)	(year)		
		por Jala					
	Signature of authorized agent of contracting business entity						
		(Declarant)	. aciiiy	, business citily			