## **CERTIFICATE OF INTERESTED PARTIES**

FORM **1295** 

ı					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		
Ì	Name of business entity filing form, and the city, state and country of the business entity's place of business.			Certificate Number: 2025-1359532		
l	Jan Kearney					
L	Name of governmental entity or state agency that is a party to the contract for which the form is		Date Filed: 09/05/2025			
ľ	ing filed.		03/03/2023			
	Collin County Texas		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.					
	2024-379					
	Removal of dead livestock					
4				Nature of interest		
	Name of Interested Party	City, State, Country (place of busin	ess)	(check ap		
_				Controlling	Intermediary	
_						
_						
_						
_	*					
_						
_	***************************************					
_						
Check only if there is NO Interested Party.						
ι	NSWORN DECLARATION					
٨	My name is, and my date of birth is					
٨	My address is					
(city) (state) (zip code)					(country)	
I declare under penalty of perjury that the foregoing is true and correct.						
a desired under periody of periody that the foregoing is the aird confect.						
	Executed in					
	Ta Kanana					
	Signature of authorized agent of contracting business entity					
		(Declarant)				