

# 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.

Nicole Ferra  
 McKinney, TX United States

Certificate Number:  
 2026-1414425

Date Filed:  
 01/29/2026

Date Acknowledged:

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Collin County

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.

2026-128 PSA Autopsy services  
 PSA Autopsy services

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Nicole Ferra and my date of birth is [REDACTED]

My address is [REDACTED] (city), [REDACTED] (state), [REDACTED] (zip code), USA (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Collin County, State of Texas, on the 4 day of Feb, 2026  
(month) (year)

[Signature]  
 Signature of authorized agent of contracting business entity (Declarant)