## **CERTIFICATE OF INTERESTED PARTIES**

FORM **1295** 

1 of 1

					1011	
	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:		
	Banfield Foundation		2021	-736168		
	Vancouver, WA United States		Date	Filed:		
2	Name of governmental entity or state agency that is a party to the contract for which the form is		04/08/2021			
	being filed.					
	Fort Bend County		Date	Acknowledged:		
			<u> </u>			
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provided		the co	ontract, and pro	vide a	
	MG-2021	awardad ta Fart Dand County Anim	al Ca		a cost of Dair	
	5,900 Banfield Foundation Medical Equipment Grant will be awarded to Fort Bend County Animal Services toward the cost of Bair ugger/cage warmer, portable ultrasound, and microscope.  Nature of interest					
4	Name of Interested Party	City, State, Country (place of business)		(check applicable)		
	o			Controlling	Intermediary	
					-	
_						
5	Check only if there is NO Interested Party.					
_						
ь	UNSWORN DECLARATION					
	My name isLane Murphy	_, and my date of birth is9/6/1988				
	My address is888 Lakeridge Dr,,	, Guilford,	VT_	05301	,USA.	
	(street)	• • • • • • • • • • • • • • • • • • • •	ate)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct.					
	Executed inWindhamCounty,	cuted inWindhamCounty, State ofVT, on the _29day ofJune, 2021_				
		(month) (year)				
	Signature of authorized agent of contracting business entity					
	(Declarant)					