## **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 count of business.  The Office Pal	Certificate Number: 2018-375486							
	Freehold, NJ United States				Date Filed:				
2	Name of governmental entity or state agency that is a party to the being filed.	entity or state agency that is a party to the contract for which the form is				07/03/2018			
	Fort Bend County	D							
3	Provide the identification number used by the governmental entit description of the services, goods, or other property to be provid TIPS 180401 Toner & Ink Cartridges			the contra	act, and pro	vide a			
4				Nature of interest ess) (check applicable)					
	Name of Interested Party	City, State, Country (place of business)			ontrolling	Intermediary			
5	Check only if there is NO Interested Party.								
6	UNSWORN DECLARATION								
	My name is	ne is, and my date of birth is							
	My address is(street)	,(city)		, ate) (	(zip code)	, (country)			
I declare under penalty of perjury that the foregoing is true and correct.									
	Executed inCounty.			day o	ıf	_, 20			
					(month)	(year)			
	Signature of authorized agent of contracting business entity (Declarant)								

## **CERTIFICATE OF INTERESTED PARTIES**

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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 coun of business.	siness entity filing form, and the city, state and country of the business entity's place			Certificate Number: 2018-375486					
	The Office Pal				2010 0.0 100					
	Freehold, NJ United States			Date Filed:						
2	Name of governmental entity or state agency that is a party to the	governmental entity or state agency that is a party to the contract for which the form is			07/03/2018					
	being filed.									
	Fort Bend County				Date Acknowledged:					
			07/24/201	.8						
3	description of the services, goods, or other property to be provided	per used by the governmental entity or state agency to track or identify the contract, and provide a ods, or other property to be provided under the contract.								
	TIPS 180401									
	Toner & Ink Cartridges									
		1			Nature of	interect				
4	Name of Interested Party City, State, Country (pl		(nlace of busine	,ee/	Nature of interest (check applicable)					
	Name of interested Faity	any, care, country (place of business		· '	ntrolling	Intermediary				
				0		antermediary				
				:						
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	My address is					,·				
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	I declare under penalty of perjury that the foregoing is true and correct.									
	Executed inCounty	v. State of	, on the	day of		. 20 .				
		· · · · · · · · · · · · · · · · · · ·	,		(month)	(year)				
	Signature of authorized agent of contracting business entity (Declarant)									