CERTIFICATE OF INTERESTED PARTIES

FORM 1295

					1 of 1	
	Complete Nos. 1 - 4 and 6 if there are interested parties.			OFFICE USE	ONLY	
	Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.			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: 2018-410442		
	Galls, LLC			Eiled:		
2	Lexington, KY United States Name of governmental entity or state agency that is a party to the contract for which the form is			Date Filed: 10/03/2018		
٤	eing filed.					
	City of Round Rock			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.					
	18-007REBID Uniforms for Police and Fire Departments					
-	Nature of inter					
4	Name of Interested Party	City, State, Country (place of busin	ess)		ck applicable)	
L				Controlling	Intermediary	
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r						
5	Check only if there is NO Interested Party.					
6	UNSWORN DECLARATION					
	My name is, and my date of birth is					
1	My address is 1340 Russell Cave Rd.	Lexington	Ky ,	40505	_,_USA	
	(street)		state)	(zip code)	(country)	
	I declare under penalty of perjury that the foregoing is true and correct.					
	Executed in <u>Favette</u> County, State of <u>Kentucky</u> , on the <u>3rd day of October</u> , 20_18					
Ĭ	(month) (year)					
	Signature of authorized agent of contracting business entity (Declarant)					
1	(Solidary)					