CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

_									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:				
	Collision Forensic Solutions	2023-997528										
	Papillion, NE United States							Date Filed:				
2	Name of governmental entity or state agency that is a party to the contract for which the form is						03/22/2023					
	being filed. North Texas Gang Unit						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.											
	GANG RTC360 5 YR File ld 5112, 6/26/2023 Cou RTC360 5Yr CCP	ıncil - Trans	fer to Tar	ant Count y S	heriff's Office	<u> </u>						
4						Nature of interest						
Ĭ	Name of Interested Party		City, State, Country (place of busine			ess)	· · · · · · · · · · · · · · · · · · · 					
_							Controll	ling	Intermediary			
S	elves, Michael		Papillion, NE United States X									
5	Check only if there is NO Interested Party.											
6	UNSWORN DECLARATION											
	My name is Michael L. Selves	, and my date of				birth is	_	_				
	My address is300 South Fillmore Street		Pap	illion		ΛΕ 	68046		USA			
	(street)			(city)	(st	ate)	(zip cod	je)	(country)			
	I declare under penalty of perjury that the foregoing is true	re under penalty of perjury that the foregoing is true and correct.										
	Executed inSarpy	County,	State of_	Nebraska	, on the	22 (day ofM		_,20_23			
			/	Michael	L. Se	L	(r -	month)	(year)			
		Signature of authorized agent of contracting business entity (Declarant)										