

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.

ICS JAIL SUPPLIES, INC
Waco, TX United States

Certificate Number:
2019-448612

Date Filed:
02/04/2019

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

Hidalgo County

Date Acknowledged:
02/05/2019

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.

C-18-001
PURCHASE OF SECURITY CORRECTIONAL MATTRESSES

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	BOGAN III, JM	Waco, TX United States	X	
	BOGAN, TW	Waco, TX United States	X	

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

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

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

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

Certificate Number:
2019-448612

Date Filed:
02/04/2019

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

ICS JAIL SUPPLIES, INC
Waco, TX United States

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

Hidalgo 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.

C-18-001
PURCHASE OF SECURITY CORRECTIONAL MATTRESSES

4	Name of Interested Party	City, State, Country (place of business)	Nature of Interest (check applicable)	
			Controlling	Intermediary
	BOGAN III, JM	Waco, TX United States	X	
	BOGAN, TW	Waco, TX United States	X	

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Lacy Key, and my date of birth is 09-05-1983.

My address is PO Box 21056 (street), Waco (city), Tx (state), 76702 (zip code), USA (country).

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

Executed in McLennan County, State of Texas, on the 4th day of Feb, 20 19.
(month) (year)

Lacy Key
Signature of authorized agent of contracting business entity
(Declarant)