

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:
 2023-1043254

Date Filed:
 07/07/2023

Date Acknowledged:

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

Abbott Laboratories Inc
 100 Abbott Park Rd, Abbott Park, IL 60064

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

Hidalgo County-Urban County Program

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.

5320-85-2500-5325-5789-UCP-GVG
 Diagnostics equipment and testing

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
Abbott Laboratories	100 Abbott Park Rd, Abbott Park, IL 60064	x	

5 Check only if there is NO Interested Party.

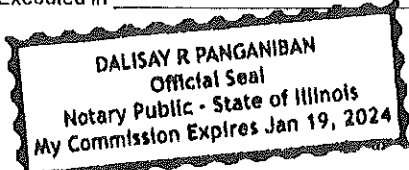
6 UNSWORN DECLARATION

My name is GEORGI TRUKOV, and my date of birth is 08/18/1976

My address is 100 ABBOTT PARK RD., ABBOTT PARK IL, 60030, USA.
(street) (city) (state) (zip code) (country)

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

Executed in LAKE County, State of IL, on the 15 day of August, 2023.
(month) (year)



[Handwritten Signature]
 Signature of authorized agent of contracting business entity (Declarant)

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1 of 1

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 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.

Abbott Diagnostics
 Lake Forest, IL United States

Certificate Number:
 2023-1043254

Date Filed:
 07/07/2023

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

Hidalgo County-Urban County Program

Date Acknowledged:
 08/30/2023

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.

5320-85-0500-5000-0000-00
 Diagnostics equipment and testing

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

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)