BEASLEY COMMUNITY VOLUNTEER FIRE DEPARTMENT

P.O. Box 129 Beasley, Texas 77417

Phone: 979-387-2412 Fax: 979-387-3093

Honorable Judge and Commissioners of Fort Bend County,

The Beasley Volunteer Fire Department is requesting to take ownership of a surplus vehicle. It is a 2012 Chevrolet Tahoe Unit R055 VIN#: 1GNLC2E07CR228206. It will be an addition to our fleet for a future fire station in the City of Kendleton.

Thanks for the consideration,

Dale Lindemann

Fire Chief

Beasley Volunteer Fire Department

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 | | |
| | Name of business entity filing form, and the city, state and country of the business entity's place of business. Beasley VFD Beasley, TX United States | | | Certificate Number: 2017-225255 Date Filed: 06/18/2017 Date Acknowledged: | | |
| 2 | ame of governmental entity or state agency that is a party to the contract for which the form is eing filed. ort Bend 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. 99999 Receive donated vehicles | | | | | |
| 4 | Name of Interested Party | City, State, Country (place of bu | te, Country (place of business) | | Nature of interest (check applicable) Controlling Intermediary | |
| | | | * | Controlling | intermediary | |
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| 5 Check only if there is NO Interested Party. | | | | | | |
| 6 | AFFIDAVIT SANDRA A ORTIZ My Commission Expires July 3. 2017 AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said 20 11 to certify which, witness my hand and seal of office. ACCOUNTY STAMP / SEAL ABOVE Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath | | | | | |
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