

Fort Bend County Parks and Recreation Community Use Request Form

COMMUNITY USE CRITERIA

Tax Exempt Entities which serve Fort Bend resident communities and can provide copies of their active 501(c)(3) tax-exempt designations are eligible to schedule and use community rooms and pavilions with use fees waived. Use shall be, up to a maximum of one use per month, during regular rental hours (Monday–Friday from 8:00 a.m. to 4:00 p.m.).

Schedules are subject to availability and management approval. Events/meetings must be booked at least 30 days out, and no more than 12 months out. Should significant set up be required, the County may require the entity requesting use to provide assistance necessary for room set up at the entity's own cost. The Authorized Representative for the entity must complete the FACILITY USE AGREEMENT & GUIDELINES prior to the Approval and must ensure that the event/meeting does not allow for more than 50 attendees.

Requests must be submitted by use of this Community Use Request Form, and will be reviewed/approved before any reservations are made. Staff will make every effort to notify applicant within five (5) business days of the determination, whether or not the request can be honored, and will follow-up with the appropriate rental documents. Questions regarding community Use Requests should be directed to the Parks Director at (832) 471-2583. Exceptions to the Community Use Criteria shall only be made by a waiver approved by Commissioners Court.

Entity requesting facility use: Julia F. Thompson, Inc.				
Authorized Representative Name, Title: Saki Indakwa				
Term of Office (if applicable): President				
Contact Information (Phone, Email Address):				
Organization Mailing Address: Missouri City, TX 77459				
Secondary Contact Name, Title:				
Is your organization a federally-designated 501(c)(3)? yes				

If so, please attach a copy of your designation certificate with this request

What is your organization's purpose? We provide scholarships for college students and support community nonprofits.

Do you provide direct services to the citizens of the County, and if so, what are they?

Yes, we provide direct services to the community through scholarships, charitable donations, and support for local programs that align with our mission. We also collaborate with other organizations to enhance our impact and serve those in need.

Has your entity used County Parks facilities previously, and if so, when and for what sorts of functions?

Yes, our entity has used county facilities before for various functions, including membership orientations, workshops, and our Youth Leadership Institute program.

Complete usage request chart on following page

Date & Times	Type of	Recurring?	Est. #	Room Preference &	Room	
Requested	Function	If so,	Attending	Equipment Required	Booked	Firmed-up
		frequency?			Tentatively	
1.3.22.25 3pm	Exercise	NIA	100	Gym		
2.				•		
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						

Staff Use Only:	
Approvals:	
X:	Date:
X:	Date:
Reservation agreement sent to client:	Date:

Form Approved by Commissioners Court on:



Texas Sales and Use Tax Resale Certificate

	The state of the s		· · · · · · · · · · · · · · · · · · ·		
Name of purchaser, firm or agency as shown on permit		Phone (Area code and n			
Julia F. Thompson Inc.		281	.450.0304		
Address (Street & number, P.O. Box or Route number) 5680 Highway 6, #332					
City, State, ZIP code					
Missouri City, TX 77459					
Texas Sales and Use Tax Permit Number (must contain 11 digits)					
1,7,6,0,5,9,4,2,5,8,4					
Out-of-state retailer's registration number or Federal Taxpayers Registry (RFC) nur	mber for retailers based in Mexico				
(Retailers based in	n Mexico must also provide a cop	ov of their Mexico regi	stration form to the seller.)		
		No. was a case of a section with the control of the			
I, the purchaser named above, claim the right to make items described below or on the attached order or invoi		or resale of the tax	able		
Seller:					
Street address:					
City, State, ZIP code:					
Description of items to be purchased on the attached order or invoice:					
Description of the type of business activity generally engaged in or type of items normally sold by the purchaser:					
	Management and the second of t				
The taxable items described above, or on the attached order or invoice, will be resold, rented or leased by me within the geographical limits of the United States of America, its territories and possessions or within the geographical limits of the United Mexican States, in their present form or attached to other taxable items to be sold. I understand that if I make any use of the items other than retention, demonstration or display while holding them for sale, lease or rental, I must pay sales tax on the items at the time of use based upon either the purchase price or the fair market rental value for the period of time used. I understand that it is a criminal offense to give a resale certificate to the seller for taxable items that I know, at the time of purchase, are purchased for use rather than for the purpose of resale, lease or rental, and depending on the amount of tax evaded, the offense may range from a Class C misdemeanor to a felony of the second degree.					
sign here	Title		Date		

This certificate should be furnished to the supplier.

Do <u>not</u> send the completed certificate to the Comptroller of Public Accounts.



Name of purchaser, firm or agency

Texas Sales and Use Tax Exemption Certification

This certificate does not require a number to be valid.

		Julia F. Thompson Inc.					
Address (Street & number, P.O. Box or Route number)	Phone (Are	a code and number)					
5680 Highway 6 #332		281.450.0304					
City, State, ZIP code							
Missouri City, TX 77459							
I the number of a party along the properties from	m neumant of color and use toyee	(for the purchase of tayable					
I, the purchaser named above, claim an exemption from		(10) the purchase of taxable					
items described below or on the attached order or invo	ice) irom.						
Seller:							
Street address:	City, State, ZIP code:						
Description of items to be numbered as an the attached as	dor or invoice:						
Description of items to be purchased or on the attached orc	iei oi ilivoice.						
Purchaser claims this exemption for the following reason:							
I understand that I will be liable for payment of all state and local sales or use taxes which may become due for failure to comply with							
the provisions of the Tax Code and/or all applicable law.							
I understand that it is a criminal offense to give an exemption certificate to the seller for taxable items that I know, at the time of purchase,							
will be used in a manner other than that expressed in this certificate, and depending on the amount of tax evaded, the offense may range							
from a Class C misdemeanor to a felony of the second degree.							
,							
Purchaser	Title	Date					
sign here							
nere /							

NOTE: This certificate cannot be issued for the purchase, lease, or rental of a motor vehicle.

THIS CERTIFICATE DOES NOT REQUIRE A NUMBER TO BE VALID.

Sales and Use Tax "Exemption Numbers" or "Tax Exempt" Numbers do not exist.

This certificate should be furnished to the supplier.

Do <u>not</u> send the completed certificate to the Comptroller of Public Accounts.