

FORT BEND COUNTY FY 2009
COMMISSIONERS COURT AGENDA REQUEST FORM
Return Completed Form by E-Mail to: Agenda Coordinator, County Judge's Office

Date Submitted: October 7, 2009	Submitted By: Laura Dougherty
Court Agenda Date: October 13, 2009	Department: Facilities Management & Planning
	Phone Number: 281-633-7017

SUMMARY OF ITEM:
Approve Invoice # 15052009-02 (Fire/EMS), in the amount of \$7,575.00, from Crain Zamora, for Program Management Services for Medic One.

RENEWAL AGREEMENT/APPOINTMENT YES NO
REVIEWED BY COUNTY ATTORNEY'S OFFICE: YES NO

List Supporting Documents Attached: **Invoice**

FINANCIAL SUMMARY:

BUDGETED ITEM: YES NO

FUNDING SOURCE: Accounting Unit: **732418888** Account Number:
Activity (If Applicable): **P418B-06FIREEMS**

DESCRIPTION OF LAWSON ACCOUNT: _____

Instructions to submit Agenda Request Form:

- Completely fill out agenda form: incomplete forms **will not** be processed.
- Agenda Request Forms should be submitted by e-mail, fax, or inter-office mail, and all back-up information must be provided by Wednesday at 2:00 p.m. to all those listed below.
- All original back-up must be received in the County Judge's Office by 2:00 p.m. on Wednesday.

DISTRIBUTION:

Original Form Submitted with back up to County Judge's Office (✓ when completed)
If by E-Mail to ospindon@co.fort-bend.tx.us If by Fax to (281) 341-8609

Distribute copies with back-up to all listed below. If by fax, send to numbers below:

<input checked="" type="checkbox"/> Auditor (281-341-3774)	<input checked="" type="checkbox"/> Comm. Pct. 1 (281-342-0587)
<input checked="" type="checkbox"/> Budget Officer (281-344-3954)	<input checked="" type="checkbox"/> Comm. Pct. 2 (281-403-8009)
<input checked="" type="checkbox"/> Facilities/Planning (281-633-7022)	<input checked="" type="checkbox"/> Comm. Pct. 3 (281-242-9060)
<input checked="" type="checkbox"/> Purchasing Agent (281-341-8642)	<input checked="" type="checkbox"/> Comm. Pct. 4 (281-980-9077)
<input checked="" type="checkbox"/> Information Technology (281-341-4526)	<input checked="" type="checkbox"/> County Clerk (281-341-8697)
<input type="checkbox"/> Other:	<input checked="" type="checkbox"/> County Atty (281-341-4557)

RECOMMENDATION / ACTION REQUESTED:

Special Handling Requested (specify): **Please Approve**

Fm 90981

Crain • Zamora, L.L.C.

2635 Miller Ranch Road
Pearland, Texas 77584
713.436.8727 (o) 713.436.8730 (f)

*OK to pay
Mr. Brady
10-07-09*

Invoice No. 15052009-02
(Fire/EMS)

INVOICE

Customer			
Name	Fort Bend County		
Address	1517 Eugene Heimann Circle #500		
City	Richmond	State TX	ZIP 77469
Attn	Mr. Don Brady		

Date	09/21/2009
Project	Fort Bend County
Rep	Brad Crain
Terms	30 calendar days

*PO # PC0473138
R# 80494*

Qty	Description	Unit Price	TOTAL
	Original Contract Amount	\$67,500.00	
	Reimbursables	\$5,000.00	
	Current Contract Amount	\$72,500.00	
	<u>Program Management Fees - FINAL BILLING</u> December 2008, January 2009, February 2009 <i>Billing/Payment Schedule Attached (Amended)</i>		
1	Fire Marshal & EMS Fee	\$4,500.00	\$4,500.00 ✓
-1	Fire Marshal & EMS Retainage (5%)	\$225.00	(\$225.00) ✓
1	Fire Marshal & EMS Retainage	\$3,300.00	\$3,300.00 ✓
	Subtotal		\$7,575.00 ✓
	TOTAL		\$7,575.00 ✓

Wayne

Office Use Only

Thank you for your business.