

All Contractors/Potential Contractors are required to fill out and submit this form.

Completion of this form designates signature authority for Contractor: Fort Bend County

The Contractor may: (1) designate additional signature authority by including the additional signature authority's name and title; or (2) verify that the signature below is the only signature authority designated for contracting with DFPS.

The Contractor understands that there is an ongoing duty to notify DFPS in writing of any change to signature authority during the term of the contract with DFPS. The Contractor verifies that the signature(s) below is a complete, true and correct representation of signature authority.

Robert Hebert
Printed Name
County Judge
Title of Authorized Representative
Fort Bend County
Legal Name of Contractor/Potential Contractor
Signature of Authorized Representative
Date
24185932
Contract or Procurement Number

The Designated Signature Authority as referenced above has authorized the following person(s) listed below to also approve and sign on the contract functions as indicated. Please note that both the printed name and signature is required for each authorized individual.

Table with 4 columns: Printed Name, Title, Function, Signature. Row 1: Robert Ed Sturdivant, County Auditor, Financial Officer, [Signature].

I certify that the person(s) indicated above are designated as "Authorized Official(s)" for the purpose stated and that the signatures are valid. I further understand that it is my responsibility to immediately notify the DFPS in writing of any changes to the above list.

Robert Hebert, County Judge
Printed or Typed Name & Title of Contract Signatory
Signature