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June 16, 2016

Fort Bend County  
Cheryl Krejci  
3743 School St  
Needville, TX 77461-8365

Re: Fort Bend County Bid 15-034 Term Contract for Mosquito Control Chemicals Machines

Cheryl,

Clarke Mosquito Control Products, Inc would like to renew contract 15-034 with Fort Bend County through September 30, 2016, under the same terms and conditions as the existing agreement.

Please let us know if you have any questions.

Thank you,

Doug Carroll  
Control Consultant

# 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**

**1 Name of business entity filing form, and the city, state and country of the business entity's place of business.**  
Clarke Mosquito Control Products, Inc  
St. Charles, IL United States

Certificate Number:  
2016-71869

Date Filed:  
06/16/2016

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

Date Acknowledged:

**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.**  
15-034  
mosquito control products

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 AFFIDAVIT** I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



*J. Gordon Anderson*  
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said I. Gordon Anderson, this the 16<sup>th</sup> day of June, 2016, to certify which, witness my hand and seal of office.

*Brenda A. Francis*      Brenda A. Francis      Executive Administrator  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

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FORM 1295

1 of 1

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 Clarke Mosquito Control Products, Inc  
 St. Charles, IL United States

Certificate Number:  
 2016-71869

Date Filed:  
 06/16/2016

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

Date Acknowledged:  
 06/28/2016

**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.**  
 15-034  
 mosquito control products

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 AFFIDAVIT** I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

\_\_\_\_\_  
 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
 Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath