



Vendor: Fort Bend County Social Services

Date: 05/12/2016

Amount: 1,000.00

INVOICE DATE	INVOICE NUMBER	INVOICE DESCRIPTION	INVOICE AMOUNT	DIST. ACCOUNT	DIST. AMOUNT
05/12/2016	2016	Back to school collaborat	1,000.00	008064	1,000.00

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND ON WHITE PAPER

**SUGAR GROVE CHURCH OF CHRIST**

11600 WEST AIRPORT BLVD.  
MEADOWS PLACE, TX 77477

FROST  
www.frostbank.com

5490

5490

DATE

AMOUNT

05/12/2016

\*\*\*\*\*1,000.00

ONE THOUSAND DOLLARS AND NO CENTS

PAY  
TO THE  
ORDER  
OF

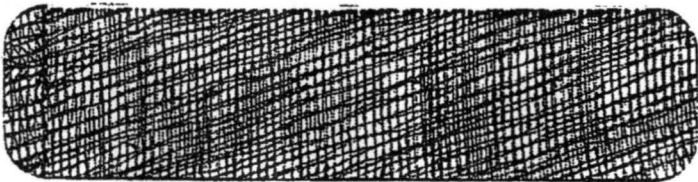
Fort Bend County Social Services  
301 Jackson St.  
Richmond TX 77469

*Cynthia A. Pender*

For:

SECURITY FEATURES INCLUDE DETAILS ON BACK

1100000930 50226466



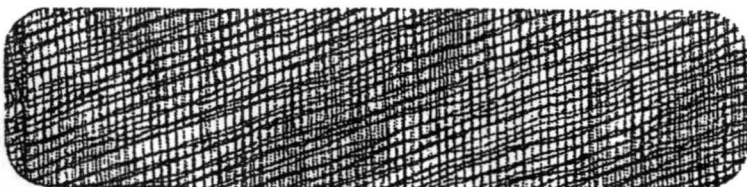
IN HOUSTON  
TX 773  
13 MAY '16  
PM 11



RECEIVED

MAY 16 2016

Per *[Signature]*



# 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.

Sugar Grove Church of Christ  
Meadows Place, TX United States

Certificate Number:  
2016-87819

Date Filed:  
07/20/2016

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 Social Services

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.

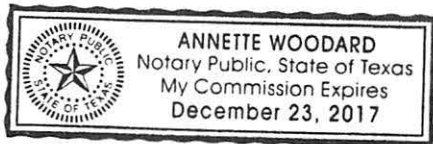
R645-BACKTOSCH – Donor – Back  
Donation

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.



*Cynthia A. Fancher*

Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Cynthia A. Fancher this the 20<sup>TH</sup> day of July, 2016, to certify which, witness my hand and seal of office.

*Annette Woodard*  
Signature of officer administering oath

Annette Woodard  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath

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**Certificate Number:**  
 2016-87819

**Date Filed:**  
 07/20/2016

**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 Social Services

**Date Acknowledged:**  
 08/02/2016

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 R645-BACKTOSCH – Donor – Back  
 Donation

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			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

REFERENCE NO.	DESCRIPTION	INVOICE DATE	INVOICE AMOUNT	DISCOUNT TAKEN	AMOUNT PAID
2016	Walk with Pride -S10E program 2016 Annual Isolation	6/1/16	250.00		250.00
CHECK DATE	CHECK NO.	PAYEE		DISCOUNTS TAKEN	CHECK AMOUNT
6/16/16	10213	Fort Bend County Social Services			\$250.00

SECURITY FEATURES INCLUDE TRUE WATERMARK PAPER, HEAT SENSITIVE ICON AND FOIL HOLOGRAM

**FRONTIER UTILITIES, LLC**  
 5120 WOODWAY DRIVE, SUITE 10015  
 HOUSTON, TX 77056  
 (866) 926-8192

**WELLS FARGO BANK, N.A.**  
 WWW.WELLSFARGO.COM

**10213**  
 FRAUDARMOR

Check Number: 10213

DATE  
 Jun 16, 2016  
 AMOUNT

\$250.00

Memo:

Two Hundred Fifty and 00/100 Dollars

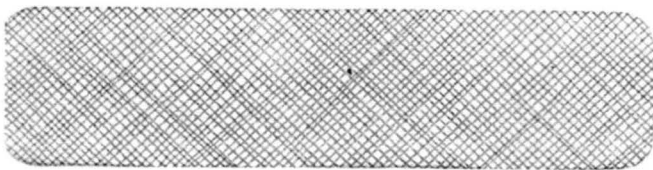
PAY TO THE ORDER OF:

Fort Bend County Social Services  
 301 Jackson Street  
 RICHMOND, TX 77469

VOID AFTER 90 DAYS



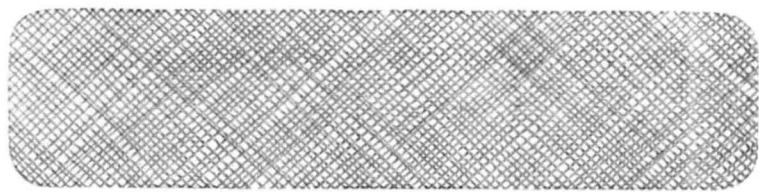
*Cynthia Morrow*  
 AUTHORIZED SIGNATURE



HOUSTON  
 TX 77056  
 17 JUN '16  
 PM 4 L



Attn: Anna Gonzales



**RECEIVED**  
 JUN 21 2016  
 Per \_\_\_\_\_

77469-310801





# CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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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.**

Frontier Utilities LLC  
Houston, TX United States

**Certificate Number:**  
2016-85950

**Date Filed:**  
07/18/2016

**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:**  
08/02/2016

**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.**

R645-SHOEPROG02  
Check Donation

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**

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\_\_\_\_\_  
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