



June 12, 2017

Cheryl Krejci, CPPB  
Senior Buyer  
Fort Bend County Purchasing  
301 Jackson Street, Suite 201  
Richmond, TX 77469

Dear Ms. Krejci:

Thank you for considering Dunbar Armored for your armored car service. Based upon the service specifications per Bid 17-007 Armored Car Service, we are pleased to submit the following proposal for your review:

1. Monday through Friday of each week, we will call on your locations listed below and pick-up sealed shipments containing bank deposits for delivery to Prosperity Bank:
  - County Clerk: Sienna Annex, 5855 Sienna Springs Way, Ste. 118 (MWF)
  - Tax Office: Sienna Annex, 5855 Sienna Springs Way, Ste. 101 (M-F)
2. Five days per week, we will pick-up from your bank sealed shipments of coin and currency, so called change orders, for delivery to your respective location. Delivery of change orders will be performed only in conjunction with the pick-up of deposit shipments.
3. Both of the above mentioned operations will be covered by our All-Risk armored car transit and storage insurance through International Insurance Brokers for your maximum liability of \$150,000 for your deposit and \$5,000 for your change order.
4. Our complete charge for the addition of these two (2) locations, including insurance, will be an additional \$549.91 per month. Increasing the current monthly amount of \$12,276.95 to \$12,826.86.

Sincerely,

Michael Isbell  
Account Executive

# 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.

Dunbar Armored, Inc  
Hunt Valley, MD United States

Certificate Number:

2017-220642

Date Filed:

06/08/2017

Date Acknowledged:

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

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.

Bid 17-007  
Armored Car Services

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.

KENNETH E. RUPERT  
NOTARY PUBLIC STATE OF MARYLAND  
My Commission Expires December 23, 2019

*Seth McElroy*  
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Seth McElroy, this the 8<sup>th</sup> day of June, 2017, to certify which, witness my hand and seal of office.

*Kenneth E. Rupert*  
Signature of officer administering oath

Kenneth E Rupert  
Printed name of officer administering oath

manager  
Title of officer administering oath

# 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

Certificate Number:  
2017-220642

Date Filed:  
06/08/2017

Date Acknowledged:  
06/28/2017

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Dunbar Armored, Inc  
Hunt Valley, MD United States

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

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.

Bid 17-007  
Armored Car Services

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