OFFICE OF COUNTY PURCHASING AGENT



Fort Bend County, Texas

Term Contract Renewal Form

Solicitation #: Bid 15-022

Title: Term Contract for Wrecker Services

Contracted Vendor: A & M Automotive

Mr. Mejorado,

Our contract with your company for the above referenced expires <u>September 30, 2017</u>. Contract provisions allow for renewal of this contract if mutually agreeable.

If your company wishes to renew this contract through <u>September 30, 2018</u> under the same terms and conditions, please complete the information below and return this form along with a Form 1295 by e-mail to <u>cheryl.krejci@fortbendcountytx.gov</u>. Purchasing will then take the matter before the Commissioner's Court of Fort Bend County for their consideration. Please respond to this email by <u>Tuesday</u>, <u>June 13, 2017, 5:00 PM</u>.

Yes, I agree to renewing our agreement with Fort Bend County under the same terms and conditions.

No, I do not wish to renew our agreement with Fort Bend County.

If Yes, please provide a Form 1295 along with this renewal form by replying to this email.

Effective January 1, 2016 all contracts executed by Commissioners Court, regardless of the dollar amount, will require completion of Form 1295 "Certificate of Interested Parties", per the new Government Code Statute §2252.908. All vendors submitting a response to a formal Bid, RFP, SOQ or any contracts, contract amendments, extensions or renewals are required to complete the Form 1295 online through the State of Texas Ethics Commission website. Please visit:

https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm.

On-line instructions:

Name of governmental entity is to read: Fort Bend County.

Identification number used by the governmental entity is: <u>B15-022</u>.

Description is to read: <u>Term Contract for Wrecker Services</u>.

After receiving the Form 1295 with the Certification Number and Date Filed, please print the form, have notarized and sign, then email the Form 1295 and this Term Contract Renewal Form to cheryl.krejci@fortbendcountytx.gov.

Signature of Authorized Représentative

6-13-17

Date

Abraham Mejorado Owner

Printed Name and Title of Authorized Representative

7-14-2017 Original sent to Norma Weaver, Purchasing dept.

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

of 1

| | | | | | 1011 | | | |
|---|---|--|--------|---|--------------|--|--|--|
| | 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. | | | Certificate Number: 2017-223104 | | | | |
| | &M Wrecker Service, LLC | | | 2017-223104 | | | | |
| | Rosenberg, TX United States | Date Filed: | | | | | | |
| 2 | Name of governmental entity or state agency that is a party to the contract for which the form is | | | 06/13/2017 | | | | |
| | being filed. | Data Ashmaniladandi | | | | | | |
| | Fort Bend County | | Date A | cknowledged: | | | | |
| | | <u></u> | | | | | | |
| 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. | | | | | | | |
| | B15-022 | | | | | | | |
| | Term Contract for Wrecker Services | | | | | | | |
| - | | | | Nature of interest | | | | |
| 4 | Name of Interested Party | City, State, Country (place of business) | | (check applicable) | | | | |
| | | | | Controlling | Intermediary | | | |
| М | ejorado, Abraham | Rosenberg, TX United States | | X | | | | |
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| 5 Check only if there is NO Interested Party. | | | | | | | | |
| 6 | 6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct. | | | | | | | |
| | NYDEA CRUZ Notary Public, State of Texas My Commission Expires November 20, 2019 Signature of authorized agent of contracting business entity | | | | | | | |
| - | AFFIX NOTARY STAMP / SEAL ABOVE | | | | | | | |
| | Sworn to and subscribed before me, by the said | | | | | | | |
| | | | | | | | | |

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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| 1 | me of business entity filing form, and the city, state and country of the business entity's place business. | | | Certificate Number: | | | | |
| | A&M Wrecker Service, LLC | r Service, LLC | | | 2017-223104 | | | |
| | Rosenberg, TX United States | | Date Filed: | | | | | |
| 2 | | e of governmental entity or state agency that is a party to the contract for which the form is | | | 06/13/2017 | | | |
| | being filed. Fort Bend County | | Date | Acknowledged | | | | |
| | For Bend County | | | 1/2017 | • | | | |
| 3 | rovide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a escription of the services, goods, or other property to be provided under the contract. | | | | | | | |
| | B15-022 | | | | | | | |
| | Term Contract for Wrecker Services | | | | | | | |
| 4 | | | \ | Nature of interest (check applicable) | | | | |
| | Name of Interested Party | City, State, Country (place of busin | , Country (place of business) | | Intermediary | | | |
| М | ejorado, Abraham | Rosenberg, TX United States | | Controlling | , memerinedia.y | | | |
| I¥ti | gorado, Abraham | Noscriberg, 1% Officed States | | | | | | |
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| 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 | | | | | | | |
| | | | | | | | | |
| | | , this the | | day of | · · · · · · · · · · · · · · · · · · · | | | |
| | 20, to certify which, witness my hand and seal of office. | | | | | | | |
| | Circumpture of officers administrative with | Drinted name of officer administrate | ida e 4 - | Minor administra | ing oath | | | |
| | Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath | | | | | | | |