



OFFICE OF COUNTY PURCHASING AGENT
Fort Bend County, Texas

Term Contract Renewal Form

Solicitation #: Bid 16-069

Title: Term Contract for Periodical Subscriptions

Contracted Vendor: WT Cox

Ms. Callison,

Our contract with your company for the above referenced expires March 31, 2018. Contract provisions allow for renewal of this contract if mutually agreeable.

If your company wishes to renew this contract through March 31, 2019 under the same terms and conditions, please complete the information below and return this form along with a Form 1295 by e-mail to cheryl.krejci@fortbendcountytexas.gov. Purchasing will then take the matter before the Commissioner's Court of Fort Bend County for their consideration. Please respond to this email by December 8, 2017, 1:00 PM.

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 new Form 1295 along with this renewal form by replying to this email. The Form provided last year is not acceptable.

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: B16-069.

Description is to read: Term Contract for Periodical Subscriptions.

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@fortbendcountytexas.gov.

Debra M Knox

12-1-2017

Signature of Authorized Representative

Date

Debra M. Knox, Director of Contract Administration

Printed Name and Title of Authorized Representative

**Fort Bend County Tabulation
Bid 16-069
Term Contract for Purchase of Periodical Subscriptions**

Term: through 31 March 2017

Awarded 4/5/16: WT Cox Information Services

Renewal Term: 1 April 2017 through 31 March 2018

Lawson # 12446

Company	Percent Discount Publishers List Price
W T Cox Information Services Shallotee NC	10%
EBSCO Industries Inc. Birmingham AL	6.50%
Avanti Enterprises, Inc. Oak Brook IL	Disqualified: Failed to provide required documentation

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.

WT Cox Information Services
 Shallotte, NC United States

Certificate Number:
 2017-289511

Date Filed:
 12/01/2017

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:

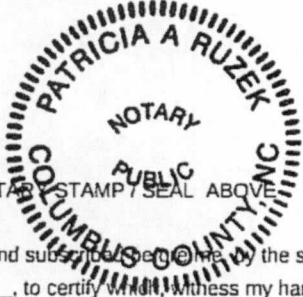
3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

Bid 16-069
 Term Contract for Periodical 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.



Debra M. Knox
 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP/ SEAL ABOVE

Sworn to and subscribed to before me by the said Authorized Agent, Debra M. Knox, this the 1st day of December, 2017, to certify which, witness my hand and seal of office.

Patricia A. Ruzek PATRICIA A RUZEK Notary Public
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

My commission expires: APRIL 27th, 2018

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.
WT Cox Information Services
Shalotte, NC United States

Certificate Number:
2017-289511

Date Filed:
12/01/2017

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:
12/19/2017

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 16-069
Term Contract for Periodical 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