

**FORT BEND COUNTY**  
**REQUEST FOR CHECK**

Date Requested: April 11, 2018

Check Needed By: ASAP

Fort Bend County P.O. No.:

Vendor: **Property Acquisition Services, LLC**

Address: 19855 Southwest Freeway, Suite 200  
Sugar Land, TX 77479  
Office (281) 343-7171

Project Location: Sansbury Road

**Payee: Stewart Title Company**

Payee's Address: 14100 Southwest Freeway, Suite 200  
Sugar Land, TX 77478

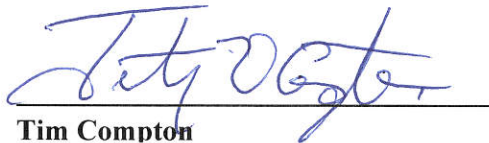
Payee's Tax ID/SS #: On File

Amount of Check: **\$848,305.20**

Description: Parcel 3- A tract of land containing 1.9331 acres (84,206 square feet) situated in the Joseph Kuykendahl League, A-49, Fort Bend County, Texas.

Comments: **PLEASE RETURN CHECK TO Tim Compton / PAS**

Requested By:

  
**Tim Compton**

# 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.**

Williams Way Partnership, LTD  
Galveston, TX United States

Certificate Number:  
2018-348563

Date Filed:  
05/03/2018

Date Acknowledged:  
05/22/2018

**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.**

GF#17157035954  
Sansbury Parcel 3

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 UNSWORN DECLARATION**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

\_\_\_\_\_  
Signature of authorized agent of contracting business entity  
(Declarant)