IN THE MATTER OF TRANSFERRING OF BUDGET SURPLUS OF FORT BEND COUNTY FOR THE YEAR 2018

On this the_	26	_day of_	June	2018	, the Commissioners'	Court, with	the followi	ng members being present	:	
			Robert E. Hebert Vincent Morales Grady Prestage Andy Meyers	-	County Judge Commissioner Precin Commissioner Precin Commissioner Precin	ct #2				
James Patterson -					Commissioner Precinct #4					
The followin	ıg proc	eedings v	vere had, to-writ,							
THAT WHE County; and	REAS	, theretof	ore, on Septembe	er 26, 2017,	the Court heard and a	pproved the	e budget for	the year 2018 for Fort Be	nd	
			cation, the Cominot increase the t			an existing	budget surp	lus to a budget of a similar	kind	
The followin	g trans	fers to sa	id budget are her	eby authori	zed:					
Department Name: Facilit				ies - CIP P	es - CIP Projects		nting Unit:	100409100	100409100	
TRANSFER	R TO:									
ACCOUNT NAME Budget AC Transfers				ACCOUNT NUMBER 100409100			\$	AMOUNT	75,000	
				90 Harrison	15900					
				TOTAL	TRANSFERRED T	O:	\$		75,000	
TRANSFER	R FRO	M:								
ACCOUNT Non-Dept Co				ACCO	OUNT NUMBER 100409100 66500	Section Reviews	\$	AMOUNT	75,000	
	·			The Address of the Ad						
							Manual Waller and Manual Manua			
		***************************************	· · · · · · · · · · · · · · · · · · ·	***************************************						
			Т	OTAL TR	ANSFERRED FRO	М:	\$		75,000	
EXPLANAT valves that co			Request to transfe			o replace th	e control pa	nel and elbows and check		
From Budget	t A/C v	vill be bu	dgeted in Project	P109-GMI	PUMP 100109888		M. 1900			
		$-\Lambda$	118		N American Control of					
Department I	Head:	1/2	WES	In		Date:		20-Jun-18		
			*** I	USE WHO	LE DOLLAR AMO	UNTS ON	L Y ***			
THE COUN	TY O	F FORT	RENDLINE.	II.R.	<i></i>		X	GL Transfer		
BY:			- convit)	wer	<i>y</i>		X	AC Transfer		
R	lobert	E. Hebei	t, County Judge	9						

CERTIFICATE OF INTERESTED PARTIES FORM 1295 1 of 1 OFFICE USE ONLY 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. **CERTIFICATION OF FILING** 1 Name of business entity filing form, and the city, state and country of the business entity's place Certificate Number: of business. 2018-371033 All Pump & Equipment Houston, TX United States Date Filed: 06/21/2018 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Date Acknowledged: Fort Bend County 06/26/2018 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. REPAIR STORM WATER LIFT STATION @ GEORGE MEMORIAL LIBRARY Nature of interest 4 Name of Interested Party City, State, Country (place of business) (check applicable) Controlling Intermediary Х FT MYERS, FL United States ISS MOTOR INDUSTRIES, INC. 5 Check only if there is NO Interested Party. **6 UNSWORN DECLARATION** My name is _____ ____, and my date of birth is _ My address is (city) (state) (zip code) (country) I declare under penalty of perjury that the foregoing is true and correct. Executed in _______ on the _____day of _____

Signature of authorized agent of contracting business entity (Declarant)