

Fairchild Volunteer Fire Department  
8715 Fairchilds Rd.  
Richmond, Texas 77469  
979-793-6676



To Whom It May Concern:

Fairchild Volunteer Fire Department is seeking the donation of the following items, which have been removed from active service from the Fort Bend County Sheriff's Office and placed at the purchasing office in Needville to go to auction.

<u>QTY</u>	<u>Year/Make/Model</u>	<u>Unit Number</u>	<u>VIN</u>
1	2013 Chevy/Tahoe	S054	

We understand there are no implied warranties for this equipment through the Fort Bend County Sheriff's Office and we accept this equipment in "As-Is Condition".

Thank you for your consideration of our request. I look forward to hearing from you.

Sincerely,

/s/ Joshua D. Shed

Joshua D. Shed  
Fairchild VFD Fire Chief  
Direct Line: 832-535-7062  
Email: josh.shed@yahoo.com

# 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.**

Fairchild Volunteer Fire Department  
Richmond , TX United States

Certificate Number:  
2018-368141

Date Filed:  
06/14/2018

**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

Date Acknowledged:  
06/26/2018

**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.**

99999  
County Surplus Items asking to be donated, 2013 Chevy Tahoe

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)