

**Flynt, Vicki**

**From:** Patty Werner <pwerner@classicchevysugarland.com>  
**Sent:** Thursday, November 29, 2018 2:39 PM  
**To:** Flynt, Vicki  
**Cc:** Jerry Parks  
**Subject:** RE: Chili Cookoff Proceeds Donation  
**Attachments:** Form 1295 Certificate 100444228 SIGNED.pdf

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Hi Vicki,

Yes ma'am, I do recall. ☺ Please see the attached information. I am having Jerry help me draft a formal letter like we did last year. But here are the numbers we are working with.

20% of \$50,166 General Fund Total plus Sponsor and Raffle Sales

100 Club	\$ 500.00		\$ 500.00
Behind the Badge	\$1,588.87	\$ 1,090.00	\$2,678.87
Sheriff's Office	\$1,588.87	\$ 0.00	\$1,588.87
Precinct 1	\$1,588.87	\$ 2385.00	\$3,973.87
Precinct 2	\$1,588.87	\$ 0.00	\$1,588.87
Precinct 3	\$1,588.87	\$ 0.00	\$1,588.87
Precinct 4	\$1,588.87	\$ 734.00	\$2,322.87
		Sub Total	<u>\$14,242.22</u>

I sent this to Debbie Tiemann and Shelli Beard as well. Please let me know if you need anything further.

Thank you!

**Patty Werner**  
**Human Resources, Payroll**  
**Classic Chevrolet Sugar Land**  
**13115 Southwest Freeway**  
**Sugar Land, Texas 77478**  
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*Relax... and enjoy the difference!*

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**From:** Flynt, Vicki [<mailto:Vicki.Flynt@fortbendcountytexas.gov>]  
**Sent:** Wednesday, November 28, 2018 1:57 PM

# 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.**  
 CLASSIC CHEVROLET SUGAR LAND  
 SUGAR LAND, TX United States

**Certificate Number:**  
 2018-429257

**Date Filed:**  
 11/29/2018

**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:**  
 12/11/2018

**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.**  
 N/A  
 CONTRIBUTIONS TO LOCAL AGENCIES FROM CHILI COOKOFF

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)