

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

Date Requested: November 26, 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: South Post Oak Blvd

**Payee: Fort Bend Title, LLC**

Payee's Address: 407 Julie Rivers Drive  
Sugar Land, TX 77478

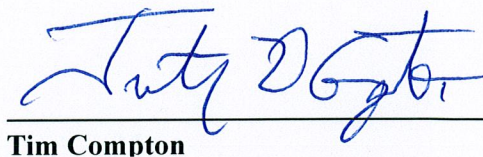
Payee's Tax ID/SS #: On File

Amount of Check: **\$40,604.50**

Description: Parcel 27- A certain 0.1416 (6,166 sf) acre tract of land situated in the Thomas Gleason Survey, Abstract 184, and out of Tract 597 of Magnolia Place Subdivision, an addition to the City of Fresno, 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.**

Iglesia Principe De Paz-Fresno  
 Fort Bend, TX United States

**Certificate Number:**  
 2018-427532

**Date Filed:**  
 11/21/2018

**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.**

File No.: 15718SPO027  
 South Post Oak Blvd Parcel 27

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)