



**OFFICE OF COUNTY PURCHASING AGENT**

Fort Bend County, Texas

18D

**Term Contract Renewal Form**

Solicitation #: Bid 19-053

Title: Term Contract for Tax Statement Processing

Contracted Vendor: Information Management Solutions, LLC

Mr. Sy Green,

Our contract with your company for the above referenced expires May 31, 2020. Contract provisions allow for renewal of this contract if mutually agreeable.

If your company wishes to renew this contract through May 31, 2021 under the same terms and conditions, please complete the information below and return this form along with a Form 1295 by e-mail to cheryl.krejci@fortbendcountytexas.gov . Purchasing will then take the matter before the Commissioner's Court of Fort Bend County for their consideration. Please respond to this email by 5:00 pm, Wednesday, April 29, 2020.

Yes, I agree to renewing our agreement with Fort Bend County under the same terms and conditions.

No, I do not wish to renew our agreement with Fort Bend County.

If Yes, please provide a new Form 1295 along with this renewal form by replying to this email. The Form 1295 must be new; previous 1295s are not permitted.

Effective January 1, 2016 all contracts executed by Commissioners Court, regardless of the dollar amount, will require completion of Form 1295 "Certificate of Interested Parties", per the new Government Code Statute §2252.908. All vendors submitting a response to a formal Bid, RFP, SOQ or any contracts, contract amendments, extensions or renewals are required to complete the Form 1295 online through the State of Texas Ethics Commission website. Please visit:

[https://www.ethics.state.tx.us/whatsnew/elf\\_info\\_form1295.htm](https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm).

**On-line instructions:**

Name of governmental entity is to read: Fort Bend County .

Identification number used by the governmental entity is: B19-053 .

Description is to read: Tax Statement Processing .

After receiving the Form 1295 with a new Certification Number and Date Filed, please print the form and complete box 6, sign, then email the Form 1295 and this signed Term Contract Renewal Form to cheryl.krejci@fortbendcountytexas.gov. If your company is publicly traded you are not required to complete this form.

Sy Green \_\_\_\_\_ 4/27/2020  
Signature of Authorized Representative Date

Sy Green General Manager  
Printed Name and Title of Authorized Representative

**Fort Bend County Tabulation  
 BID 19-053  
 Term Contract for Tax Statement Processing**

**Term: 1 June 2019 through 31 May 2020**

**Awarded 4/23/19: Information Management Solutions, LLC**

**Lawson Number 13833**

Item Description	Information Management Solutions San Antonio, TX	Perigrine Services Inc. Monroe, LA	QuestMark Information Management Houston, TX	Salter Elite Consulting Houston, TX	VariVerge Amarillo, TX	Zytron, Inc. Houston, TX
	<b>Form 1295</b>					
	Yes					
Design and Print 8-1/2" x 11" Statements, price per each	\$ 0.0700	Disqualified: Did not include required quantities of comparable experience with references, references not provided on required form, and did not provide required samples.	Disqualified: Did not include required quantities of comparable experience with references.	Disqualified: No prior experience provided as required.	Disqualified: Did not provide required samples.	Disqualified: Did not include required quantities of comparable experience with references and did not provide required samples.
Design and Print 8-1/2" x 11" Reminder Statements, price per each	\$ 0.0500					
Design and Print 8-1/2" x 11" Duplex Insert, price per each	\$ 0.0300					
Print 8-1/2" x 11" over 65 Letter, price per each	\$ 0.0200					
Print 8-1/2" x 11" over 65 Letter Duplex, price per each	\$ 0.0300					
#10 Window Envelope, price per each	\$ 0.0220					
#9 Window Envelope, price per each	\$ 0.0240					
9" x 12" Envelope, price per each	\$ 0.5000					
Individual Indexed PDF file, price per each	\$ 0.0001					
Estimated Annual Total:	\$ 35,057.50					

# 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.**  
 Information Management Solutions, L.L.C.  
 San Antonio, Texas, TX United States

**Certificate Number:**  
 2020-617195

**Date Filed:**  
 05/08/2020

**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:**  
 05/26/2020

**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.**  
 Bid 19-053  
 Tax Statement Processing

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)