

**From:** [The George Foundation](#)  
**To:** [County Judge](#)  
**Cc:** [FBC Judge](#); [gcmahan@thegeorgefoundation.org](mailto:gcmahan@thegeorgefoundation.org)  
**Subject:** Grant Amendment Decision  
**Date:** Wednesday, June 24, 2020 9:08:34 PM

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Dear Frances:

The George Foundation has reviewed Fort Bend County's grant amendment request. Your request has been approved and the following changes have been made. All other grant terms remain intact as written in the original Grant Contract.

Review Date: 06/23/2020

Grant Reference #/Name: (2020-0020) In support of the Fort Bend County 2020 Census Amplification Program

Revised Terms:

- Extended grant timeframe to 10/31/2020.
- Revised Grant Report due date to 11/30/2020.
- Acknowledged re-allocations of funds within project budget due to changes in project strategy, given the current pandemic environment.

Please feel free to contact me with any questions.

Sincerely,  
Quynh-Anh T. McMahan, MSW  
Senior Program Officer  
[gcmahan@thegeorgefoundation.org](mailto:gcmahan@thegeorgefoundation.org)  
281.342.6109 x 115

# 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**

**Certificate Number:**  
2020-641046

**Date Filed:**  
07/07/2020

**Date Acknowledged:**  
07/13/2020

**1 Name of business entity filing form, and the city, state and country of the business entity's place of business.**  
The George Foundation  
Richmond, TX United States

**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

**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.**  
2020 Census Grant  
Grant in support of the Fort Bend County 2020 Census Amplification Program (amended)

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Ewbank, Stephen	Richmond, TX United States	X	
	Magee, Mark	Richmond, TX United States	X	
	Mefford, Ruthanne	Richmond, TX United States	X	
	Condrey, Jim	Richmond, TX United States	X	
	Null, John	Richmond, TX United States	X	

**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)