

FORT BEND COUNTY
REQUEST FOR CHECK

Date Requested: June 18, 2020

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: Madden Road Parcel 1

Payee: Fort Bend Title

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

Payee's Tax ID/SS #: On File

Amount of Check: **\$30,363.00**

Description: 0.1292 acres in the Andrew M. Clopper Survey, A152

Comments:

Requested By:



KIMBERLY ROTH

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.

West Realty, LLC
 Sugar Land, TX United States

Certificate Number:
 2020-633986

Date Filed:
 06/18/2020

Date Acknowledged:
 07/29/2020

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

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.

Madden Road Parcel 1
 0.1292 acre tract of land located out of the Andrew M. Clopper Survey, Abstract 152, Fort Bend County, Texas

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Polasek, Sue	Sugar Land, TX United States	X	
	Polasek, Jerry	Sugar Land, 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)