



601 Commercial Drive  
Buda, TX 78610

45D

# Estimate

Date	Estimate #
8/27/2020	29812

Name / Address
Fort Bend County Auditor 301 Jackson St. Richmond, TX. 77469

Ship To
Fort Bend County Road & Bridge 201 Payne Ln. Crabb, TX 77469

P.O. No.	Terms	Rep
	Net 30	VB

Qty	Item	Description	U/M	Rate	Total
4.00	41027 Wa...	BUYBOARD CONTRACT # 608-20 WANCO Message Board -3 LINE, Full Size - Trailer Mounted - 4 battery WTLMB(A)  FREE FREIGHT INCLUDED	ea	17,250.00	69,000.00

Signature _____	<b>Total</b>	\$69,000.00
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Phone #	Fax #	E-mail	Web Site
5124376499	512-444-0796	accounting@dobiesupply.com	www.dobiesupply.com

# 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.**  
 Dobie Supply, LLC.  
 Buda, TX United States

**Certificate Number:**  
 2020-679966

**Date Filed:**  
 10/19/2020

**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:**  
 10/27/2020

**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.**  
 Vendor 28486  
 WANCO Message Boards

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)