



OFFICE OF COUNTY PURCHASING AGENT  
Fort Bend County, Texas

**Term Contract Renewal Form**

Solicitation #: Bid 19-059

Title: Term Contract for Licensed Master Court Interpreter Services for Juveniles

Contracted Vendor: Manuel Calvillo

Mr. Manuel Calvillo,

Our contract with your company for the above referenced expires March 31, 2021. Contract provisions allow for renewal of this contract if mutually agreeable.

If your company wishes to renew this contract through March 31, 2022 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](mailto: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 12:00 pm, Wednesday, December 9, 2020.

X  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: B19-059 .

Description is to read: Licensed Master Court Interpreter Services for Juveniles.

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](mailto:cheryl.krejci@fortbendcountytexas.gov). If your company is publicly traded you are not required to complete this form.

12-08-2020

Signature of Authorized Representative

Date

Manuel Calvillo / Owner

Printed Name and Title of Authorized Representative

01/08/2021 Original (E) sent to Jessica Carabajal, Purchasing dept.

**Fort Bend County Tabulation  
 Bid 19-059  
 Licensed Master Court Interpreter Services for Juveniles**

**Term: through 31 March 2020**

**Awarded 5/28/19: Manuel Calvillo**

**Renewal Term Approved 1/14/20: April 1, 2020 through March 31, 2021**

<b>Interpreter Services</b>	<b>Manuel Calvillo, Katy, TX</b>	
	<b>Form 1295</b>	
	<b>Yes</b>	
	<b>Bid Price per Hour</b>	<b>Bid Price per Hour After Minimum Hours</b>
	<b>Lawson Numbers</b>	
	<b>13852</b>	<b>13853</b>
Mondays, 9:00 AM – 12:00 PM and 1:30 PM – 4:30 PM (six (6) hour minimum)	\$100.00	\$100.00
Wednesdays, 1:00 PM – 3:00 PM (two (2) hour minimum)	\$100.00	\$100.00
Thursdays, 9:00 AM – 11:00 AM (two (2) hour minimum)	\$100.00	\$100.00
Languages Interpreted: Spanish and English		

MasterWord Services, Inc. - Disqualified: Did not provide required copy of Master Court Interpreter License.

Visual Language Professionals, LLC - Disqualified: Did not provide required proof of insurance.

# 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:  
2020-696802

Date Filed:  
12/08/2020

Date Acknowledged:  
01/05/2021

**1 Name of business entity filing form, and the city, state and country of the business entity's place of business.**  
Manuel Calvillo  
Katy, 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.**  
B19-059  
Licensed Master Court Interpreter Services for Juveniles

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)