



The Honorable KP George  
County Judge

## COUNTY JUDGE

Fort Bend County, Texas

(281) 341-8608  
Fax (832) 471-1858

January 20, 2021

Christ United Methodist Church  
3300 Austin Parkway  
Sugar Land, Texas 77479

Dear Christ United Methodist Church,

During these unprecedented times, I am grateful to see our businesses and community members come together and support those most in need. Thank you, Christ United Methodist Church for your generous donation of **\$1,500** to Fort Bend County to **“Adopt a Family” Fort Bend**. The items donated, will be distributed to designated family and will utilized for the appropriate use. Monetary funds donated will be used towards food, housing and utility for families in need. It’s relationships like these that demonstrate how we as a community can come together, even in our most tested times, and prove how strong Fort Bend County is, and so I thank you. I thank you for all that you do, please continue to support your community, as you are greatly appreciated.

If you need anything further, please do not hesitate to reach out to our office at 281-341-8608 or email us at [FBC.Judge@fortbendcountytexas.com](mailto:FBC.Judge@fortbendcountytexas.com).

Sincerely,

A handwritten signature in black ink, appearing to read "K George", with a long horizontal flourish extending to the right.

KP George  
Fort Bend County Judge

# 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:**  
 2021-708037

**Date Filed:**  
 01/20/2021

**Date Acknowledged:**  
 01/26/2021

**1 Name of business entity filing form, and the city, state and country of the business entity's place of business.**  
 Christ United Methodist Church  
 Sugar Land, 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.**  
 Donation  
 Donation to Adopt-A-Family program

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)