



# OFFICE OF COUNTY PURCHASING AGENT

Fort Bend County, Texas

## Term Contract Renewal Form

Solicitation #: Bid 21-009

Title: Term Contract for Newspaper Publications of Legal Notices

Contracted Vendor: Hartman Newspaper, L.P. dba Fort Bend Herald

Mr. Hartman,

Our contract with your company for the above referenced expires September 30, 2021. Contract provisions allow for renewal of this contract if mutually agreeable.

If your company wishes to renew this contract through September 30, 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 5:00 pm, Friday, June 11, 2021.

☒ 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/filinginfo/1295/>.

On-line instructions:

Name of governmental entity is to read: Fort Bend County.

Identification number used by the governmental entity is: B21-009.

Description is to read: Newspaper Publications of Legal Notices.

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.

6/15/21

Signature of Authorized Representative

Date

LEE HARTMAN / GENERAL MANAGER / FORT BEND HERALD

Printed Name and Title of Authorized Representative

**Fort Bend County Tabulation**  
**BID 21-009**  
**Term Contract for Triweekly Newspaper Publication of Legal Notices**

**Term: October 1, 2020 through September 30, 2021**

**Awarded 09/22/20: Hartman Newspapers, L.P. dba The Fort Bend Herald**

<b>Vendor</b>	<b>Triweekly Paper Price per Column Inch</b>  <b>Lawson Number 12647</b>	<b>Did vendor submit required Statement of Ownership?</b>	<b>Did vendor submit required US Postal Service Authorization for Second-Class Mail Privileges?</b>	<b>Did vendor submit required Circulation Data Audit OR last 3 US Postal Service Form 3541-1?</b>	<b>Form 1295</b>
Fort Bend Herald Rosenberg, TX	\$9.00	Yes	Yes	Yes - 3541-1	Yes

# 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.**

Fort Bend Herald  
Rosenberg, TX United States

**Certificate Number:**  
2021-766489

**Date Filed:**  
06/15/2021

**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:**  
08/24/2021

**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.**

B21-009  
Newspaper Publications of Legal Notices

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)