

Fort Bend County, Texas

Term Contract Renewal Form

Solicitation #: Bid 21-005

Title: Term Contract for Newspaper Publications of Legal Notices

Contracted Vendor: The Fort Bend Independent, LLC

Mr. Kumar,

Our contract with your company for the above referenced expires September 30, 2022. Contract provisions allow for renewal of this contract if mutually agreeable.

If your company wishes to renew this contract through September 30, 2023 under the same terms and conditions, please complete the information below and return this form along with a Form 1295 by ebrooke.lindemann@fortbendcountytx.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, July 29, 2022.

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/filinginfo/1295/.

On-line instructions:

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

Identification number used by the governmental entity is: B21-005.

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 brooke.lindemann@fortbendcountytx.gov. If your company is publicly traded you are not required to complete this form.

Seshadri Kumar DN: cn=Seshadri Kumar, o=Fort Bend Independent, ou, email=editor@fbindependent.com, c=US

Signature of Authorized Representative Date: 2022.07.26 22:14:13 -05:00

Digitally signed by Seshadri Kumar

July 26, 2022

Date

Seshadri Kumar, Publisher

Printed Name and Title of Authorized Representative

08/09/2022 Original (e) received from Krystle Sanchez, Purchasing dept.

Fort Bend County Tabulation BID 21-005 Term Contract for Newspaper Publication of Legal Notices

Term: October 1, 2020 through September 30, 2021

Awarded 09/01/20: Fort Bend Independent (for weekly)

Renewal Term Approved 8/24/21: October 1, 2021 through September 30, 2022

Vendor	Triweekly Paper Price per Column Inch Lawson Number	Weekly Paper Price per Column Inch Lawson Number 14264	Did vendor submit required Statement of Ownership?	Did vendor submit required US Postal Service Authorization for Second-Class Mail Privileges?	Did vendor submit required Circulation Data Audit OR last 3 US Postal Service Form 3541-1?	Form 1295
Fort Bend Independent	No Bid	\$4.25	Yes	Yes	Yes - 3541-1	Yes
Stafford						

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.	CE	OFFICE USE ONLY CERTIFICATION OF FILING							
1	Name of business entity filing form, and the city, state and count of business.		Certificate Number: 2022-914999							
	Fort Bend Independent									
	Sugar Land, TX United States	·								
2		07/2	07/26/2022							
	being filed.		Date Acknowledged:							
	Fort Bend County		08/09/2022							
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.									
	B 21-005									
	Newspaper publication of legal notices									
4				Nature of interest						
	Name of Interested Party	City, State, Country (place of busin		(check ap						
				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 correc	xt.								
	Executed inCounty		the	day of	20					
		,, 5.5.6 5.		(month)	(year)					
	Signature of authorized agent of contracting business entity (Declarant)									