

**SUPPLEMENTAL AGREEMENT NO. 7
TO
AGREEMENT OF JANUARY 24, 2017
FOR VIOLATIONS PROCESSING SERVICES AGREEMENT**

THIS SUPPLEMENTAL AGREEMENT is made and entered into on October 17, 2022, and modifies the VIOLATION PROCESSING SERVICES AGREEMENT dated January 24, 2017 (the "Agreement") by and between the Fort Bend Grand Parkway Toll Road Authority, a Texas Local Government Corporation (the "Authority"), and SWC Group, LP a Texas limited partnership (herein called "SWC").

The Agreement is hereby modified as follows:

1. Section 3.01. Term is replaced with the following:

It is understood and agreed that this Agreement is for a two-year term beginning October 1, 2022. The Authority has the option to extend the Agreement for up to three one-year terms.

2. The Authority and SWC approve a revised Compensation for Services and Payment Schedule shown on the attached Exhibit E, which replaces the prior Exhibit E.

This Supplemental Agreement does not alter, modify, or otherwise change any part of the Agreement, except as specifically stated in this Supplemental Agreement.

[Remainder of page intentionally left blank.]

Supplemental Agreement No. 7
To Agreement of January 24, 2017

IN WITNESS WHEREOF, this Supplemental Agreement is hereby executed as of the date first set forth above.

FORT BEND GRAND PARKWAY TOLL ROAD
AUTHORITY, a local government Texas corporation

By: *Bobbie Tallas*

Name: Bobbie Tallas

Title: Vice Chairman

SWC GROUP, L.P., a Texas limited partnership
by SWC GP, LLC
a Texas Limited Liability Company, its general partner

By: *Jeff Hazard*

Name: Jeff Hazard

Title: President, COO

EFFECTIVE DATE

THIS AGREEMENT IS EFFECTIVE ON THE DATE IT IS APPROVED BY THE FORT BEND COUNTY COMMISSIONERS COURT, AND IF NOT SO APPROVED SHALL BE NULL AND VOID.

DATE OF COMMISSIONERS COURT APPROVAL: _____

AGENDA ITEM NO.: _____

Exhibit E
(Revised October 12, 2022)

CHANGES TO OPERATIONAL PAYMENTS

FIXED FEES

Monthly Fixed Fee for Violations Processing \$36,478

Additional Monthly Fixed Fee of \$18,832 (\$4,708 per additional for 4 agents)

Additional Monthly Fixed Fee for IT Services of \$2,890 (18 hours per month)

VARIABLE FEES

Monthly charges also include per item costs for the following items processed by SWC in a given month.

- | | |
|----------------------------|-------------------------------------|
| 1. Toll Violation notice | \$0.2435 + current standard postage |
| 2. Court Package | \$10.00 per court package delivered |
| 3. Skip Tracing | \$0.09 per skip trace |
| 4. Image Review | \$0.047277 per transaction reviewed |
| 5. Phone Skip Trace | \$0.100800 per successful hit |
| 6. Landline Voicemail | \$0.0357 per minute |
| 7. Email | \$0.14 per email |
| 8. Out of State DMV lookup | \$1.05 per successful hit |
| 9. MMS with Notice | \$0.15 per MMS with Notice |
| 10. SMS | \$0.0455 per SMS |

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:
2022-943584

Date Filed:
10/12/2022

Date Acknowledged:
10/18/2022

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

SWCGroup
Carrollton, 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.

Grand Parkway Toll Road Authority

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.

4834-8581-1006
Violation Processing Services

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)