

Project Management Services for HUD CDBG-CV Public Facility Improvements, Public Services, and Public Safety Projects

Fort Bend County, Texas

SECTION 1 – NOTICE & PURPOSE

Fort Bend County (“County”) invites sealed proposals from qualified firms (“Proposer” or “Consultant”) to provide **project management, compliance, and technical assistance services** for **HUD CDBG-CV** activities limited to:

1. **Public Facility Improvements**
2. **Public Services**
3. **Public Safety Projects**

The County seeks a Consultant with demonstrated experience in **CDBG/CDBG-CV** program delivery, federal grants management, compliance, procurement support, subrecipient monitoring, IDIS, environmental review coordination, Section 3, and (when applicable) labor standards oversight.

SECTION 2 – BACKGROUND

Fort Bend County receives **CDBG-CV** funds under the CARES Act to **prevent, prepare for, and respond to COVID-19**. The County must deliver eligible, timely projects with strong internal control, accurate IDIS reporting, and audit readiness. The Consultant will assist County departments, subrecipients, and contractors to plan, implement, monitor, and close projects, maintaining full compliance with federal and County requirements.

SECTION 3 – SCOPE OF WORK (SOW)

A. Project Initiation & Planning

1. Conduct kickoff and review scope, objectives, COVID-19 tieback, stakeholders, risks, and success criteria.
2. Develop **Project Management Plan (PMP)** (schedule, budget framework, resourcing, communication, risk, quality, change control).
3. Create **Compliance Matrix** mapping applicable requirements for each activity type.
4. Build **Risk Register** and mitigation strategies (construction delays, procurement risks, subrecipient capacity, supply chain).

5. Draft **Stakeholder Engagement Plan** (County departments, subrecipients, contractors, auditors).

Deliverables: PMP, Compliance Matrix, Risk Register, Engagement Plan.

B. Eligibility, National Objective & Compliance

1. Confirm eligibility under **24 CFR 570.201–.204**:
 - **Public Facility Improvements:** 570.201(c)
 - **Public Services:** 570.201(e)
 - **Public Safety Projects:** typically 570.201(e) or 570.201(c), depending on the activity
2. Document **National Objective** (Low/Moderate Income (LMI) Benefit or Urgent Need) with supporting data.
3. Implement **Duplication of Benefits (DOB)** policies and testing consistent with federal guidance; collect attestations and cross-checks.
4. Ensure **COVID-19 tieback** is explicit and documented for all activities.
5. Perform **cost reasonableness** assessments; prepare Independent Cost Estimates (ICEs) for facility and safety projects.

Deliverables: Eligibility & National Objective worksheets; DOB policy & test templates; ICEs; tieback documentation.

C. Environmental Review (24 CFR Part 58)

(Primarily for facility improvements and certain public safety activities)

1. Determine level of review: **Exempt, CENST, CEST, or FONSI.**
2. Prepare complete **Environmental Review Record (ERR)** with supporting documentation.
3. Publish required notices and manage comment periods (if applicable).
4. Integrate environmental mitigation/conditions into designs and contracts.
5. Assist County with **Authority to Use Grant Funds (AUGF)**, when required.

Deliverables: ERR; publication documentation; clearance records.

D. Procurement & Contracting Support (2 CFR 200.317–.327)

1. Develop **Procurement Plan** tailored to project types and County policy.
2. Draft solicitations (IFB/RFP/RFQ) for construction/renovation, A/E services, service providers, and equipment.

3. Include required **federal clauses** and **Section 3** language; ensure conflict-of-interest safeguards.
4. Support evaluations, scoring, award documentation, and negotiations.
5. Establish **contract administration** procedures (change orders, performance, deliverables, invoicing).

Deliverables: Procurement Plan; solicitation packages; evaluation memos; award files; contract admin procedures.

E. Construction & Facility Project Oversight

(For Public Facility Improvements and eligible Public Safety projects)

1. Coordinate contractor mobilization and progress meetings.
2. Conduct site visits; track schedule, budget, and quality.
3. Review **pay applications** and backup; validate quantities and progress.
4. Monitor **Davis-Bacon** labor standards when applicable (wage decisions, payrolls, interviews, enforcement).
5. Verify ADA/Section 504 compliance and environmental conditions.

Deliverables: Oversight logs; site reports; meeting minutes; pay app reviews; labor standards file (if applicable).

F. Public Services & Public Safety Program Administration

(For programmatic service delivery activities)

1. Conduct **pre-award assessments** for subrecipients (capacity, controls, eligibility).
2. Define scopes, budgets, **performance metrics**, and reporting templates.
3. Provide **technical assistance** on eligibility, allowable costs, documentation, and national objective compliance.
4. Monitor service delivery and beneficiary documentation; validate outcomes.
5. Maintain **audit-ready files** and corrective action tracking.

Deliverables: Assessment reports; program design docs; monitoring checklists; performance dashboards.

G. Financial Management & IDIS

1. Set up activities in **IDIS** with CV flags, narratives, and accomplishment frameworks.

2. Prepare **drawdown packages** and supporting documentation.
3. Reconcile IDIS with County financial systems; track obligations/expenditures.
4. Maintain **financial controls SOP** and records for audit/HUD monitoring.
5. Support CAPER inputs (CV components) and timeliness compliance.

Deliverables: IDIS setup; draw packages; reconciliations; financial controls SOP; expenditure/timeliness reports.

H. Monitoring & Compliance

1. Develop risk-based **Monitoring Plan** covering subrecipients/contractors.
2. Conduct **desk reviews** and **onsite** monitoring (as applicable).
3. Document findings, **corrective actions**, and resolutions.
4. Track compliance with **Section 3**, civil rights, ADA/504, and nondiscrimination.

Deliverables: Monitoring Plan; monitoring reports; corrective action logs; compliance registers.

I. Reporting & Closeout

1. Provide **monthly status reports** and issue/risk logs.
2. Assist with **quarterly IDIS accomplishments** and narratives.
3. Prepare **closeout packages** (final invoices, beneficiary verification, inventory disposition if any).
4. Deliver **final report** with lessons learned and compliance summary.

Deliverables: Monthly reports; quarterly IDIS inputs; closeout documentation; final report.

SECTION 4 – MINIMUM QUALIFICATIONS

Proposers must demonstrate:

- At least **3 years** of direct experience managing **CDBG or CDBG-CV** projects for public entities.
- Staff with expertise in **IDIS, environmental review (Part 58), Section 3 (Part 75), Uniform Guidance (2 CFR 200)**, procurement, and monitoring.
- Experience administering **public facility improvements** and **public services** under HUD grants.
- Ability to provide services within Fort Bend County and to coordinate with County departments and subrecipients.

SECTION 5 – QUESTIONS & ADDENDA

- All questions must be submitted by email to the **County Contact** by the deadline.
 - Answers will be posted via **Addendum**.
 - Proposers must acknowledge all addenda in their submission.
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SECTION 6 – SUBMISSION INSTRUCTIONS

- **Format:** One (1) **book marked, PDF** electronic submission via CommunityDevelopment@fortbendcountytexas.gov.
 - **Labeling:** RFP No.[RFP-CD-2026-001], Proposer Name, “Project Management Services for HUD CDBG-CV.”
 - **Submission Deadline:** June 29, 2026, by 5:00pm. Late proposals will not be accepted.
 - **Validity:** Proposals must remain valid for **120 days** from due date.
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SECTION 7 – PROPOSAL CONTENT & ORDER

A. Cover Letter & Form of Offer (signed by authorized representative)

B. Executive Summary

C. Firm Qualifications & Experience (include relevant CDBG/CDBG-CV projects)

D. Technical Approach & Work Plan (work breakdown, schedule, QA/QC, risk management)

E. Key Personnel & Resumes (roles, certifications; identify **Project Manager, Compliance Lead, Environmental Specialist, IDIS Analyst**)

F. Project Staffing & Organization Chart

G. Past Performance & References (≥3 public sector clients; include contact info)

H. Understanding of HUD/Fort Bend County Requirements (DOB, national objective, Part 58, Section 3, IDIS)

I. Pricing Proposal (use **Attachment A – Pricing Sheet**)

J. Required Forms (see **Section 13 – Attachments/Forms**)

K. Exceptions & Deviations (use Attachment D)

L. Proof of Insurance & Financial Stability (COI or acknowledgment to provide upon award)

SECTION 8 – EVALUATION & AWARD

A. Evaluation Criteria & Weights

Criterion	Weight
Responsiveness & Completeness	5%
Firm Qualifications & Relevant Experience (CDBG/CV and Fort Bend County)	25%
Technical Approach & Work Plan	25%
Key Personnel & Capacity	15%
Past Performance & References	10%
Price	20%
Local Participation / HUB / Section 3 (optional)	up to 5%

B. Process

- County evaluation committee will review and score proposals.
 - The County may conduct **interviews** and request **best and final offers (BAFO)**.
 - Award will be made to the **best value** Proposer considering price and other factors.
 - The County reserves the right to **reject** any/all proposals, **waive informalities**, and **cancel** this RFP.
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SECTION 9 – INSURANCE REQUIREMENTS

Prior to contract award, the selected Consultant must provide **Certificates of Insurance** naming **Fort Bend County** as **Additional Insured** and granting **Waiver of Subrogation**:

- **Commercial General Liability:** \$1,000,000 per occurrence / \$2,000,000 aggregate
- **Automobile Liability:** \$1,000,000 combined single limit
- **Workers' Compensation:** Statutory limits; **Employers' Liability** \$500,000
- **Professional Liability (E&O):** \$1,000,000 per claim / \$1,000,000 aggregate (claims-made acceptable)
- **Cyber/Privacy Liability (if handling PII):** \$1,000,000 per claim (recommended)

Policies shall be **primary and non-contributory** to County coverage.

SECTION 10 – CONTRACT TERMS & FEDERAL PROVISIONS

This contract uses federal funds and includes **mandatory flow-down provisions**. The Consultant must comply with, but not limited to:

- **Uniform Guidance (2 CFR Part 200):** Financial management, procurement, cost principles, audit requirements; **Appendix II** contract provisions (e.g., termination, equal employment opportunity, Davis-Bacon (if applicable), Contract Work Hours and Safety Standards (if applicable), Clean Air Act/Clean Water Act (if contracts > \$150,000), debarment & suspension, Byrd Anti-Lobbying).
- **CDBG Regulations (24 CFR Part 570):** Eligible activities; subrecipient agreements (570.503); **conflict of interest (570.611)**.
- **Environmental Review (24 CFR Part 58).**
- **Section 3 (24 CFR Part 75):** Opportunities for low- and moderate-income persons and businesses; reporting and “best efforts.”
- **Davis-Bacon (29 CFR Part 5)** when applicable to construction > \$2,000 not otherwise exempt.
- **Debarment & Suspension (2 CFR Part 180):** Verification in **SAM.gov**.
- **Byrd Anti-Lobbying (31 U.S.C. §1352):** Certification and disclosure for lobbying with federal funds.
- **Records Retention (2 CFR 200.334):** Maintain records for **at least 3 years after closeout** (or longer if audit/claims are pending).
- **Access to Records (2 CFR 200.337):** HUD, Comptroller General, County access.
- **Civil Rights & Nondiscrimination:** Title VI, ADA/Section 504, Fair Housing Act; Limited English Proficiency (LEP) access.

Additional Terms (County standard):

- **Independent Contractor;** no agency.
- **Invoicing & Payment:** Monthly; Payment Method [See attached ACH Form].
- **Subcontracting:** Prior County approval; **flow-down** mandatory clauses to subs.
- **Confidentiality & Data Security:** Protect PII; notify County of any breach.
- **Indemnification:** To the extent permitted by law.
- **Termination:** For convenience or cause with notice.
- **Governing Law & Venue:** State of Texas; **Fort Bend County**.
- **Open Records/Public Information:** Texas Government Code **Chapter 552**; Proposer must mark proprietary info; County determines confidentiality.

SECTION 11 – PAYMENT STRUCTURE

Option A – Time & Materials (T&M):

- Hourly rates by labor category (Attachment A).
- Monthly invoicing with task-level detail and deliverables log.

Option B – Fixed Fee / Milestones:

- Fixed pricing per phase or deliverable (Attachment A).
- Payment upon County acceptance of deliverables.

The County may select a single option or a hybrid structure during negotiations.

SECTION 12 – ATTACHMENTS / REQUIRED FORMS

- **Attachment A – Pricing Sheet**
 - **Attachment B – Proposer Checklist**
 - **Attachment C – Certifications**
 - C-1: **Certification Regarding Debarment & Suspension** (2 CFR 180)
 - C-2: **Certification Regarding Byrd Anti-Lobbying** (31 U.S.C. §1352)
 - C-3: **Non-Collusion Affidavit**
 - C-4: **Conflicts of Interest Disclosure** (2 CFR 200.318(c); 24 CFR 570.611)
 - C-5: **Section 3 Acknowledgment** (24 CFR Part 75)
 - C-6: **SAM.gov Registration** (UEI and active status)
 - C-7: **Texas Ethics Commission Form 1295** (Certificate of Interested Parties) – required at award
 - **Attachment D – Exceptions & Deviations Form**
 - **Attachment E – References Form**
 - **Attachment F – Proposed Staffing & Resumes**
 - **Attachment G – Addenda Acknowledgment**
 - **Attachment H – Sample Agreement (County standard form)**
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SECTION 13 – PERFORMANCE STANDARDS (SLAs)

- **Schedule adherence:** ≥ 95% on-time deliverables.
- **Compliance accuracy:** ≥ 98% error-free QA/QC (ERRs, DOB, IDIS, labor standards).

- **Draw timeliness:** ≤ **10 business days** from complete invoice package to draw submission.
 - **Monitoring coverage:** 100% of **high-risk** subs quarterly; **medium-risk** semi-annually; **low-risk** annually.
 - **Construction oversight:** Site reports **weekly/biweekly** per project size.
 - **Issue resolution:** Corrective actions closed within **30 days** (or agreed timeline).
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SECTION 14 – FORM OF OFFER (SIGN & SUBMIT)

Proposer Name: _____ Address: _____
 _____ UEI (SAM.gov): _____
 _____ Authorized Signatory: _____ Title: _____
 _____ Email/Phone: _____
 _____ Signature & Date: _____

By signing, Proposer agrees to all **terms, conditions, and federal provisions** in this RFP and certifies accuracy of the proposal.

ATTACHMENTS (Templates)

Attachment A – Pricing Sheet

(Submit in a separate, sealed envelope or separate PDF labeled “Cost Proposal”)

A1. Hourly Rates (Time & Materials)

Labor Category	Hourly Rate (\$)	Est. Hours	Extended (\$)
Project Manager			
Compliance Lead			
Environmental Specialist (Part 58)			
IDIS/Finance Analyst			
Monitoring Lead			
Construction Oversight (Field)			
Section 3 Coordinator			
Administrative Support			
Subtotal T&M			

A2. Fixed Fee / Milestone Pricing (if proposed)

Milestone / Deliverable	Description	Price (\$)
Initiation (PMP, Compliance Matrix, Risk Register, Stakeholder Plan)		
Environmental Review & Clearance (per facility project)	ERR, notices, AUGF (if applicable)	
Procurement Support (per solicitation)	RFP/IFB/RFQ, evaluations, award docs	
Construction Oversight (per month/per project)	Site reports, pay apps, labor standards	
Public Services Program Setup (per subrecipient)	Scopes, metrics, templates, TA	
Monitoring & Reporting (per quarter)	Desk/onsite reviews; reports	
IDIS Setup & Draws (per activity/per month)	Activity creation, draws, reconciliation	
Closeout Package (per project/activity)	Final reports, beneficiary verification	
Subtotal Fixed		
Not-to-Exceed Total		

Include any discounts or HUB/Section 3 subcontracting adjustments.

Attachment B – Proposer Checklist

- Cover Letter & **Form of Offer** signed
- Executive Summary
- Firm Qualifications & Experience (CDBG/CV)
- Technical Approach & Work Plan
- Key Personnel & Resumes
- Staffing Plan & Org Chart
- Past Performance & References
- **Pricing Sheet (Attachment A)**
- **Certifications (Attachment C)**
- Exceptions & Deviations (Attachment D)
- References Form (Attachment E)
- Addenda Acknowledgment (Attachment G)
- Proof of Insurance (or letter of intent)
- SAM.gov UEI and active registration
- Section 3 approach (if applicable)

Attachment C – Certifications

(Sign each certification)

C-1: Debarment & Suspension

Proposer certifies it is **not debarred, suspended, or proposed for debarment** by any federal agency and is **listed as active** in **SAM.gov** (2 CFR Part 180).

UEI: _____ **SAM Expiration:** _____

Signature/Date: _____

C-2: Byrd Anti-Lobbying Certification

Proposer certifies compliance with **31 U.S.C. §1352** and will not use federal funds to influence any person in connection with the awarding of federal contracts/grants. Any **lobbying** with non-federal funds related to this award will be disclosed.

Signature/Date: _____

C-3: Non-Collusion Affidavit

Proposer certifies the proposal is made without any agreement with competing Proposers to **fix prices** or **restrict competition**.

Signature/Date: _____

C-4: Conflicts of Interest Disclosure

Proposer certifies compliance with **2 CFR 200.318(c)** and **24 CFR 570.611** and discloses any potential organizational or personal conflicts.

Attach disclosure if applicable.

Signature/Date: _____

C-5: Section 3 Acknowledgment (24 CFR Part 75)

Proposer acknowledges **Section 3** obligations and will use **best efforts** to provide training, employment, and contracting opportunities to **Section 3 workers and businesses** where applicable.

Signature/Date: _____

C-6: SAM.gov Registration

Proposer confirms **active registration** in **SAM.gov** and will maintain active status through the contract term.

UEI: _____ **Expiration:** _____

Signature/Date: _____

C-7: Texas Ethics Commission Form 1295 (Award Requirement)

Proposer acknowledges the requirement to file **Form 1295 – Certificate of Interested Parties** with the **Texas Ethics Commission** prior to contract execution.

Signature/Date: _____

Attachment D – Exceptions & Deviations Form

List any exceptions to the RFP, County terms, or federal provisions. **Unlisted exceptions may not be considered.**

RFP Section	Exception	Rationale	Alternative Language

Signature/Date: _____

Attachment E – References Form

Provide **at least three (3)** references for similar **CDBG/CDBG-CV** work.

Client	Project Name	Contact	Phone/Email	Period	Description

Attachment F – Proposed Staffing & Resumes

Include an **organization chart**, brief bios/resumes (≤2 pages each), and **availability** (FTE %).

Attachment G – Addenda Acknowledgment

We acknowledge receipt of the following **Addenda**:

Addendum No.	Date	Initials
1		
2		
3		

Signature/Date: _____

Attachment H – Sample Agreement (Key Terms Outline)

(Insert County standard contract form here)

Term; Scope & Deliverables; Compensation; Invoicing; Records & Audit;
Subcontracting & Flow-downs; Indemnification; Insurance; Termination;
Confidentiality & Data Security; Governing Law & Venue (Fort Bend County, TX);
Open Records; Non-Discrimination & Civil Rights; Section 3;
Debarment/Suspension; Lobbying; Access to Records; Record Retention.

Appendix – Compliance References (Non-Exhaustive)

- **CDBG Program:** 24 CFR Part 570 (e.g., 570.201–.206 eligible activities; 570.503 subrecipient agreements; 570.611 conflicts of interest).
- **Uniform Guidance:** 2 CFR Part 200 (financial management, procurement standards, cost principles, audit; **Appendix II** contract provisions).
- **Environmental Review:** 24 CFR Part 58 (ERR; notices; AUGF).
- **Section 3:** 24 CFR Part 75.
- **Labor Standards:** Davis-Bacon, 29 CFR Part 5 (if applicable).
- **Relocation:** URA, 49 CFR Part 24 (if acquisition/displacement occurs—**not typical for this SOW**).
- **Civil Rights & Accessibility:** Title VI; Section 504; ADA (28 CFR Part 35); Fair Housing Act.
- **Debarment & Suspension:** 2 CFR Part 180; **SAM.gov**.
- **Byrd Anti-Lobbying:** 31 U.S.C. §1352.
- **Records:** 2 CFR 200.334 (retention) and 200.337 (access).

NOTE: Fort Bend County reserves the right to request assistance with activities funded under the Community Development Block Grant (CDBG) program through this solicitation, as deemed necessary and appropriate.

Fort Bend County Community Development Department

CONFLICT OF INTEREST DISCLOSURE

COMPLETED BY BUSINESS ENTITIES

INFORMATION

Name of Organization:

Address:

DISCLOSURE

Is any employee, director, officer, or anyone else associated with your organization, or any of their immediate family member(s)*, currently or within the past year an employee, agent, consultant, officer, elected or appointed official, sub-recipient, or vendor of Fort Bend County?

Yes (see below) No

**Includes, whether by blood, marriage, or adoption: spouse, parent (including a stepparent), child (including a stepchild), sibling (including a step-sibling), grandparent, grandchild, and in-laws.*

Please indicate the names, positions, and telephone numbers for each person applicable to the above question. Use additional forms as needed.

Name	Position and/or direct or indirect relationship with the County	Telephone Number

APPLICANT SIGNATURES

Warning: Any person who knowingly makes a false claim or statement to HUD may be subject to civil or criminal penalties under 18 U.S.C. 287, 1001 and 31 U.S.C. 3729. Under penalties of perjury, I/we certify that the information presented above is true and accurate to the best of my/our knowledge and belief. I/We further understand that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in my ineligibility to participate in this program or any other programs that will accept this document. Title 18, Section 1001 of the U.S. Code states that a person is guilty of a FELONY if he/she knowingly and willfully makes a false statement to any department of the United States Government. I/we understand that this application may be delayed or found ineligible if a conflict of interest is found to exist and no waiver is granted.

Name of Organization:

By:

Name:

Title:

Date:

FOR PROGRAM STAFF USE ONLY

Does applicant list a potential conflict of interest? Yes (Forward to PGM) No (STOP-process normally) _____
Initials and Date

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

(Instructions for completing and filing this form are provided on the next page.)

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.

OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

2 Office Held

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 SIGNATURE

I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.

Signature of Local Government Officer

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

Signature of Local Government Officer (Declarant)

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

Section 176.003 of the Local Government Code requires certain local government officers to file this form. A "local government officer" is defined as a member of the governing body of a local governmental entity; a director, superintendent, administrator, president, or other person designated as the executive officer of a local governmental entity; or an agent of a local governmental entity who exercises discretion in the planning, recommending, selecting, or contracting of a vendor. This form is required to be filed with the records administrator of the local governmental entity not later than 5 p.m. on the seventh business day after the date on which the officer becomes aware of the facts that require the filing of this statement.

A local government officer commits an offense if the officer knowingly violates Section 176.003, Local Government Code. An offense under this section is a misdemeanor.

Refer to chapter 176 of the Local Government Code for detailed information regarding the requirement to file this form.

INSTRUCTIONS FOR COMPLETING THIS FORM

The following numbers correspond to the numbered boxes on the other side.

- 1. Name of Local Government Officer.** Enter the name of the local government officer filing this statement.
- 2. Office Held.** Enter the name of the office held by the local government officer filing this statement.
- 3. Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code.** Enter the name of the vendor described by Section 176.001(7), Local Government Code, if the vendor: a) has an employment or other business relationship with the local government officer or a family member of the officer as described by Section 176.003(a)(2)(A), Local Government Code; b) has given to the local government officer or a family member of the officer one or more gifts as described by Section 176.003(a)(2)(B), Local Government Code; or c) has a family relationship with the local government officer as defined by Section 176.001(2-a), Local Government Code.
- 4. Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.** Describe the nature and extent of the employment or other business relationship the vendor has with the local government officer or a family member of the officer as described by Section 176.003(a)(2)(A), Local Government Code, and each family relationship the vendor has with the local government officer as defined by Section 176.001(2-a), Local Government Code.
- 5. List gifts accepted, if the aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100.** List gifts accepted during the 12-month period (described by Section 176.003(a)(2)(B), Local Government Code) by the local government officer or family member of the officer from the vendor named in item 3 that in the aggregate exceed \$100 in value.
- 6. Signature.** Signature of local government officer. Complete this section after you finish the rest of this report. You have the option to either: (1) take the completed form to a notary public where you will sign above the first line that says "Signature of Local Government Officer" (an electronic signature is not acceptable) and your signature will be notarized, or (2) sign above both lines that say "Signature of Local Government Officer (Declarant)" (an electronic signature is not acceptable), and fill out the unsworn declaration section.

Local Government Code § 176.001(2-a): "Family relationship" means a relationship between a person and another person within the third degree by consanguinity or the second degree by affinity, as those terms are defined by Subchapter B, Chapter 573, Government Code.

Local Government Code § 176.003(a)(2)(A):

- (a) A local government officer shall file a conflicts disclosure statement with respect to a vendor if:

- (2) the vendor:

(A) has an employment or other business relationship with the local government officer or a family member of the officer that results in the officer or family member receiving taxable income, other than investment income, that exceeds \$2,500 during the 12-month period preceding the date that the officer becomes aware that:

- (i) a contract between the local governmental entity and vendor has been executed; or
- (ii) the local governmental entity is considering entering into a contract with the vendor.



COUNTY AUDITOR
Fort Bend County, Texas

Robert Ed Sturdivant
County Auditor

INSTRUCTIONS FOR ACH/EFT PAYMENTS TO VENDORS/PAYEES:

- Vendor/Payee Name: _____ (required)
- Vendor/Payee Tax ID Number: _____ (required)
- Vendor/Payee Address: _____ (required)
- Vendor/Payee Contact Name: _____ (required)
- Vendor Email (where remittance will be sent) _____ (required)
- Vendor/Payee Phone Number: _____ (required)
- Bank Name: _____ (required)
- BA/Routing Number: _____ (required)
- Account Number: _____ (required)
- or Further Credit (FFC): _____ (optional)
- Other Bank Information (OBI): _____ (optional)

Submit completed forms and or questions to:
AUDITOR_ACH@FORTBENDCOUNTYTX.GOV

ACH payment remittance information will be emailed on the day the ACH is processed. Please keep in mind that ACH payments take two business days to post to your bank account.

CERTIFICATION REGARDING LOBBYING

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents of all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, United States Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Organization: _____

Street address: _____

City, State, Zip: _____

CERTIFIED BY: (type or print)

TITLE:

(signature)

(date)

Disclosure of Lobbying Activities

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure)

<p>1. Type of Federal Action: a. contract _____ b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance</p>	<p>2. Status of Federal Action: a. bid/offer/application _____ b. initial award c. post-award</p>	<p>3. Report Type: a. initial filing _____ b. material change</p> <p>For material change only: Year _____ quarter _____ Date of last report _____</p>
<p>4. Name and Address of Reporting Entity: _____ Prime _____ Subawardee Tier _____, if Known:</p> <p>Congressional District, if known:</p>	<p>5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime:</p> <p>Congressional District, if known:</p>	
<p>6. Federal Department/Agency:</p>	<p>7. Federal Program Name/Description:</p> <p>CFDA Number, <i>if applicable</i>: _____</p>	
<p>8. Federal Action Number, if known:</p>	<p>9. Award Amount, if known:</p> <p>\$</p>	
<p>10. a. Name and Address of Lobbying Registrant <i>(if individual, last name, first name, MI):</i></p>	<p>b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i></p>	
<p>11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.</p>	<p>Signature: _____</p> <p>Print Name: _____</p> <p>Title: _____</p> <p>Telephone No.: _____ Date: _____</p>	
<p>Federal Use Only</p>	<p>Authorized for Local Reproduction Standard Form - LLL (Rev. 7-97)</p>	

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitations for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Included prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10(a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503