

City of Weslaco

"The City on the Grow"



David Suarez, Mayor
Letty Lopez, Mayor Pro-Tem, District 5
Leo Muñoz, Commissioner, District 1
Greg Kerr, Commissioner, District 2
Jose "J.P." Rodriguez, Commissioner, District 3
Adrian Farias, Commissioner, District 4
Josh Pedraza, Commissioner, District 6

Mike R. Perez, City Manager

Date: April 15, 2021

To: Sandra Regalado
Hidalgo Urban County Program

From: Albert J. Aldana, P.E.
City Engineer

Subject: **2020 City of Weslaco Water & Sewer Improvements
5020-80-0310-5000-8000-UCPSR**

Urban County received four (4) bids by the due date and time of March 17, 2021 at 9:30 AM for the subject project. The bids were reviewed for completeness and were tabulated and ranked.

The following respondents submitted bids:

- McAllen Multi Service, LLC - \$367,206.00
- **Sal Construction Management, LLC - \$287,457.00 (Lowest Bidder)**
- Jimmy Closner & Sons Construction Co., Inc. - \$382,330.00
- The 5125 Company - \$295,125.00

The bids were tabulated, and the lowest bid was submitted by Sal Construction Management, LLC with a total project bid of \$287,457.00. However, after assessing that Sal Construction, LLC was not registered with Urban County as Section 3 certified, the next contractor that was certified registered (**The 5125 Company**) was afforded the opportunity to match the lowest bid. The 5125 Company accepted the lowest bid amount and is willing to perform the work.

As a result, Engineering recommends that The 5125 Company be awarded the project.

Please see the attached tabulation of the bids and Memo from The 5125 Company. If you have any questions or require additional information, please advise.

Sincerely,

Albert J. Aldana

Tabulation of Bids

City of Weslaco

2020 City of Weslaco Water & Sewer Improvements

Bid Opening: Wednesday, March 17, 2021 @9:30 a.m.

<p>The 5125 Company 3914 Rio Grande Care Rd Edinburg, TX 78541</p>	<p>Sal Construction Management I PO Box 8185 Weslaco, TX 78596</p>
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Description	Quantity	Unit	Unit Price	Item Total	Unit Price	Item Total
1. 8" Waterline PVC DR-18 C900	2,601	LF	\$35.00	\$91,035.00	\$46.00	\$119,826.00
2. 8" Gate Valve with Box	7	EA	\$2,000.00	\$14,000.00	\$1,350.00	\$9,450.00
3. 12" X 8" Stainless Steel Tapping Tee	1	EA	\$4,000.00	\$4,000.00	\$2,500.00	\$2,500.00
4. 16" X 8" Stainless Steel Tapping Tee	2	EA	\$5,000.00	\$10,000.00	\$2,700.00	\$5,400.00
5. 8" X 8" Tee FMJ DI Fitting	3	EA	\$1,000.00	\$3,000.00	\$650.00	\$1,950.00
6. 8" - 90° Bend FMJ DI Fitting	1	EA	\$1,000.00	\$1,000.00	\$500.00	\$500.00
7. 8" X 45° Bend FMJ DI Fitting	12	EA	\$1,000.00	\$12,000.00	\$450.00	\$5,400.00
8. Fire Hydrant Assembly (valve and tee)	6	EA	\$5,000.00	\$30,000.00	\$5,000.00	\$30,000.00
9. 2" Flush Valve and Assembly	1	EA	\$1,500.00	\$1,500.00	\$1,250.00	\$1,250.00
10. 8" X 2" Service Saddle (brass) and Coupling to DI	2	EA	\$2,000.00	\$4,000.00	\$1,500.00	\$3,000.00
11. 1" Single Service Connection w/ meter	65	EA	\$600.00	\$39,000.00	\$650.00	\$42,250.00
12. 1" Single Service Connection (long) w/ meter	20	EA	\$800.00	\$16,000.00	\$850.00	\$17,000.00
13. Cut and Restore Existing Pavement	1,159	SY	\$39.00	\$45,201.00	\$29.00	\$33,611.00
14. Traffic Control	2	MO	\$10,000.00	\$20,000.00	\$6,500.00	\$13,000.00
15. Erosion & Sediment Control	1	LS	\$4,389.00	\$4,389.00	\$2,500.00	\$2,500.00
Total Project Bid :				\$295,125.00		\$287,457.00

2ND LOWEST

LOWEST

* The 5125 Company,
Section 3 Certified and
Registered with Urban
County, agreed to match to
Lowest Bid of \$287,457.00.

From: [The 5125 Company](#)
To: [Alberto J. Aldana](#)
Cc: [Annette Salinas](#)
Subject: 2020 Water and Sewer Improvements - The 5125 Company
Date: Thursday, April 8, 2021 2:04:00 PM

Good afternoon,

We hereby accept the opportunity to perform the work for the 2020 Water and Sewer Improvements for the adjusted price of \$287,457.00.

Thank you for the opportunity and look forward to working with you.

Respectfully,
Tiffany Espericueta, M.S.

The 5125 Company

3914 Rio Grande Care Rd,
Edinburg, Tx 78541
956-583-5125

**CONSTRUCTION
CONTRACT**

This Agreement entered into this 27th day of April by and between Hidalgo County acting by and through Hidalgo County Urban County Program, hereinafter called the "OWNER", acting herein through its County Judge and The 5125 Company (a corporation) (a partnership) (an individual) of Edinburg, State of Texas, hereinafter called "CONTRACTOR".

WITNESSETH

That for and in consideration of the payments and agreements hereinafter mentioned, to be made and performed by the OWNER, the CONTRACTOR hereby agrees with the OWNER to commence and complete the construction described as follows:

PROJECT NAME: **WESLACO WATER & SEWER IMPROVEMENTS**
PROJECT No.: **5020-80-0310-5000-8000-UCP-SR**
PROJECT DESCRIPTION: **WATER & SEWER IMPROVEMENTS**

hereinafter called the project, for the sum of (\$287,457.00) – Two Hundred Eighty-Seven Thousand, Four Hundred Fifty-Seven Dollars and Zero Cents and all extra work in connection therewith, under the terms as stated in the General and Special Conditions of the Contract; and at his (its or their) own proper cost and expense to furnish all the materials, supplies, machinery, equipment, tools, superintendence, labor, insurance, and other accessories and services necessary to complete the said project in accordance with the conditions and prices stated in the Proposal, the General Conditions, Supplemental General Conditions and Special Conditions of the contract, the plans, which include all maps, plats, blue prints, and other drawings and printed or written explanatory matter thereof, the specifications and contract documents therefore as prepared by City of Weslaco and as enumerated in Paragraph 1 of the Supplemental General Conditions, all of which are made a part hereof and collectively evidence and constitute the contract.

The CONTRACTOR hereby agrees to commence work under this contract on or after a date to be specified in a written "Notice to Proceed" of the OWNER and to fully complete the project within (120) One Hundred Twenty Days consecutive calendar days thereafter. The CONTRACTOR further agrees to pay, as liquidated damages, the sum of (\$500.00) Five Hundred Dollars and Zero Cents for each consecutive calendar day thereafter as hereinafter provided in Paragraph 19 of the General Conditions.

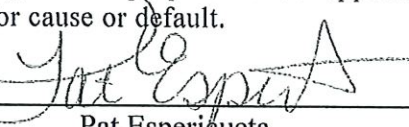
The OWNER agrees to pay the CONTRACTOR in current funds for the performance of the contract, subject to additions and deductions, as provided in the General Conditions of the contract, and to make payments on account thereof as provided in Paragraph 25, "Payments to Contractor", of the General Conditions.

IN WITNESS WHEREOF, the parties to these presents have executed this contract in four (4) counterparts, each of which shall be deemed an original, in year and day first above mentioned.

Certification Regarding Debarment, Suspension and Ineligibility

As is required by the Federal Regulations Implementing Executive Order 12549, Debarment and Suspension, 45 CFR Part 76, Government-wide Debarment and Suspension, the applicant certifies, to the best of his or her knowledge and belief, that both it and its principals:

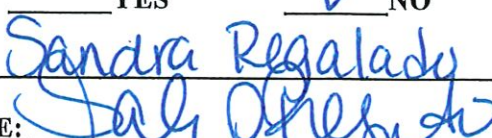
- a. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency;
- b. Have not within a three-year period preceding this bid proposal and/or application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction, violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- c. Are not presently indicted for or otherwise criminally or civilly charged by a government entity with commission of any of the offenses enumerated herein; and
- d. Have not within a three-year period preceding this bid proposal and/or application had one or more public transactions terminated for cause or default.

Signature: 
Print Name: Pat Espericueta
Title: President
DUNS No. : 023646545
Telephone Number: 956-583-5125
Date: 03/16/2021

If the bidder is unable to certify to all of the statements in this Certification, such bidder should attach an explanation to this proposal.

*****UCP STAFF ONLY*****

VERIFICATION

DATE VERIFIED ON SAM: 4-16-21
HAS ACTIVE EXCLUSIONS? YES ✓ NO
UCP COORDINATOR NAME: Sandra Regalado
UCP COORDINATOR SIGNATURE: 



- ⚠ **ALERT:** Small business owners who seek to participate in the Restaurant Revitalization Fund (RRF) will not be required to have a DUNS Number, will not need to register in SAM.gov, and will not need a CAGE Code. SBA will share more information on the RRF soon. Visit [SBA](#) to stay informed.
- ⚠ **ALERT:** Each entity registration expiring between April 1 and September 30, 2021 will have an additional 180 days added to its expiration date. Read more about the extension on [Interact](#).
- ⚠ **ALERT:** SAM.gov will be down for scheduled maintenance Saturday, 05/15/2021 from 8:00 AM to 1:00 PM.
- ⚠ **ALERT:** Shuttered Venue Operators Grant (SVOG) Applicants - Applicants for relief under the SVOG program are required to register in SAM.gov. If you have submitted your SAM.gov registration, but the registration is not yet active, you can still apply for relief under the SVOG program. During the SVOG application process, you will have to attest that you have submitted your SAM.gov registration. To stay informed, please visit [SBA](#).

<p>Entity Dashboard</p> <ul style="list-style-type: none"> ▶ Entity Overview ▶ Entity Registration <ul style="list-style-type: none"> ▶ Core Data ▶ Assertions ▶ Reps & Certs ▶ POCs ▶ Exclusions <ul style="list-style-type: none"> ▶ Active Exclusions ▶ Inactive Exclusions ▶ Excluded Family Members <p style="text-align: center; margin-top: 10px;">RETURN TO SEARCH</p>	<p>5125 Company, The DUNS: 023646545 CAGE Code: 4XW35 Status: Active Expiration Date: 01/21/2022 Purpose of Registration: All Awards</p> <hr/> <p style="text-align: center;">Entity Overview</p> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p style="text-align: center;">Entity Registration Summary</p> <p>Name: 5125 Company, The Business Type: Business or Organization Last Updated By: Pat Espericueta Registration Status: Active Activation Date: 01/25/2021 Expiration Date: 01/21/2022</p> </div> <div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;">Exclusion Summary</p> <p>Active Exclusion Records? No</p> </div>	<p>3914 RIO GRANDE CARE RD EDINBURG, TX, 78541-4381, UNITED STATES</p>
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IBM-P-20210314-0806
WWW6

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|----------------|----------------|-------------|
| Search Records | Disclaimers | FAPIS.gov |
| Data Access | Accessibility | GSA.gov/IAE |
| Check Status | Privacy Policy | GSA.gov |
| About | | USA.gov |
| Help | | |

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
THE 5125 COMPANY

2 Business name/disregarded entity name, if different from above
THE 5125 COMPANY

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

Individual/sole proprietor or single-member LLC

C Corporation

S Corporation

Partnership

Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other (see instructions) ▶ _____

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
3914 RIO GRANDE CARE RD

6 City, state, and ZIP code
EDINBURG TX 78541

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

or

Employer identification number

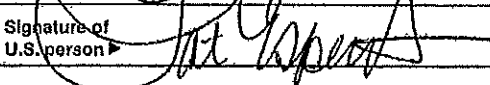
7	4		2	5	0	7	9	8	3
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Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ▶ 

Date ▶ 03/16/2021

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
 - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
 - Form 1099-S (proceeds from real estate transactions)
 - Form 1099-K (merchant card and third party network transactions)
 - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/03/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Southern American Insurance Agency 13823 Schmidt Road Cypress TX 77429	CONTACT NAME: Laura Rowell	
	PHONE (A/C, No, Ext): (281) 890-9294	FAX (A/C, No): (281) 890-2229
	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: United Fire Lloyds	NAIC # 43559
INSURED The 5126 Company 3914 Rio Grande Care Rd 78541 Edinburg TX 78541	INSURER B: Texas Mutual Insurance Co.	22945
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 20-21 Master

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

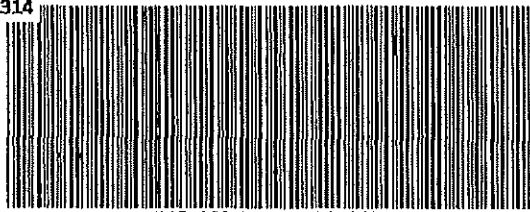
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			85323274	11/01/2020	11/01/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Employee Benefits \$ 1,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIREO AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			85323274	11/01/2020	11/01/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Uninsured motorist \$ 1,000,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$			85323274	11/01/2020	11/01/2021	<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	0001142644	03/17/2020	03/17/2021	E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A				85323274	11/01/2020	11/01/2021	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

Hidalgo County Planning Department 1304 S. 25th Street Edinburg TX 78542	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <i>C. A. McClure</i>
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VG-120-2020-3121314

Hidalgo County
Arturo Guajardo Jr.
County Clerk
Edinburg, Texas 78540

Document No: 3121314

Billable Pages: 1

Recorded On: June 16, 2020 03:23 PM

Number of Pages: 2

*****Examined and Charged as Follows*****

Total Recording: \$ 36.00

*****THIS PAGE IS PART OF THE DOCUMENT*****

Any provision herein which restricts the Sale, Rental, or use of the described REAL PROPERTY because of color or race is invalid and unenforceable under federal law.

File Information:

Document No: 3121314
Receipt No: 20200616000306
Recorded On: June 16, 2020 03:23 PM
Deputy Clerk: Rene Salinas
Station: CH-1-CC-K17

Record and Return To:

PATRICIA ESPERICUETA
3914 RIO GRANDE CARE ROAD
original returned to customer
EDINBURG TX 78542



STATE OF TEXAS
COUNTY OF HIDALGO

I hereby certify that this Instrument was FILED in the File Number sequence on the date/time printed hereon, and was duly RECORDED in the Official Records of Hidalgo County, Texas.

Arturo Guajardo Jr.
County Clerk
Hidalgo County, Texas

CONFLICT OF INTEREST QUESTIONNAIRE

For vendor doing business with local governmental entity

FORM CIQ

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session. This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).
 By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. See Section 176.006(a-1), Local Government Code.
 A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.

OFFICE USE ONLY
Date Received

1 Name of vendor who has a business relationship with local governmental entity.
 The 5125 Company

2 Check this box if you are filing an update to a previously filed questionnaire. (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date on which you became aware that the originally filed questionnaire was incomplete or inaccurate.)

3 Name of local government officer about whom the information is being disclosed.
 n/a

 Name of Officer

4 Describe each 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). Also describe any family relationship with the local government officer. Complete subparts A and B for each employment or business relationship described. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer or a family member of the officer receiving or likely to receive taxable income, other than investment income, from the vendor?

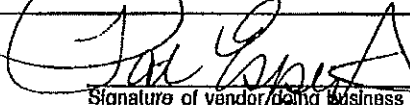
Yes No

B. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer or a family member of the officer AND the taxable income is not received from the local governmental entity?

Yes No

5 Describe each employment or business relationship that the vendor named in Section 1 maintains with a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more.

6 Check this box if the vendor has given the local government officer or a family member of the officer one or more gifts as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a-1).

7 
 Signature of vendor doing business with the governmental entity

06/16/20

 Date