

STATE OF TEXAS §
 §
COUNTY OF FORT BEND §

FIRST AMENDMENT TO INTERLOCAL AGREEMENT
BETWEEN FORT BEND COUNTY AND
TEXAS ASSOCIATION OF COUNTIES
HEALTH AND EMPLOYEE BENEFITS POOL (HEBP)

THIS FIRST AMENDMENT is made and entered into by and between Fort Bend County, (hereinafter "County"), a body corporate and politic under the laws of the State of Texas, and Texas Association of Counties Health and Employee Benefits Pool (HEBP), (hereinafter "HEBP") both being parties under the Interlocal Cooperation Act.

RECITALS

WHEREAS, on or about October 10, 2016 the Parties entered into the Interlocal Participation Agreement ATTACHED hereto as Exhibit "One" and incorporated by reference which has been renewed each year since and is currently in effect;

WHEREAS, the Parties now desire to amend a certain portion of the Agreement; and

NOW THEREFORE, for and in consideration of the mutual benefits to be derived by the parties hereto, County, and HEBP agree as follows:

- I. Effective upon execution of the last party, Section 3.6 is amended as follows:

3.6 Payments and Conditions. Payments and contributions shall be made by the Member as HEBP directs on the dates and in such amounts as HEBP requires. Interest, beginning the first day after the due date and continuing until paid, shall accrue at the maximum rate allowed by law on the balance of any payment or contribution not paid when due. Contributions and other payments received by HEBP from its Members will be held and managed for the benefit of the Members of the Pool, not the individual officials, employees, retirees of a Member, or the dependents of these officials, employees or retirees.

- II. Except as modified herein, any prior executed document remain in full force and effect and has not been modified or amended. In the event of conflict, the contents of this First Amendment shall prevail.

III. Execution

IN TESTIMONY OF WHICH, THIS AMENDMENT shall be effective upon execution of all parties.

"County"
FORT BEND COUNTY

By: _____
KP George, County Judge

Date: _____

ATTEST:

Laura Richard, County Clerk

"HEBP"

By: Susan M Redford

Name: Susan M. Redford

Title: Executive Director

Date: 5/17/19

ATTEST:

Name

Date: _____

Attachments:

Exhibit One: UPDATE

AUDITOR'S CERTIFICATE

I hereby certify that funds are available in the amount of \$_____ to accomplish and pay the obligation of Fort Bend County under this contract.

Robert Ed Sturdivant, County Auditor