

**DEPARTMENT OF STATE HEALTH SERVICES**  
**CONTRACT NO. HHS000448000001**  
**AMENDMENT NO. 2**

The Department of State Health Services (“DSHS”) and Fort Bend County (“Grantee”) collectively the “Parties,” to that certain grant Contract effective September 1, 2019 and denominated DSHS Contract No. HHS000448000001, now want to amend the Contract.

Whereas, DSHS wants to exercise its option to renew the Contract term for a one-year term; and

Whereas, the Parties want to revise the Scope of Work and add funds to the Budget for Fiscal Year 2022; and

Whereas, the Parties want to revise the signature document to change the DSHS Contract Representative’s name;

The Parties therefore amend the Contract as follows:

1. Article IV of the Signature Document, Duration, is hereby amended to reflect a revised termination date of August 31, 2022.
2. Article V of the Signature Document, Payments for Services Performed, is hereby amended to add **\$178,763.00** in DSHS funding with the Grantee providing **\$35,753.00** in matching funds for a combined total of **\$214,516.00** for the fiscal year 2022. The total Contract will not exceed **\$620,652.00**. All expenditures under the Contract will be in accordance with Attachment B-2, FY2022 Budget.
3. Article VI of the Signature Document is hereby amended to replace the DSHS Contract Representative’s name from Samantha Lavoie, CTCM to Lacy Alexander.
4. Article IV of Attachment A, Programmatic Reporting Requirements, is hereby amended to include the following FY2022 table below:

<b>Report Name</b>	<b>Frequency</b>	<b>Period Begin</b>	<b>Period End</b>	<b>Due Date</b>
FY22 Narrative Report	Annually	Sept. 1, 2021	August 31, 2022	April 1, 2022
FSR & Match Reimbursement/Certification Form (“Form B-13A”)	Quarterly	Sept. 1, 2021	Nov. 30, 2022	Dec. 31, 2022
FSR & Form B-13A	Quarterly	Dec. 1, 2021	Feb. 29, 2022	March 31, 2022
FSR & Form B-13A	Quarterly	March 1, 2022	May 31, 2022	June 30, 2022
FSR & Form B-13A	Quarterly	June 1, 2022	August 31, 2022	October 17, 2022

5. Attachment B, Payment for Services Provided, is hereby supplemented with Attachment B-2, which is attached and incorporated into the Contract by reference.
6. This Amendment shall be effective on September 1, 2021.
7. Except as modified by this Amendment, all terms and conditions of the Contract, as amended, shall remain in full effect.
8. Any further revisions to the Contract shall be by written agreement of the Parties.

**SIGNATURE PAGE FOLLOWS**

**SIGNATURE PAGE FOR AMENDMENT NO. 2  
DEPARTMENT OF STATE HEALTH SERVICES  
CONTRACT NO. HHS00044800001**

**DEPARTMENT OF STATE HEALTH SERVICES      FORT BEND COUNTY**

DocuSigned by:  
*Jennifer Sims*  
By: FF74006FBA6747E...

Name: Jennifer Sims

Title: Deputy Commissioner

Date of Signature: April 27, 2021

DocuSigned by:  
*KP George*  
By: F546587DD2BD433...

Name: KP George

Title: County Judge

Date of Signature: April 26, 2021

**THE FOLLOWING ATTACHMENT IS ATTACHED AND ITS TERMS INCORPORATED INTO THE  
CONTRACT BY REFERENCE:**

**ATTACHMENT B-2-FY2022 BUDGET**

**ATTACHMENT B-2  
FY2022 BUDGET**

**(September 1, 2021– August 31, 2022)**

<b>Budget Categories</b>	<b>DSHS Funds</b>	<b>Cash Match</b>	<b>Category Total</b>
Personnel	\$94,987	\$0	\$94,987
Fringe Benefits	\$55,337	\$0	\$55,337
Travel	\$0	\$0	\$0
Equipment	\$0	\$0	\$0
Supplies	\$2,510	\$0	\$2,510
Contractual	\$25,929	\$0	\$25,929
Other	\$0	\$0	\$0
Total Direct Costs	\$178,763	\$0	\$178,763
Indirect Costs	\$0	\$35,753	\$35,753
<b>Totals</b>	<b>\$178,763</b>	<b>\$35,753</b>	<b>\$214,516</b>

**(Remainder of the page intentionally left blank)**