

**DEPARTMENT OF STATE HEALTH SERVICES GRANT AGREEMENT,  
CONTRACT NO. HHS001409300022  
AMENDMENT No. 1**

**THE DEPARTMENT OF STATE HEALTH SERVICES** (“System Agency” or “Receiving Agency”), and **FORT BEND COUNTY** ("Performing Agency" or “Contractor”), who are collectively referred to herein as the "Parties," to that certain Medical Reserve Corps Grant Contract effective April 23, 2024 and denominated DSHS Contract No. HHS001409300022 (the “Contract”), now desire to amend the Contract.

**WHEREAS**, the Parties desire to revise the Performing Agency’s name.

**WHEREAS**, the Parties desire to revise **Attachment A, Statement of Work**:

**NOW, THEREFORE**, the Parties hereby amend and modify the Contract as follows:

1. The introductory paragraph of the Contract Signature Document is hereby amended to replace Fort Bend County Health and Human Services with Fort Bend County. All references to Fort Bend County Health and Human Services are hereby now understood to refer to Fort Bend County.
  
2. **ATTACHMENT A – STATEMENT OF WORK, ARTICLE V, INVOICE AND PAYMENT**, of this Contract is revised to add the following subsection at the end of the Article:

“E. Grantee must submit a final close-out invoice at the end of each Contract fiscal term. Invoices received more than thirty (30) days after each fiscal year are subject to denial of payment.”

The remainder of the Article remains unchanged.

3. **ATTACHMENT A – STATEMENT OF WORK, ARTICLE II, REPORTING REQUIREMENTS, SUBSECTION B**, is revised to add new language as follows:

<b>Report</b>	<b>Frequency</b>	<b>Due Date</b>	<b>DSHS Email Addresses to Submit Report</b>
Financial Status Report (FSR) – Biannual	The last business day of the month following the end of each second fiscal quarter AND	7/31/24 1/31/25 6/30/25	<a href="mailto:Invoices@dshs.texas.gov">Invoices@dshs.texas.gov</a> ; <a href="mailto:FSRGrants@dshs.texas.gov">FSRGrants@dshs.texas.gov</a> ; copy to the System Agency representative identified in <b>Section VII, Contract Representatives</b> , of this Grant Agreement

	thirty (30) calendar days following the end of each fourth fiscal quarter. *The final FSR is due thirty (30) calendar days following fiscal contract term.		
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- 4. This Amendment No. 1 shall be effective as of the date last signed below.
- 5. Except as amended and modified by this Amendment No. 1, all terms and conditions of the Contract, as amended, shall remain in full force and effect.
- 6. Any further revisions to the Contract shall be by written agreement of the Parties.

**SIGNATURE PAGE FOLLOWS**

**SIGNATURE PAGE FOR AMENDMENT NO. 1**  
**DSHS CONTRACT NO. HHS001409300022**

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

By:\_\_\_\_\_

By:\_\_\_\_\_

Name:

Name:\_\_\_\_\_

Title:

Title:\_\_\_\_\_

Date of Execution: \_\_\_\_\_

Date of Execution:\_\_\_\_\_

## Certificate Of Completion

Envelope Id: 4AFF61C488314088A8D7FB1C1D2B1D49

Status: Sent

Subject: Please Sign: HHS001409300022 Fort Bend County MRC ASPR STTRONG A-1.docx

Source Envelope:

Document Pages: 3

Signatures: 0

Envelope Originator:

Certificate Pages: 2

Initials: 0

CMS Internal Routing Mailbox

AutoNav: Enabled

11493 Sunset Hills Road

Envelopeld Stamping: Enabled

#100

Time Zone: (UTC-06:00) Central Time (US & Canada)

Reston, VA 20190

CMS.InternalRouting@dshs.texas.gov

IP Address: 160.42.179.225

## Record Tracking

Status: Original

Holder: CMS Internal Routing Mailbox

Location: DocuSign

12/9/2024 11:54:48 AM

CMS.InternalRouting@dshs.texas.gov

## Signer Events

### Signature

### Timestamp

The Honorable KP George

Sent: 12/9/2024 12:04:52 PM

County.Judge@fortbendcountytexas.gov

Fort Bend County

Security Level: Email, Account Authentication  
(None)

### Electronic Record and Signature Disclosure:

Not Offered via DocuSign

Jonah Wilczynski

jonah.wilczynski@dshs.texas.gov

Security Level: Email, Account Authentication  
(None)

### Electronic Record and Signature Disclosure:

Not Offered via DocuSign

Patty Melchior

Patty.Melchior@dshs.texas.gov

Security Level: Email, Account Authentication  
(None)

### Electronic Record and Signature Disclosure:

Not Offered via DocuSign

Dave Gruber

David.Gruber@dshs.texas.gov

Security Level: Email, Account Authentication  
(None)

### Electronic Record and Signature Disclosure:

Not Offered via DocuSign

## In Person Signer Events

### Signature

### Timestamp

## Editor Delivery Events

### Status

### Timestamp

## Agent Delivery Events

### Status

### Timestamp

## Intermediary Delivery Events

### Status

### Timestamp

## Certified Delivery Events

### Status

### Timestamp

## Carbon Copy Events

### Status

### Timestamp

Carbon Copy Events	Status	Timestamp
Charles Brockett Charles.Brockett@fortbendcountytexas.gov Security Level: Email, Account Authentication (None) <b>Electronic Record and Signature Disclosure:</b> Not Offered via DocuSign	COPIED	Sent: 12/9/2024 12:04:50 PM Viewed: 12/10/2024 11:06:27 AM
Ketan Inamdar ketan.inamdar@fortbendcountytexas.gov Security Level: Email, Account Authentication (None) <b>Electronic Record and Signature Disclosure:</b> Not Offered via DocuSign	COPIED	Sent: 12/9/2024 12:04:51 PM
CMS Inbox cmucontracts@dshs.texas.gov Security Level: Email, Account Authentication (None) <b>Electronic Record and Signature Disclosure:</b> Not Offered via DocuSign		
Sam. Brandon sam.brandon@dshs.texas.gov Security Level: Email, Account Authentication (None) <b>Electronic Record and Signature Disclosure:</b> Not Offered via DocuSign		
Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	12/9/2024 12:04:50 PM
Payment Events	Status	Timestamps