

DEPARTMENT OF STATE HEALTH SERVICES



The contracts listed below in Section 6 (Contracts), are entered into by and between the Department of State Health Services (DSHS or the Department), an agency of the State of Texas, and Fort Bend County Health & Human Services (Contractor), a Governmental Entity, (collectively, the Parties).

1. **Purpose of the Contract.** DSHS agrees to purchase, and Contractor agrees to provide, services or goods to the eligible populations as described in the Contracts.
2. **Total Amount of the Contract and Payment Method(s).** The total amount of these Contracts is \$998,458.00, and the payment method(s) shall be as specified in the Contracts.
3. **Funding Obligation.** These Contracts are contingent upon the continued availability of funding. If funds become unavailable through lack of appropriations, budget cuts, transfer of funds between programs or health and human services agencies, amendment to the Appropriations Act, health and human services agency consolidation, or any other disruptions of current appropriated funding for these Contracts, DSHS may restrict, reduce, or terminate funding under any or all of these Contracts.
4. **Term of the Contract.** These Contracts begin on 9/01/2013 and ends on 8/31/2014. DSHS has the option, in its sole discretion, to renew these Contracts as provided in each Contract. DSHS is not responsible for payment under these Contracts before both parties have electronically signed the Contracts or before the start date of the Contracts, whichever is later.
5. **Authority.** DSHS enters into these Contracts under the authority of Health and Safety Code, Chapter 1001.
6. **Documents Forming Contract.** The Contracts consists of the following:
 - a. Delegated Signature Page (this document)
 - b. Contracts:

2014-000034-00
2014-001054-00
2014-001130-00
2014-001133-00
2014-001385-00
2014-001413-00
 - c. General Provisions (Sub-recipient)
 - d. Solicitation Document(s), and
 - e. Contractor's response(s) to the Solicitation Document(s).
 - f. Exhibits

Any changes made to these Contracts, whether by edit or attachment, do not form part of the Contracts unless expressly agreed to in writing by DSHS and Contractor and incorporated herein.

7. **Conflicting Terms.** In the event of conflicting terms among the documents forming these Contracts, the order of control is first the Delegated Signature Page, then the Contracts, then the General Provisions, then the Solicitation Document(s), if any, and then Contractor's response to the Solicitation Document, if any.
8. **Payee.** The Parties agree that the following payee is entitled to receive payment for services rendered by Contractor or goods received under these Contracts:

Name: Fort Bend County Health & Human Services
Address: 4520 Reading Road, Suite A-100
Rosenberg, TX 77471
Vendor Identification Number: 17460019692

9. **Entire Agreement.** The Parties acknowledge that these Contracts are the entire agreement of the Parties and that there are no agreements or understandings, written or oral, between them with respect to the subject matter of these Contracts, other than as set forth in these Contracts.

By signing below, the Contractor acknowledges that it has read the Contracts and agree to its terms, and that the person whose signature appears below has the requisite authority to execute these Contracts on behalf of the named party to electronically sign on behalf of (Organization) in the Contract Management and Procurement System (CMPS) at the Department of State Health Services (DSHS).

Fort Bend County Health & Human Services

By: 

Signature

August 27, 2013

Date

Robert E. Hebert, County Judge

Printed Name and Title

301 Jackson Street

Address

Richmond, TX 77469

City, State, Zip

281-341-8608

Telephone Number

jenetha.jones@fortbendcountytexas.gov

E-mail Address for Official Correspondence