

This is an amendment to the Interlocal Cooperation Contract between Texas State University ("Receiving Party") and **Fort Bend County Sheriff's Office** ("Performing Party").

This amendment is to revise the "Statement of Services" and "Scope of Work" of the above-reference Contract, and is agreed upon by all parties signing this amendment.

 X Section II, "Statement of Services", is hereby amended to read as follows: Conduct **320** Controlled Buy/Stings and Follow-ups of tobacco permitted retail outlets and sales and use tax permitted e-cigarette retail outlets.

 X Exhibit A, "Scope of Work" 1a, is hereby amended to read as follows: Conduct Controlled Buy/stings and Follow-ups of tobacco permitted retail outlets and sales and tax permitted e-cigarette retail outlets.

 X Exhibit A, "Scope of Work" 1d, is hereby amended to read as follows: Use the State Comptroller of Public Accounts most recent Tobacco Permitted Retail Outlet List and Sales and Use Tax Outlet List for E-cigarette Retailers for the Controlled Buy/Stings to obtain Retail Outlet name, address, and tobacco permit numbers.

All other terms and conditions that are not hereby amended are to remain in full force and effect.

APPROVAL SIGNATURES

NAMES:

DATES:

Contractor

Robert Hebert, County Judge
 Print Name

2-9-16
 Date

Account Manager

Kathy Martinez-Prather/TxSSC Director
 Print Name and Title

2/18/16
 Date

Dean/Director or Vice President

Print Name

Date

Sponsored Programs (OSP) Approver

Print Name

Date

VP Finance & Support Services

Print Name

Date

Roston Comstock 2-18-16
 Print Name Date
 Jacquie Albright
 Director-Purchasing 2-23-16
 Print Name Date

ACCOUNT MANAGER/DESIGNEE COMPLETE ALL INFORMATION BELOW:

SAP VENDOR#: 518821 Purchase Order #: 4500099081

Alexia Cox - ac45 TxSSC 245-7230
Administrative Assistance or Contact Name and Email Department Telephone

Kathy Martinez-Prather - km60 TxSSC 245-6236
Account Manager Name and Email Department Telephone

8000002435 8000301000
Cost Center / Internal Order / WBS # Fund

CONTRACT COMPLIANCE ROUTING SHEET

Vendor Name: Fort Bend County Sheriff's Office

Vendor Number: 518821

Date Received: 2/19/16

Person Processing Routing Sheet: mfs

1. Form FS-03 FS-04 Amendment

2. Contract Number? Yes 160290 No

3. Is a PO/ Requisition in Place? Yes: # 4500099081 No

4. Amount to be spent on form: \$ N/A (change in scope only)

5. FY16 Cumulative Spending by Vendor : \$ 23,175⁰⁰ (multiple agencies w/ multiple contracts)

6. FS-06 Form on File: Yes No

Contract Review Completed By: mfs

7. Contract not to exceed amount (including all amendments) \$ 24,000⁰⁰

If amendment – Previous contract amount \$ _____

8. Purchased Contracted Services (729900)

Other Professional Services (725300)

Lecturers – Higher Education (725200)

9. Amendment Needed: Yes No (attached)

10. To Jacque Allbright for Signature:

11. Next Department: Accounts Payable

Division: TXSSU

Other: _____

Comments: