

STATE OF TEXAS §
 §
 COUNTY OF FORT BEND §

THIRD AMENDMENT TO AGREEMENT FOR TRANSPORTATION SERVICES

THIS THIRD AMENDMENT is entered into by and between Fort Bend County, (hereinafter "County"), a body corporate and politic under the laws of the State of Texas, and Fort Bend Seniors Meals on Wheels & Much, Much More! (hereinafter "FBS"), a licensed 501(c)(3) nonprofit organization.

THAT, WHEREAS, the parties executed and accepted that certain Agreement for Transportation Services on or about August 26, 2014, (hereinafter the "Agreement"), as amended by documents dated August 25, 2015, (hereinafter "First Amendment") and August 18, 2016 (hereinafter "Second Amendment"), each incorporated by reference and included herein for all purposes; and

WHEREAS, the parties desire to further amend the Agreement to extend the term for an additional period of time;

WHEREAS, the following changes are incorporated as if a part of the original Agreement as if fully set forth verbatim herein:

NOW, THEREFORE, the parties do mutually agree as follows:

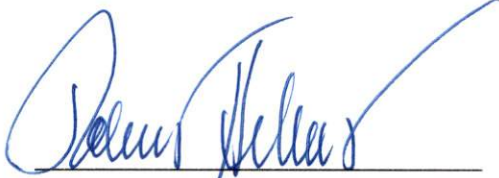
1. The term of the Agreement shall be extended beginning on August 31, 2017, and ending on August 31, 2018. Either party may terminate the Agreement at any time by providing ninety (90) days written notice.
2. All terms and conditions of the Agreement, including any addenda or amendments, not modified herein shall remain in full force and effect and for the term of the Agreement. If there is a conflict between this Third Amendment, the Agreement, the First Amendment or the Second Amendment, the provisions of this Third Amendment shall prevail with regard to the conflict.

{Execution Page Follows}
{Remainder Intentionally Left Blank}

IN WITNESS WHEREOF, the parties put their hands to this Third Amendment on the dates indicated below.

FORT BEND COUNTY

FBS



Robert E. Hebert, County Judge

8-22-2017

Date



Authorized Agent- Signature

Manuela H. Arroyo

Authorized Agent- Printed Name

CEO

Title

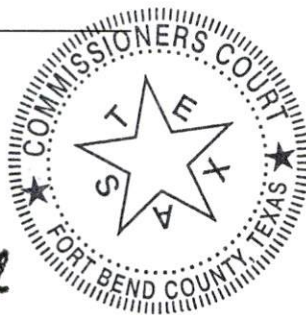
8/15/17

Date

ATTEST:



Laura Richard, County Clerk



AUDITOR'S CERTIFICATE

I hereby certify that funds in the amount of \$ _____ are available to pay the obligation of Fort Bend County within the foregoing Agreement.



Robert Ed Sturdivant, County Auditor

EXHIBIT A

STATE OF TEXAS §
 §
COUNTY OF FORT BEND §

SECOND AMENDMENT TO AGREEMENT FOR TRANSPORTATION SERVICES

THIS SECOND AMENDMENT is entered into by and between Fort Bend County, (hereinafter "County"), a body corporate and politic under the laws of the State of Texas, and Fort Bend Seniors Meals on Wheels & Much, Much More! (hereinafter "FBS"), a licensed 501(c)(3) nonprofit organization.

THAT, WHEREAS, the parties have executed and accepted that Agreement for Transportation Services, (hereinafter the "Agreement") on or about August 26, 2014, and as amended on August 25, 2015, attached hereto as Exhibit "A" and incorporated by reference; and

WHEREAS, the following changes are incorporated as if a part of the original Agreement incorporated by reference in the same as if fully set forth verbatim herein:

NOW, THEREFORE, the parties do mutually agree as follows:

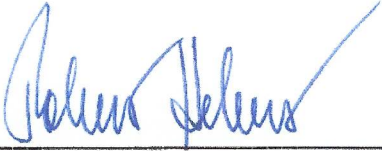
1. The term of the Agreement shall be extended beginning on August 25, 2016, and ending on August 30, 2017. Either party may terminate this Agreement at any time by providing ninety (90) days written notice.
2. All terms and conditions of the Agreement, including any addenda or amendments, not modified herein shall remain in full force and effect and for the term of the Agreement. If there is a conflict between this Second Amendment and the Agreement for Transportation Services, the provisions of this Second Amendment shall prevail with regard to the conflict.

{Execution Page Follows}
{Remainder Intentionally Left Blank}

IN WITNESS WHEREOF, the parties put their hands to this Amendment on the dates indicated below.

FORT BEND COUNTY

FBS



Robert E. Hebert, County Judge

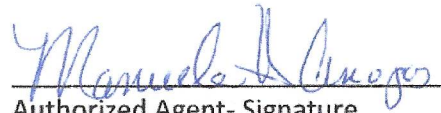
August 18, 2016

Date

ATTEST:



Laura Richard, County Clerk



Authorized Agent- Signature

Marvella G. Arraras

Authorized Agent- Printed Name



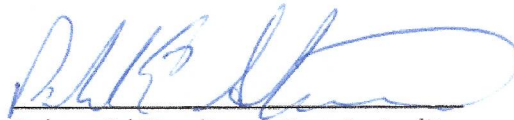
Title

8/3/16

Date

AUDITOR'S CERTIFICATE

I hereby certify that funds in the amount of \$ _____ are available to pay the obligation of Fort Bend County within the foregoing Agreement.



Robert Ed Sturdivant, County Auditor

STATE OF TEXAS §
 §
COUNTY OF FORT BEND §

FIRST AMENDMENT TO AGREEMENT FOR TRANSPORTATION SERVICES

THIS FIRST AMENDMENT is entered into by and between Fort Bend County, (hereinafter "County"), a body corporate and politic under the laws of the State of Texas, and Fort Bend Seniors Meals on Wheels & Much, Much More! (hereinafter "FBS"), a licensed 501(c)(3) nonprofit organization.

THAT, WHEREAS, the parties have executed and accepted that Agreement for Transportation Services, (hereinafter the "Agreement") on or about August 26, 2014, attached hereto as Exhibit "A" and incorporated by reference; and

WHEREAS, the following changes are incorporated as if a part of the Agreement:

1. The term of the Agreement shall be extended for one year beginning on the date of execution by both parties. Either party may terminate this Agreement at any time by providing ninety (90) days written notice.
2. Under Section 1, "Scope of Agreement" B, Section Nine (9), the Agreement shall be amended to read "9. Provide FBS a No-Show/Late Cancel Report every three (3) months indicating clients that are violating the County's policy. Along with the report, County shall draft warning letters to FBS for distribution."
3. Under Section III, A. "Compensation", the Agreement shall be amended to read: "For and in consideration of the services rendered by the County, FBS shall pay to the County \$50.39 per hour for services provided in vehicles owned by the County and \$61.73 for services provided in vehicles owned by the County's bus contractor."
4. Under Section 4 C. "Notice", the Agreement shall be amended to read:

If to the County: Fort Bend County
 Attn: Fort Bend County Transit Director
 Paulette Shelton
 12550 Emily Court, Suite 400
 Sugar Land, TX 77478

With a copy to: Fort Bend County
 Attn: County Judge
 301 Jackson Street
 Richmond, Texas 77469

Contractor: Fort Bend Seniors Meals on Wheels and Much, Much, More
 Manuela H. Arroyos
 P.O. Box 1488

Rosenberg, Texas 77471

5. All terms and conditions of the Agreement, including any addenda, not modified herein shall remain in full force and effect and for the term of Agreement. If there is a conflict between this Amendment and the Agreement for Transportation Services, the provisions of this Amendment shall prevail with regard to the conflict.

FORT BEND COUNTY

FBS



Robert E. Hébert, County Judge

August 25, 2015
Date




Authorized Agent- Signature

Marcela Arroyo
Authorized Agent- Printed Name

Chief Executive Officer
Title
8/18/15
Date

AUDITOR'S CERTIFICATE

I hereby certify that funds in the amount of \$_____ are available to pay the obligation of Fort Bend County within the foregoing Agreement.



Robert Ed Sturdivant, County Auditor

STATE OF TEXAS §
 §
COUNTY OF FORT BEND §



AGREEMENT FOR TRANSPORTATION SERVICES

THIS AGREEMENT is made and entered into by and between Fort Bend County, a body corporate and politic under the laws of the State of Texas (hereinafter "County"), and Fort Bend Seniors Meals on Wheels & Much Much More (hereinafter "FBS").

WITNESSETH:

WHEREAS, FBS has agreed to provide transportation services to older persons for the Houston Galveston Area Agency on Aging; and

WHEREAS, FBS desires to subcontract these transportation services to the County; and

WHEREAS, the County has identified the need to provide public transportation services in the County.

NOW, THEREFORE, the County and FBS, in consideration of the mutual covenants and agreements herein contained, do mutually agree as follows:

**SECTION I
SCOPE OF AGREEMENT**

A. FBS agrees to:

1. Determine eligibility of all clients in accordance with Houston Galveston Area Agency on Aging requirements.
2. Determine eligibility of all FBS clients for transportation services funded by sources other than the Houston Galveston Area Agency on Aging.
3. Refer only eligible approved FBS clients to the County for transportation.
4. Submit requests for new clients at least two weeks in advance of adding the client for services. FBS will coordinate with County the senior center location that the new client will attend.
5. Provide a list of suspended clients at least one week in advance of suspension start date.
6. Provide a list of previously referred clients by 3:00 pm each day identifying those clients that must be cancelled for pick-up the following day.
7. Provide notification for special event transportation needs at least three (3) weeks in advance of the need for a special event. Provide the special event final transportation list at least one (1) week in advance of the event.
8. Provide notification for field trips (one (1) center to certain destination) at least two (2) weeks in advance of the need for the field trip. Provide the final transportation list at least one (1) week in advance of the field trip.

9. Review and approve proposed schedules and schedule changes and respond to requests for schedule approvals within two (2) business days of receipt of schedules.
10. Identify FBS Administration authorized to provide daily and weekly lists and to approve schedules.
11. Notify eligible approved clients of approved schedules, schedule changes and any transportation service suspension mandated by the County or by FBS.
12. Assist County in identifying appropriate routes for placement of Ambassadors.
13. Provide timely technical assistance to the County.

B. County agrees to:

1. Provide transportation services to eligible approved clients referred by FBS.
2. To the extent allowed by law, provide services in accordance with all applicable federal and state laws, rules, and regulations.
3. Prepare and submit schedules for approval by FBS staff within three (3) business days of a request for schedule creation or change.
4. Notify FBS regarding any changes in client scheduled pick-up times.
5. Notify FBS if the County is unable to provide the agreed upon services within three (3) business days except in the case of inclement weather and/or other emergencies. Notification for inclement weather, emergency or other service interruptions will be provided as soon as possible after service closure decisions are made.
6. Provide Ambassadors on selected FBS routes to provide assistance to riders. Ambassadors are to assist with taking attendance on vehicles, monitoring seat belt and wheelchair tie-down safety, assistance with boarding and alighting vehicles, assistance with boarding and alighting vehicles in an orderly fashion, assistance with packages and/or other mobility devices, and door to door assistance. Ambassador services provided by County are subject to continued grant funding.
7. Upon request by FBS, provide periodic reports detailing passenger trip history including no-show and late cancel trips, within five (5) business days of request.
8. Fort Bend County acknowledges that it is not an agent, servant or employee of FBS and that it is, to the extent allowed by law, responsible for its own performance and actions and for those of its agents or employees related to the performance of this Agreement.

SECTION II TERM OF AGREEMENT

The term of this Agreement shall be for one (1) year beginning on the date of execution by both parties. Either party may terminate this Agreement at any time by providing ninety (90) days written notice.

SECTION III
COMPENSATION

- A. For and in consideration of the services rendered by the County, FBS shall pay to the County \$47.86 per hour for services provided in vehicles owned by the County and \$58.56 per hour for services provided in vehicles owned by the County's bus contractor.
- B. Fort Bend County will notify Fort Bend Seniors of any rate increases within five (5) business days of receiving notice from County's bus contractor.
- C. The County shall submit an invoice to FBS by the forty-fifth (45th) calendar day following each month in which services were provided. The invoice shall provide a detailed accounting of the number of FBS rides, the number of billable hours, the number of dead head hours, the number of in-kind hours and the vehicle type used.
- D. Payment shall be due within thirty (30) days of receipt of a complete invoice.

SECTION IV
NOTICE

- A. Any notice required to be given under the provisions of this Agreement shall be in writing and shall be duly served when it shall have been deposited, enclosed in a wrapper with the proper postage prepaid thereon, and duly registered or certified, return receipt requested, in a United States Post Office, addressed to the County or FBS at the addresses set forth below.
- B. If mailed, any notice or communication shall be deemed to be received three days after the date of deposit in the United States Mail.
- C. Unless otherwise provided in this Agreement, all notices shall be delivered to the following addresses:

1. If to FBS:

Fort Bend Seniors Meals on Wheels and Much Much More
Manuela H. Arroyos
P.O. Box 1488
Rosenberg, Texas 77471

2. If to the County:

Fort Bend County Transit Director
Paulette Shelton
12550 Emily Court, Suite 400
Sugar Land, Texas 77478

- D. Either party may designate a different address by giving the other party ten (10) days written notice.

SECTION V
INDEMNIFICATION

- A. FBS SHALL SAVE HARMLESS THE COUNTY FROM AND AGAINST ALL CLAIMS, LIABILITY, AND EXPENSES, INCLUDING REASONABLE ATTORNEYS FEES, ARISING FROM ACTIVITIES OF FBS, ITS AGENTS, CONTRACTORS OR EMPLOYEES, PERFORMED UNDER THIS AGREEMENT THAT RESULT FROM THE NEGLIGENT ACT, ERROR, OR OMISSION OF FBS OR ANY OF FBS' AGENTS, SERVANTS OR EMPLOYEES.
- B. FBS SHALL ALSO SAVE HARMLESS THE COUNTY FROM AND AGAINST ANY AND ALL EXPENSES, INCLUDING REASONABLE ATTORNEY'S FEES WHICH MIGHT BE INCURRED BY THE COUNTY, IN LITIGATION OR OTHERWISE RESISTING SAID CLAIMS OR LIABILITIES THAT MIGHT BE IMPOSED ON THE COUNTY AS THE RESULT OF SUCH ACTIVITIES BY FBS, ITS AGENTS, CONTRACTORS OR EMPLOYEES.

SECTION VI
SUCCESSORS AND ASSIGNS

- A. The County and FBS bind themselves and their successors, executors, administrators and assigns of such other party, in respect to all covenants of this Agreement.
- B. Neither the County nor FBS shall assign, sublet or transfer its or his interest in this Agreement without prior written consent of the other.
- C. Nothing herein shall be construed as creating any personal liability on the part of any officer or agent of any public and/or governmental body that may be a party hereto.

SECTION VII
MODIFICATIONS

- A. This instrument contains the entire Agreement between the parties relating to the rights herein granted and obligations herein assumed.
- B. Any oral or written representations or modifications concerning this instrument shall be of no force and effect excepting a subsequent written modification signed by both parties hereto.

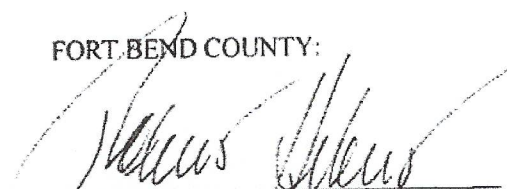
SECTION VIII
MERGER

- A. The Parties agree that this Agreement contains all of the terms and conditions of the understanding of the parties relating to the subject matter hereof.
- B. All prior negotiations, discussions, correspondence and preliminary understandings between the parties and others relating hereto are superseded by this Agreement.

SECTION IX
MISCELLANEOUS

- A. This Agreement shall be construed under and in accordance with the laws of the State of Texas, and all obligations of the parties created hereunder and performable in Fort Bend County, Texas.
- B. In the event one or more of the provisions contained in this Agreement shall for any reason be held to be invalid, illegal or unenforceable to any respect, such invalidity, illegality, or unenforceability shall not affect any other provision hereof and this Agreement shall be construed as if such invalid, illegal, or unenforceable provision had never been contained herein.
- C. The waiver by either party of a breach of any provision of this Agreement shall not operate as or be construed as a waiver of any subsequent breach.
- D. By entering into this Agreement, the parties do not intend to create any obligations, express or implied, other than those specifically set out in this Agreement.
- E. Nothing in this Agreement shall create any rights or obligations in any party who is not a signatory to this Agreement.

FORT BEND COUNTY:



Robert E. Hebert, County Judge

8-26-14
Date

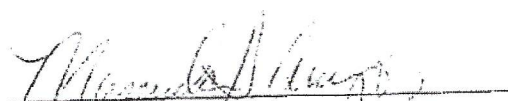
ATTEST:



Dianne Wilson, County Clerk



FORT BEND SENIORS MEALS ON WHEELS
& MUCH MUCH MORE:



Manuela H. Arroyos

9/13/14
Date

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
 Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

**OFFICE USE ONLY
 CERTIFICATION OF FILING**

Certificate Number:
 2016-100990

 Date Filed:
 08/17/2016

 Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Fort Bend Seniors Meals on Wheels
 Rosenberg, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Fort Bend County

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

13538
 Transportation Services

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.



6



I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

Manuela D Arroyos

 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Manuela Arroyos this the 17 day of August 2016, to certify which, witness my hand and seal of office.

Angelica Martinez

 Signature of officer administering oath

ANGELICA MARTINEZ

 Printed name of officer administering oath

EX. ASSIST.

 Title of officer administering oath

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
 Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
 Fort Bend Seniors Meals on Wheels
 Rosenberg, TX United States

Certificate Number:
 2016-100990

Date Filed:
 08/17/2016

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
 Fort Bend County

Date Acknowledged:
 08/18/2016

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.
 13538
 Transportation Services

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
 Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

Certificate Number:
 2017-252900

Date Filed:
 08/22/2017

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Fort Bend Seniors Meals on Wheels
 Rosenberg, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Fort Bend County

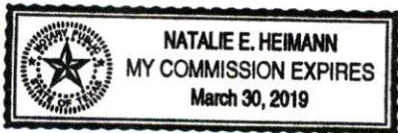
3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

13538
 Transportation Services

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Fort Bend Seniors Meals on Wheels	Rosenberg, TX United States	X	

5 Check only if there is NO Interested Party.

6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



Manuela Arroyos
 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Manuela Arroyos*, this the *22nd* day of *August*, 20 *17*, to certify which, witness my hand and seal of office.

Natalie E. Heimann Signature of officer administering oath
 Natalie E. Heimann Printed name of officer administering oath
 Administrative Specialist Title of officer administering oath

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
 Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
 Fort Bend Seniors Meals on Wheels
 Rosenberg, TX United States

Certificate Number:
 2017-252900

Date Filed:
 08/22/2017

Date Acknowledged:
 08/23/2017

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
 Fort Bend County

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.
 13538
 Transportation Services

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
Fort Bend Seniors Meals on Wheels	Rosenberg, TX United States	X	

5 Check only if there is NO Interested Party.

6 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

 Signature of officer administering oath

 Printed name of officer administering oath

 Title of officer administering oath