

**HHSC CONTRACT NO. HHS000477100010**  
**AMENDMENT NO. 1**  
**RENEWAL**

The Health and Human Services Commission (“System Agency” or “HHSC”) and Collin County d\b\ County of Collin (“Grantee”), each a “Party” and collectively the “Parties” to that Community Mental Health Grant (“MH/CMHG”) program contract, effective September 1, 2020 and denominated HHSC Contract No. HHS000477100010 (the “Contract”), now want to amend the Contract.

Whereas, HHSC has chosen to exercise its option to renew the Contract in accordance with Section III, Duration, of the Contract; and

Whereas, the Parties want to add \$72,912.00 to the total Contract value for the renewal period beginning September 1, 2022 through August 31, 2023; and

Whereas, HHSC wants to change its contract representative contact information, and its address for submission of legal notices; and

Whereas, the Parties want to replace Attachment A-3, Project Expenditure Report, with Attachment A-3, Revised Project Expenditure Report; and

Whereas, the Parties want to add award amounts for the renewal period beginning September 1, 2022 through August 31, 2023 to Attachment B, Budget and Target Procedures.

The Parties therefore amend the Contract as follows:

1. Section III, Duration, of the Contract Signature Document, is hereby amended to reflect a revised termination date of August 31, 2023.
2. Section IV, Budget, is amended and restated as follows:

**IV. BUDGET**

The total value of this Contract will not exceed \$218,736.00. This includes the System Agency’s share of \$109,368.00 and Grantee’s required match amount of \$109,368.00. All expenditures under the Contract will be in accordance with the provisions outlined in **Attachment B, Budget and Target Procedures**.

3. HHSC’s contact information in Section VI, Contract Representatives, is hereby amended as follows:

**System Agency**

Health and Human Services Commission

P.O. Box 13247

Austin, Texas 78711-3247

Contact Person: Reginah Quackenbush

Email: reginah.quackenbush@hhs.texas.gov

Telephone: 512-206-5917

Fax Number: 512-206-5307

4. HHSC's address in Section VII, Legal Notices, is hereby amended as follows:

**System Agency**

Health and Human Services Commission

North Austin Complex

4601 W. Guadalupe St.

Austin, Texas 78711-3247

Attention: Chief Counsel

5. Attachment A-3, Project Expenditure Report, is hereby deleted in its entirety and replaced with Attachment A-3, Revised Project Expenditure Report.
6. Attachment B, Budget and Target Procedures, is amended as follows:
- a. Sections B through D are replaced as follows:
    - B. Funding Amounts by State Fiscal Year (i.e., September 1st through August 31st)
      - 1. 2021: HHSC Award - \$36,456.00, Contractor Match - \$36,456.00;
      - 2. 2022: HHSC Award - \$36,456.00, Contractor Match - \$36,456.00; and
      - 3. 2023: HHSC Award - \$36,456.00, Contractor Match - \$36,456.00.
    - C. Total reimbursement for the grant term will not exceed \$109,368.00.
    - D. Grantee's match requirement for the grant term will not exceed \$109,368.00.
7. This Amendment is effective as of September 1, 2022.
8. Except as modified by this Amendment, all terms and conditions of the Contract shall remain in full effect.
9. Any further revisions to the Contract shall be by written agreement of the Parties.

*Signature Page follows*

**SIGNATURE PAGE FOR AMENDMENT NO. 1  
HHSC CONTRACT NO. HHS000477100010**

**HEALTH AND HUMAN SERVICES COMMISSION    COLLIN COUNTY D\B\A COUNTY OF COLLIN**

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

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

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

Date of Signature: \_\_\_\_\_ Date of Signature: \_\_\_\_\_

**THE FOLLOWING DOCUMENT IS ATTACHED AND INCORPORATED AS PART OF THE CONTRACT:**

**ATTACHMENT A-3:        REVISED PROJECT EXPENDITURE REPORT**

Attachment A-3 Revised Project Expenditure Report

Vendor Name	Contract #	Project Name	Project Category	Report Month	Fiscal Year	Budget Category	Approved HHSC Requested Funds Budgeted	Match Funds Budgeted	Cumulative HHSC Funds Expended	Cumulative Match Utilized/Expended	Total Cumulative Expenditures
Vendor Name	Contract Number	[Project Name]	Project Category	SELECT MONTH	FY	Personnel					\$0.00
Vendor Name	Contract Number	[Project Name]	Project Category	SELECT MONTH	FY	Fringe Benefits					\$0.00
Vendor Name	Contract Number	[Project Name]	Project Category	SELECT MONTH	FY	Travel					\$0.00
Vendor Name	Contract Number	[Project Name]	Project Category	SELECT MONTH	FY	Supplies					\$0.00
Vendor Name	Contract Number	[Project Name]	Project Category	SELECT MONTH	FY	Contractual					\$0.00
Vendor Name	Contract Number	[Project Name]	Project Category	SELECT MONTH	FY	Other					\$0.00
Vendor Name	Contract Number	[Project Name]	Project Category	SELECT MONTH	FY	Equipment					\$0.00
Vendor Name	Contract Number	[Project Name]	Project Category	SELECT MONTH	FY	Indirect					\$0.00
Vendor Name	Contract Number	[Project Name]	Project Category	SELECT MONTH	FY	<b>Total</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
							<b>YTD Earned Revenue</b>				
							<b>Cumulative HHSC funds expended less earned revenue</b>		<b>\$0.00</b>		

**Certificate Of Completion**

Envelope Id: 2E63949C219C41C8A1AAA4DD70952853	Status: Sent
Subject: Amending \$364,560.00; HHS000477100010; Collin County dba County of Collin A-1; HHSC/MSS/BHS	
Procurement Number:	
Source Envelope:	
Document Pages: 13	Signatures: 0
Certificate Pages: 2	Initials: 0
AutoNav: Enabled	Envelope Originator:
Enveloped Stamping: Enabled	Texas Health and Human Services Commission
Time Zone: (UTC-06:00) Central Time (US & Canada)	1100 W. 49th St.
	Austin, TX 78756
	PCS_DocuSign@hhsc.state.tx.us
	IP Address: 167.137.1.15

**Record Tracking**

Status: Original	Holder: Texas Health and Human Services	Location: DocuSign
5/26/2022 8:30:12 AM	Commission	
	PCS_DocuSign@hhsc.state.tx.us	
Security Appliance Status: Connected	Pool: FedRamp	
Storage Appliance Status: Connected	Pool: Texas Health and Human Services	Location: DocuSign
	Commission	

**Signer Events**

Signature	Timestamp
Chris Hill chill@co.collin.tx.us Collin County Security Level: Email, Account Authentication (None)	Sent: 5/26/2022 8:35:39 AM

**Electronic Record and Signature Disclosure:**  
Not Offered via DocuSign

Trina K. Ita  
trina.ita01@hhs.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
--------------------	--------	-----------

MH Contracts mhcontracts@hhsc.state.tx.us Security Level: Email, Account Authentication (None)	COPIED	Sent: 5/26/2022 8:35:39 AM
--	--------	----------------------------

**Electronic Record and Signature Disclosure:**  
Not Offered via DocuSign

Carbon Copy Events	Status	Timestamp
<p>Reginah Quackenbush            reginah.quackenbush@hhs.texas.gov            Security Level: Email, Account Authentication (None)</p> <p><b>Electronic Record and Signature Disclosure:</b>            Not Offered via DocuSign</p>	<div style="border: 2px solid blue; padding: 5px; display: inline-block;"><b>COPIED</b></div>	Sent: 5/26/2022 8:35:38 AM
<p>Alyse Ferguson            a Ferguson@co.collin.tx.us            Security Level: Email, Account Authentication (None)</p> <p><b>Electronic Record and Signature Disclosure:</b>            Not Offered via DocuSign</p>	<div style="border: 2px solid blue; padding: 5px; display: inline-block;"><b>COPIED</b></div>	Sent: 5/26/2022 8:35:40 AM Viewed: 6/2/2022 8:56:52 AM
<p>Christopher Dickinson            christopher.dickinson@hhs.texas.gov            Security Level: Email, Account Authentication (None)</p> <p><b>Electronic Record and Signature Disclosure:</b>            Not Offered via DocuSign</p>		

Witness Events	Signature	Timestamp
----------------	-----------	-----------

Notary Events	Signature	Timestamp
---------------	-----------	-----------

Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	5/26/2022 8:35:39 AM

Payment Events	Status	Timestamps
----------------	--------	------------