

DEPARTMENT OF STATE HEALTH SERVICES



Amendment
To

The Department of State Health Services (DSHS) and HIDALGO COUNTY HEALTH DEPARTMENT (Contractor) agree to amend the Program Attachment # 001 (Program Attachment) to Contract # 2008-023208 (Contract) in accordance with this Amendment No. 001A : TB - PREVENTION AND CONTROL, effective 02/06/2008.

The purpose of this amendment is to decrease the total contract amount from \$234,565 to \$72,688, reallocating \$161,877 funds to SDI contract.

Therefore, DSHS and Contractor agree as follows:

Program Attachment is changed as follows:

PROGRAM ATTACHMENT NO. ~~001~~ 001A

Department of State Health Services

Contractor

Signature of Authorized Official

Signature of Authorized Official

Date: _____

Date: _____

Bob Burnette, C.P.M., CTPM

Name: _____

Director, Client Services Contracting Unit

Title: _____

1100 WEST 49TH STREET
AUSTIN, TEXAS 78756

Address: _____

(512) 458-7470

Phone: _____

Bob.Burnette@dshs.state.tx.us

Email: _____

DEPARTMENT OF STATE HEALTH SERVICES



1100 WEST 49TH STREET
AUSTIN, TEXAS 78756-3199

CATEGORICAL BUDGET CHANGE REQUEST

DSHS PROGRAM: TB - PREVENTION AND CONTROL

CONTRATOR: HIDALGO COUNTY HEALTH DEPARTMENT

CONTRACT NO: 2008-023208

CONTRACT TERM: 09/01/2007

THRU: 08/31/2008

BUDGET PERIOD: 09/01/2007

THRU: 08/31/2008

CHG: 001A

DIRECT COST (OBJECT CLASS CATEGORIES)			
	Current Approved Budget (A)	Revised Budget (B)	Change Requested
Personnel	\$164,411.00	\$54,785.00	\$(109,626.00)
Fringe Benefits	\$48,595.00	\$17,903.00	\$(30,692.00)
Travel	\$4,365.00	\$0.00	\$(4,365.00)
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$17,194.00	\$0.00	\$(17,194.00)
Contractual	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total Direct Charges	\$234,565.00	\$72,688.00	\$(161,877.00)
INDIRECT COST			
Base (\$)	\$0.00	\$0.00	\$0.00
Rate (%)	0.00%	0.00%	0.00%
Indirect Total	\$0.00	\$0.00	\$0.00
PROGRAM INCOME			
Program Income	\$23,849.00	\$12,531.00	\$(11,318.00)
Other Match	\$0.00	\$0.00	\$0.00
Income Total	\$23,849.00	\$12,531.00	\$11,318.00
LIMITS/RESTRICTIONS			
Advance Limit	\$0.00	\$0.00	\$0.00
Restricted Budget	\$0.00	\$0.00	\$0.00
SUMMARY			
Cost Total	\$234,565.00	\$72,688.00	\$(161,877.00)
Performing Agency Share	\$23,849.00	\$12,531.00	\$(11,318.00)
Receiving Agency Share	\$234,565.00	\$72,688.00	\$(161,877.00)
Total Reimbursements Limit	\$234,565.00	\$72,688.00	\$(161,877.00)
JUSTIFICATION			
Decrease to correct total contract amount from \$234,565 to \$72,688, reallocating \$161,877 funds to SDI contract.			

Financial status reports are due: 12/31/2007, 03/31/2008, 06/30/2008, 10/30/2008, 10/31/2008