



Texas A&M University System
Office of Sponsored Research Services

SUBRECIPIENT COMMITMENT FORM

All subrecipients should complete this form. It provides a checklist of documents and certifications required by sponsors, as well as an area for the Authorized Organizational Representative to sign.

Subrecipient Legal Name: Hidalgo County

Subrecipient Sponsored Programs Contact Name: Eduardo Olivarez, Chief Administrative Officer

Phone: 956-383-6221 Fax: 956-383-8864 E-mail: eddie.olivarez@hchd.org

Subrecipient Principal Investigator: Brenda Salazar

Address: 1304 S. 25th St City, State, Zip +4: Edinburg, TX 78539

Phone: 956-383-6221 Fax: 956-383-8864 E-mail: brenda.salazar@hchd.org

Prime Sponsor: n/a

Texas A&M Principal Investigator: Dr. Genny Carrillo-Zuniga

Texas A&M Proposal Title: Development of an Environmental/Epidemiological Database in the Texas-Mexico Border

Subrecipient Total Funds Requested: \$25,000.00

Subrecipient Performance Period: Start Date 10/01/2011 End Date 04/30/2013

Section A – Proposal Documents

The following documents are included in our subaward proposal submission:

- STATEMENT OF WORK** (required)
- BUDGET AND BUDGET JUSTIFICATION** (if NIH, Sponsor Budget and Checklist required)
- NEGOTIATED FACILITIES AND ADMINISTRATIVE RATE AGREEMENT** (required)
- SUBRECIPIENT COMMITMENT FORM** (this form) completed and signed by subrecipient Authorized Organizational Representative (required)

Section B – Certifications (check all that apply)

1. **Human Subjects** Yes No

If Yes, copies of the IRB approval and approved "Informed Consent" form must be provided before any subaward can be issued. Please return the IRB approval and Informed Consent form as an attachment to this form.

If pending, please forward these documents to the Subaward Negotiator as soon as they become available. Please indicate the Texas A&M Principal Investigator's name and subcontract number for reference.

2. **Animal Subjects** Yes No

If Yes, a copy of the IACUC approval must be provided before any subaward will be issued.

3. **Cost –sharing** Yes No

(Cost-sharing amounts if applicable, explanation of sources should be included in the subrecipient's budget. Please note that an annual verification of cost-share commitment will be required.)

Section C - Institutional Information

1. DUNS Number of Subrecipient receiving award: 10-311-0834
2. EIN of Subrecipient receiving award: 746000717
3. Congressional Districts (list one or more): TX-15 and TX-28

Section D – FFATA Reporting

1. **Performance site same as address above?** Yes No

If No, list performance site address _____

2. Executive compensation information for the Subrecipient must be reported if: More than 80% of annual gross revenues are from the Federal Government, and those revenues are greater than \$25M annually; compensation information is not already available through reporting to the SEC.

Exempt from reporting compensation? Yes No

If No, proceed with filling out the top 5 paid officers:

Officer 1 Name: _____

Officer 1 Compensation: _____

Officer 2 Name: _____

Officer 2 Compensation: _____

Officer 3 Name: _____

Officer 3 Compensation: _____

Officer 4 Name: _____

Officer 4 Compensation: _____

Officer 5 Name: _____

Officer 5 Compensation: _____

Section E – Approved for Subrecipient

The information, certifications, and representations above have been read, signed, and made by an Authorized Organizational Representative of the Subrecipient named herein. The appropriate programmatic and administrative personnel involved in this application are aware of agency policies in regard to subawards and are prepared to establish the necessary inter-institutional agreements consistent with those policies.

Any work begun and/or expenses incurred prior to execution of a subaward agreement are at the Subrecipient's own risk.

Signature of Subrecipient's Authorized Organizational Representative

Ramon Garcia, Hidalgo County Judge

Name and title of Authorized Institutional Representative

08/30/11

Date

956-318-2699

Fax

1615 S. Clossner, Suite J

Address

Edinburg, TX 78539

City, State, Zip+4

956-318-2600

Phone

ramon.garcia@co.hidalgo.tx.us

E-mail address