

A202

**Depository/Authorized Signatories Designation Form
TEXAS COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM
DEPOSITORY/AUTHORIZED SIGNATORIES DESIGNATION FORM**

Grant Recipient HIDALGO COUNTY TxCDBG Contract No. 713005

The individuals listed below are designated by resolution as authorized signatories for contractual documents.

<u>Ramon Garcia</u> (Name) Hidalgo County Judge (Title)	<u>Yolanda Chapa</u> (Name) Hidalgo County Chief Administrator (Title)
_____ (Signature)	_____ (Signature)

In addition to the individuals listed above, the individuals listed below are designated by resolution as authorized signatories for the *Request for Payment Form* (Form A203)—(At least two (2) signatories required).

<u>Diana R. Serna</u> (Name) Urban County Program Executive Director (Title)	<u>Antonio Barco</u> (Name) Urban County Program Deputy Director (Title)
_____ (Signature)	_____ (Signature)
_____ (Name)	_____ (Name)
_____ (Title)	_____ (Title)
_____ (Signature)	_____ (Signature)

NOTE: A copy of a Resolution passed by the city council or county commissioner's court authorizing the signatories must be submitted along with this form. Grant Recipients are strongly encouraged to use the sample resolution provided.

RESOLUTION AUTHORIZING SIGNATORIES

A RESOLUTION BY COMMISSIONER'S COURT OF THE COUNTY OF HIDALGO TEXAS, DESIGNATING AUTHORIZED SIGNATORIES FOR CONTRACTUAL DOCUMENTS AND DOCUMENTS FOR REQUESTING FUNDS PERTAINING TO THE TEXAS COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM (TxCDBG) CONTRACT NUMBER 713005.

WHEREAS, the County of Hidalgo, Texas has received a Texas Community Development Block Grant award, 2013 Colonia Economically Distressed Areas Program (CEDAP) Contract No. 713005, to provide first time Rehabilitation: Single-Unit Sewer Service improvements, and;

WHEREAS, it is necessary to appoint persons to execute contractual documents and documents for requesting funds from the Texas Department of Agriculture, and;

WHEREAS, an original signed copy of the TxCDBG *Depository/Authorized Signatories Designation Form (Form A202)* is to be submitted with a copy of this Resolution, and;

WHEREAS, the County of Hidalgo, Texas acknowledges that in the event that an authorized signatory of the County changes (elections, illness, resignations, etc.), the County must provide TxCDBG with the following:

- a resolution stating who the new authorized signatory is (not required if this original resolution names only the title and not the name of the signatory); and
- a revised TxCDBG *Depository/ Authorized Signatories Designation Form (Form A202)*.

NOW THEREFORE, BE IT RESOLVED BY COMMISSIONER'S COURT OF THE COUNTY OF HIDALGO, TEXAS, AS FOLLOWS:

The County Judge, Hidalgo County Chief Administrator, Urban County Program Executive Director, and Urban County Deputy Director be authorized to execute contractual documents between the Texas Department of Agriculture and the County for the 2013 Texas Community Development Block Grant Program Contract No. 713005.

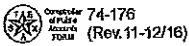
The County Judge, Hidalgo County Chief Administrator, Urban County Program Executive Director, and Urban County Deputy Director be authorized to execute the *State of Texas Purchase Voucher* and *Request for Payment Form* documents required for requesting funds approved in the 2013 Texas Community Development Block Grant Program Contract No. 713005.

PASSED AND APPROVED BY COMMISSIONER'S COURT OF THE COUNTY OF HIDALGO, TEXAS on September 10, 2013.

Ramon Garcia, County Judge
Hidalgo County, Texas

Attest:

Arturo Guajardo Jr., County Clerk
Hidalgo County, Texas



For Comptroller's Use Only		

Direct Deposit Authorization

This form may be used by vendors, individual recipients or state employees to receive payments from the state of Texas by direct deposit or to change/cancel existing direct deposit information.

Transaction Type

SECTION 1	<input type="checkbox"/> New setup (Sections 2, 3, 4 and 5)	<input type="checkbox"/> Change account type (Sections 2, 3, 4 and 5)
	<input type="checkbox"/> Change financial institution (Sections 2, 3, 4 and 5)	<input type="checkbox"/> Cancellation (Sections 2 and 5 - Sections 6 and 7 for state agency use)
	<input type="checkbox"/> Change account number (Sections 2, 3, 4 and 5)	

Payee Identification

SECTION 2	Payee type	<input type="checkbox"/> Texas Identification Number (TIN)	Mail code (If not known, leave blank.)
	<input type="checkbox"/> State employee	<input type="checkbox"/> Employer Identification Number (EIN)	
	<input type="checkbox"/> Vendor or other recipient	<input type="checkbox"/> Social Security Number (SSN)*	7 4 6 0 0 0 7 1 7
	Payee name	Phone number	
	County of Hidalgo Urban County Program - Accounts Payable	(956)787-8127 ext.	
	Mailing address	City	State ZIP code
	3304 W. Alberta Rd	Edinburg	Tx 78539

Financial Institution (Completion by financial institution is recommended.)

SECTION 3	Financial institution name	City	State
	Lone Star National Bank	Pharr	Tx
	Routing transit number (9 digits)	Customer account number (maximum 17 characters)	Type of account
	1 1 4 9 - 1 1 6 8 - 7	7 1 0 1 5 6 7 1	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings
	Financial representative name (optional)	Title (optional)	
	Rosalinda Gonzalez	Treasury Management Liason	
	Financial representative signature (optional)	Phone number (optional)	Date (optional)
		(956)984-2147 ext.	

International Payments Verification (required)

SEC 4	Will these payments be forwarded to a financial institution outside the United States?..... <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	If "YES," also complete the ACH (Direct Deposit) Payment Destination Confirmation (Form 74-227).

Authorization for Setup, Changes or Cancellation (required)

SECTION 5	I authorize the Texas Comptroller of Public Accounts to deposit my payments from the state of Texas to my financial institution electronically. I understand that the Texas Comptroller of Public Accounts will reverse any payments made to my account in error. I further understand that the Texas Comptroller of Public Accounts will comply at all times with the National Automated Clearing House Association's rules. (For further information on these rules, please contact your financial institution.)		
	Authorized signature	Printed name	Date
	sign here	Ramon Garcla, County Judge	

Cancellation by Agency (for state agency use)

SEC 6	Reason	Date

Authorized Signature (for state agency use)

SECTION 7	Signature	Date
	sign here	
	Phone number	Agency number
	ext.	551
	Agency name	
	Texas Department of Agriculture	
	Comments	

Please return your completed form to:

Texas Department of Agriculture
 Accounts Payable/Direct Deposit Program
 1700 North Congress Avenue
 Austin, TX 78701-1436

Phone: 512-463-7476