



Texas Department of State Health Services (DSHS)

Fiscal Year 2018 WIC FORM A: Renewal Application

Special Supplemental Nutrition Program for Women, Infants and Children (WIC)

This form is part of the organization's contractual agreement with DSHS and must be completed in its entirety.

The organization is responsible for notifying DSHS of any changes within the fiscal year of the information documented on this form.

ORGANIZATION INFORMATION

1) LEGAL BUSINESS NAME (no abbreviations): **Hidalgo County Health and Human Services WIC Program**

2) MAILING Address Information (include mailing address, street, city, county, state and 9-digit zip code):
3105 W. University Drive, Edinburg, Texas 78539

3) PAYEE Name and Mailing Address (where payment is to be received if different from above):
Norma Garcia, Hidalgo County Treasurer, 2801 S. Business 281, Edinburg, Texas 78539-0834

4a) DUNS Number (9-digit): 10-311-0834

b) CCR number (optional/please provide if available):

5) Federal Tax ID No. (9 digit) or State of Texas Comptroller Vendor ID No. (14 digit): **74-6000717**

6a) TYPE OF ENTITY (check all that apply by double-clicking on the box provided):

<input type="checkbox"/> City	<input type="checkbox"/> Nonprofit Organization*	<input type="checkbox"/> Faith Based (Nonprofit Org)
<input checked="" type="checkbox"/> County	<input type="checkbox"/> For Profit Organization*	<input type="checkbox"/> Federally Qualified Health Centers
<input type="checkbox"/> State Agency	<input type="checkbox"/> HUB certified	<input type="checkbox"/> State Controlled Institution of Higher Learning
<input type="checkbox"/> Other Political Subdivision	<input type="checkbox"/> Community Based Organization	<input type="checkbox"/> Hospital
<input type="checkbox"/> Indian Tribe	<input type="checkbox"/> Minority Organization	<input type="checkbox"/> Other (specify):

6b) If a Non-Profit or For-Profit Corporation, provide the charter/file number assigned by the Texas Secretary of State: _____

7) CONTRACT/BUDGET PERIOD: Start Date: **October 1, 2017** End Date: **September 30, 2018**

8) COUNTIES SERVED BY PROGRAM (counties assigned by the WIC program)
Hidalgo and Starr

9) PROGRAM DIRECTOR (WIC Director)

Name: **Clarissa Ramirez**
 Title: **WIC Director**
 Phone: **(956)381-4646 ext. 4041**
 Fax: **(956)380-4056**
 Email: **clarissa.ramirez@wic.co.hidalgo.tx.us**
 Mailing Address: **3105 W. University, Edinburg, Texas 78539**

10) PROGRAM ACCOUNTANT(S) Add additional names if more than 1 accountant is processing WIC vouchers

Name: Margarita Gonzalez	Name: Deborah Fisher
Title: Grant Accountant	Title: Grant Accountant Supervisor
Phone: (956)381-4646 ext. 4042	Phone: (956)381-2511 ext. 4670
Fax: (956)381-0017	Fax: (956)381-2577
Email: mague.gonzalez@wic.co.hidalgo.tx.us	Email: deborah.fisher@auditor.co.hidalgo.tx.us

11) CHIEF FINANCIAL OFFICER (CFO)

Name: **Raymundo Eufrazio, CPA**
 Title: **Hidalgo County Auditor**
 Phone: **(956)381-2511 ext. 4604**
 Email: **ray.eufrazio@auditor.co.hidalgo.tx.us**
 Mailing Address: **2801 S. Business 281 Edinburg, Texas 78539-6243**

12) AUTHORIZED REPRESENTATIVE

Name: **Ramon Garcia**
 Title: **Hidalgo County Judge**
 Phone: **(956)318-2600**
 Email: **countyjudge@co.hidalgo.tx.us**
 Overnight Mailing Address: **100 E. Cano St. 2nd Floor, Edinburg, Texas 78539**

13) Person Completing Form: **Margarita Gonzalez** 14) Date Completed: **01/3/2017**