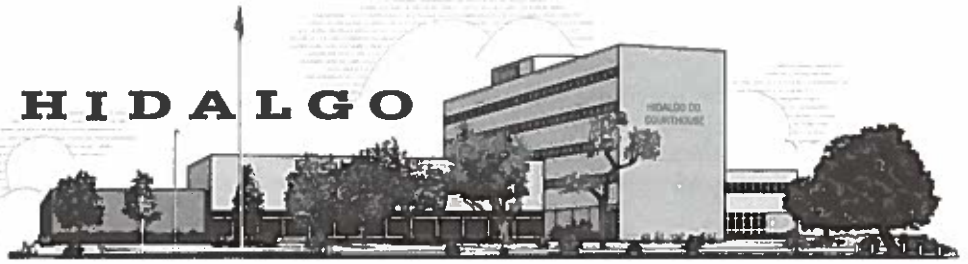


COUNTY of HIDALGO



HIDALGO COUNTY AUDITOR'S OFFICE
Hidalgo County Administration Building
2808 South Business Highway 281
Edinburg, Texas 78539-6243
PHONE: (956) 318-2511
FAX: (956) 318-2577
WEBSITE: www.co.hidalgo.tx.us/auditor

EDINBURG, TEXAS 78539

November 16, 2018

The Honorable Ramon Garcia, Hidalgo County Judge
The Honorable David L. Fuentes, Commissioner, Precinct No. 1
The Honorable Eduardo Cantu, Commissioner, Precinct No. 2
The Honorable Jose M. Flores, Commissioner, Precinct No. 3
The Honorable Joseph Palacios, Commissioner, Precinct No. 4

RE: Certification of Revenue

Dear Judge and Commissioners:

Pursuant to Local Government Code § 111.0706 SPECIAL BUDGET FOR GRANT OR AID MONEY:

The county auditor shall certify to the commissioner's court the receipt of all public or private grant or aid money that is available for disbursement in a fiscal year but not included in the budget for that fiscal year. On certification, the court shall adopt a special budget for the limited purpose of spending the grant or aid money for its intended purpose.

I, Maria Arcilia Duran, County Auditor of Hidalgo County, certify to the Hidalgo County Commissioners Court the receipt of an award from the Texas Department of State Health Services (TDSHS). These funds may now be made available by creating a new special budget or amending a current budget for its intended purposes.

AMOUNT	PURPOSE
\$437,771.00	Award No. HHS000036000012 Amendment No. 1 TB/PC-Fed Tuberculosis Prevention and Control-Federal

CERTIFIED BY:



Maria Arcilia Duran, CPA
Hidalgo County Auditor

11-16-18

Date



HIDALGO COUNTY DISTRICT JUDGES

LUIS M. SINGLETERRY JUDGE, 82 ND D.C.	JAMIE E. TIERINA JUDGE, 93 RD D.C.	J.R. "BOBBY" FLORES JUDGE, 139 TH D.C.	ROSE GUERRA REYNA JUDGE, 206 TH D.C.	JUAN R. PARTIDA JUDGE, 275 TH D.C.	MARIO E. RAMIREZ, JR. JUDGE, 332 ND D.C.	NOE GONZALEZ JUDGE, 370 TH D.C. OVERSEER	LETICIA LOPEZ JUDGE, 389 TH D.C.	L. KENO VASQUEZ JUDGE, 398 TH D.C.	ISRAEL RAMON, JR. JUDGE, 430 TH D.C.	RENEE R. BETANCOURT JUDGE, 449 TH D.C.
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AI-67612
CC - REGULAR

Health & Human Services Dept. 24. B.
Other

Meeting Date: 11/20/2018

Submitted For: Eddie Olivarez, HEALTH & HUMAN SERVICES DEPT.

Submitted By: Mike Escaname, HEALTH & HUMAN SERVICES DEPT.

Department: HEALTH & HUMAN SERVICES DEPT.

Information

CAPTION

1. Requesting approval to accept the TB/PC Federal grant contract #HHS000036000012 Amendment No. 1 in the amount of \$437,771.00 for the period of 01/01/2019 to 12/31/2019.
2. Requesting approval for County Judge to e-sign the TB/PC Federal grant contract Amendment.
3. Requesting approval of the Certification of Revenue in the amount of \$437,771.00 as approved by County Auditor.
4. Requesting approval of the budget appropriation in the amount of \$437,771.00 in grant funds and \$87,554.00 in local match funds.

BACKGROUND

06/05/18 - AI-65131 - Approval to submit renewal grant application for the TB/PC Federal FY 19 program.

Fiscal Impact

CALENDAR YEAR: 2019

ACCT. #: 9-1293-441-00-340-011-9-XXX

FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: Y

BUDGETARY IMPACT:

Grant award requires 20% local match.

\$87,554.00 in local match funds has been reserved for 2019.

Attachments

Amendment

Budget Appropriation

Sal Projection

Local Match Budget

Form Review

Inbox

Budget & Management

Reviewed By

Veronica Ortiz

Date

11/09/2018 02:47 PM

Final Approval

Form Started By: Mike Escaname

Started On: 11/08/2018 04:55 PM

Minerva Diaz

From: Mike Escaname [miguel.escaname@hchd.org]
Sent: Friday, November 09, 2018 11:33 AM
To: minerva.diaz@auditor.co.hidalgo.tx.us
Cc: Deborah Fischer
Subject: Request - Certification of Revenue - TB/PC Federal FY 19 Amendment - \$437,771.00
Attachments: AI-67612 Accept FY 19 TB PC Fed 112018.pdf, TB Federal FY 19 Contract Amendment 110218.pdf

Minerva,

AI-67612 will be presented to CC on 11/20/18 to accept the TB/PC Federal FY 19 Amendment.

After your review, I'd appreciate if you can arrange for a Certification of Revenue to be prepared for the additional \$437,771.00 that is being added to this program.

Let me know if you have any questions.

Thanks,

Mike Escaname

Division Manager, Financial Accounting
Hidalgo County Health & Human Services Department
1304 S. 25th Ave
Edinburg, TX 78542-7205
Main Line (956) 383-6221
Direct Line (956) 292-7000 ext. 7210

CONFIDENTIALITY NOTICE: This email and any files transmitted with it may contain Protected Health Information under the Federal Health Insurance Portability and Accountability Act (HIPAA). If the receiver of this email is a Covered Entity under the regulations, you are obligated to treat this information accordingly. If this email was sent to you in error, you are prohibited from utilizing or disseminating this email or any attachments. Please immediately delete it from your computer system and notify the sender of their error.

DATE: November 20, 2018

DEPARTMENT HEAD: Eduardo Olivarez

2019
Appropriation
A1-67612



DEPARTMENT NAME: Health and Human Services Department

ACCOUNT NUMBER: 8-1293-441-00-340-011-9-XXX

Contact Person: Mike Escaname Ph#: ext 7210

SUBJECT: **Budget Amendments (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).**

Honorable Commissioners' Court of Hidalgo County:

I would like to request the following Budget Amendments (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).

INCREASE ACCOUNT NUMBER(S)	ACCOUNT (OBJECT) NAME	AMOUNT
Personnel		
9-1293-441-00-340-011-9-113	TB/PC-FED REG F/T EMPLOYEES	370,378.00
Fringes		
9-1293-441-00-340-011-9-211	TB/PC-FED HEALTH INSURANCE	70,740.00
9-1293-441-00-340-011-9-212	TB/PC-FED LIFE INSURANCE	481.00
9-1293-441-00-340-011-9-220	TB/PC-FED FICA	28,335.00
9-1293-441-00-340-011-9-230	TB/PC-FED RETIREMENT	43,705.00
9-1293-441-00-340-011-9-250	TB/PC-FED UNEMPLOYMENT COMPENSATION	2,223.00
9-1293-441-00-340-011-9-260	TB/PC-FED WORKERS COMPENSATION	3,482.00
Travel		
9-1293-441-00-340-011-9-581	TB/PC-FED TRAVEL - IN COUNTY	818.00
9-1293-441-00-340-011-9-583	TB/PC-FED TRAVEL - OUT OF COUNTY	2,959.00
Supplies		
9-1293-441-00-340-011-9-610	TB/PC-FED GENERAL SUPPLIES	2,048.00
Other		
9-1293-441-00-340-011-9-550	TB/PC-FED PRINTING & BINDING	156.00
9-1293-331-12-340-011-9-000	TB/PC FEDERAL REVENUE	437,771.00
9-1293-391-01-011-100-9-000	TRANSFERS IN - GENERAL FUND PROGRAM (DO NOT POST)	87,554.00
9-1100-491-01-011-293-9-891	TRANSFERS OUT - HEALTH GRANTS (DO NOT POST)	87,554.00
TOTAL BUDGET INCREASE (DECREASE)		525,325.00

REASON:

To appropriate the budget for the TB/PC Federal grant program to run from 01/01/2019 to 12/31/2019. Budgeted amounts include grant and local match amounts.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

DATE

ATTEST COUNTY CLERK

TB ELIMINATION FY 19 (FEDERAL)
Grant Application
Salary Budget
01/01/2019 - 12/31/2019
For Budget Purposes Only

TB Elimination FY 19 (Program 011)

Ser #	Position Title	Grade	2018 Payroll Salary	2019 Budget Salary With 3% COLA	2018 Budgeted Salary	Other Fund Sources			Actual Salary (General Fund)	Actual Salary (Program) (current)	Salary (TB Program) (With 3% COLA)	% of Other Sources Funding	% of TB Grant Funding	Hourly Rate (current)	Hourly Rate (Rate With 3%)	# of Hours in 2019	2019 Salary Amount from 01/01/19 - 12/31/19	Monthly Salary	TB Grant Projected Salary	PCA (7.8%)	Fringes			Projected Total Salaries & Fringes				
						Actual Salary (Prog 005)	Actual Salary (Prog 005)	2018 Budgeted Salary													Retirement (11.6%)	Unemployment (4.1%)	Workers Comp (1.5%)		Health Ins.	Life Ins.		
0002	Licensed Vocational Nurse III	G13	49,597.00	51,084.91	49,597.00	1,875.00	10,252.00	37,470.00	37,470.00	38,594.10	0.34	0.76	27,844.7	24,560.1	2,088	51,281.39	4,273.45	38,973.86	2,981.50	4,598.92	233.84	366.35	5,744.00	33.11	13,457.72	52,431.58		
0003	Licensed Vocational Nurse III	G13	49,597.00	51,084.91	49,597.00	1,875.00	10,252.00	37,470.00	37,470.00	38,594.10	0.34	0.76	23,844.7	24,560.1	2,088	51,281.39	4,273.45	38,973.86	2,981.50	4,598.92	233.84	366.35	5,244.00	33.11	13,457.72	52,431.58		
0004	Licensed Vocational Nurse III	G13	49,597.00	51,084.91	49,597.00	-	12,126.00	37,471.00	37,471.00	38,595.13	0.34	0.76	27,844.7	24,560.1	2,088	51,281.39	4,273.45	38,973.86	2,981.50	4,598.92	233.84	366.35	5,244.00	33.11	13,457.72	52,431.58		
0005	Vocational Nurse III	G13	49,597.00	51,084.91	49,597.00	1,641.00	15,077.00	32,879.00	32,879.00	33,865.37	0.34	0.66	23,844.7	24,560.1	2,088	51,281.39	4,273.45	33,865.37	2,589.20	3,993.79	203.07	318.15	4,554.00	28.75	11,866.97	45,532.69		
0006	TB Medical Technician	G05	27,412.00	28,234.36	27,412.00	1,202.00	2,202.00	24,008.00	24,008.00	24,728.24	0.12	0.88	13,178.8	13,574.2	2,088	28,342.95	2,381.91	24,941.80	1,908.05	2,943.13	148.65	234.45	8,072.00	38.33	11,345.61	36,287.41		
0007	TB Asst Manager Records	G04	26,593.00	27,390.79	26,593.00	1,180.00	1,758.00	23,654.00	23,654.00	24,363.62	0.11	0.89	12,785.1	13,186.6	2,088	27,496.14	2,291.34	24,471.56	1,872.07	2,887.64	146.83	230.03	6,141.00	38.77	11,116.35	35,787.91		
0008	Outreach Specialist I	G04	25,679.00	26,449.37	25,679.00	36.00	728.00	24,912.00	24,912.00	25,659.36	0.03	0.97	12,345.7	12,716.0	2,088	26,551.10	2,212.59	25,754.57	1,970.22	3,030.04	154.33	242.09	6,833.00	42.25	12,141.13	37,895.70		
0009	Outreach Specialist II	G06	31,001.00	31,931.03	31,001.00	1,823.00	9,539.00	20,439.00	20,439.00	21,032.17	0.34	0.66	14,904.3	15,351.5	2,088	32,053.84	2,871.15	21,155.54	1,818.40	2,963.35	126.93	188.86	4,554.00	28.75	9,023.36	30,778.84		
0010	TB Medical Technician	G05	27,413.00	28,235.39	27,413.00	900.00	8,487.00	18,046.00	18,046.00	18,587.38	0.34	0.66	13,179.3	13,574.7	2,088	28,343.99	2,867.00	18,707.03	1,431.09	2,207.43	112.24	175.85	4,554.00	28.75	8,505.38	27,216.39		
0011	TB Medical Technician	G05	26,796.00	27,599.88	26,796.00	16.00	12,327.00	14,453.00	14,453.00	14,886.59	0.46	0.54	12,882.7	13,289.2	2,088	27,706.03	2,308.84	14,981.28	1,144.54	1,765.43	89.77	140.64	3,726.00	23.52	6,889.89	27,851.15		
0012	Client III	G05	26,796.00	27,599.88	26,796.00	-	-	26,796.00	27,599.88	27,599.88	-	1.00	12,882.7	13,289.2	2,088	27,706.03	2,308.84	27,706.03	2,119.51	3,369.31	166.24	260.44	6,900.00	43.56	12,759.06	40,165.09		
			390,078.00	401,780.24	390,078.00	9,750.00	82,796.00	297,598.00	297,598.00	306,525.94						403,325.45	33,810.47	308,465.09	23,897.58	36,388.88	1,850.79	2,899.37	58,926.00	372.81	124,044.83	432,569.92		
																											437,771.00	
																												5,281.08

Notes:

- This schedule was prepared on 06/06/2018.
- A 3% cost of living increase is budgeted from 01/01/19 to 12/31/19 (pending CC approval)
- 2018 fringe benefits/rates are used as the most current information available at this time.
- Actual work hours in grant period used which total to 2,088 for FY 19
- Health Insurance rate is \$575.00 per month per employee for 2018; (\$575 per employee x 12 months = \$6,900.00 / year)

(created by % paid by grant)

Amount of Grant Funds Available for Operating

Required Local Match - \$87,554.00

Slot #	Position Title	Local Match				Local Match Fringes												Projected Total Salaries & Fringes									
		2018 Payroll Salary	2019 Budgeted Salary With 3% COLA	2018 Budgeted Salary	2019 Budgeted Salary (Prog)	Actual Salary (Green Fund)	Actual Salary (Prog)	Actual Salary (Green Fund)	% of TB Grant Funding	% of Other Sources Funding	% of TB Grant Funding	Hourly Rate (current)	Hourly Rate With 3% COLA	Hourly Rate With 3% COLA	Hourly Rate With 3% COLA	Monthly Salary	2019 Salary Amount from 01/01/19 - 12/31/19		2019 Salary Amount from 01/01/19 - 12/31/19	Monthly Salary	TB Grant Projected Salaries	FICA (7.65%)	Unemployment (1.6%)	Workers Comp (3.4%)	Health Ins.	Life Ins.	Projected Fringes
0002	Licensed Nurse III Vocational	49,597.00	51,084.91	49,597.00	1,075.00	10,252.00	37,470.00	38,594.10	0.24	0.76	23,847	24,560.1	24,560.1	24,560.1	4,273.45	51,281.39	51,281.39	4,273.45	38,973.86	927.72	1,430.99	72.76	113.99	1,760.48	10.65	4,316.59	16,443.99
0003	Licensed Nurse III Vocational	49,597.00	51,084.91	49,597.00	1,075.00	10,252.00	37,470.00	38,594.10	0.24	0.76	23,847	24,560.1	24,560.1	24,560.1	4,273.45	51,281.39	51,281.39	4,273.45	38,973.86	927.72	1,430.99	72.76	113.99	1,760.48	10.65	4,316.59	16,443.99
0004	Licensed Nurse III Vocational	49,597.00	51,084.91	49,597.00	1,075.00	12,126.00	37,470.00	39,585.13	0.24	0.76	23,847	24,560.1	24,560.1	24,560.1	4,273.45	51,281.39	51,281.39	4,273.45	38,973.86	927.64	1,430.87	72.76	113.98	1,760.33	10.65	4,316.23	16,442.29
0005	Licensed Nurse III Vocational	49,597.00	51,084.91	49,597.00	1,641.00	15,077.00	32,079.00	33,865.37	0.34	0.66	23,847	24,560.1	24,560.1	24,560.1	4,273.45	51,281.39	51,281.39	4,273.45	33,845.72	1,278.93	1,972.72	100.31	157.15	2,426.95	14.68	5,960.71	22,868.74
0006	Technical TB Medical	27,412.00	28,234.36	27,412.00	1,202.00	2,202.00	24,008.00	24,728.24	0.12	0.88	13,178	13,574.2	13,574.2	13,574.2	2,361.91	28,342.95	28,342.95	2,361.91	24,941.80	260.41	401.67	20.42	32.00	894.09	5.41	1,814.00	5,018.00
0007	Records Manager	26,593.00	27,390.79	26,593.00	1,190.00	1,759.00	23,654.00	24,363.62	0.11	0.89	12,785	13,166.6	13,166.6	13,166.6	2,291.34	27,496.14	27,496.14	2,291.34	24,471.56	224.83	346.80	17.63	27.63	795.73	4.81	1,417.44	4,364.44
0008	Outreach Specialist I	27,567.00	28,449.37	27,567.00	38.00	728.00	24,912.00	25,659.36	0.03	0.97	12,347	12,716.0	12,716.0	12,716.0	2,212.59	28,551.10	28,551.10	2,212.59	25,754.57	58.68	90.51	4.60	7.21	215.06	1.30	377.35	1,144.35
0009	Outreach Specialist II	31,001.00	31,931.03	31,001.00	1,023.00	9,539.00	20,439.00	21,042.17	0.34	0.66	14,903	15,351.5	15,351.5	15,351.5	2,671.15	32,053.84	32,053.84	2,671.15	21,155.54	807.99	1,246.32	63.37	99.26	2,453.03	14.84	4,684.83	15,246.83
0010	Technical TB Medical	27,412.00	28,235.39	27,412.00	900.00	6,467.00	18,046.00	18,587.38	0.34	0.66	13,179	13,574.2	13,574.2	13,574.2	2,362.00	28,343.99	28,343.99	2,362.00	18,707.03	716.58	1,105.31	56.20	88.05	2,469.23	14.88	4,441.24	13,808.24
0011	Technical TB Medical	26,796.00	27,599.88	26,796.00	16.00	12,327.00	14,453.00	14,866.59	0.46	0.54	12,827	13,269.2	13,269.2	13,269.2	2,308.84	27,706.03	27,706.03	2,308.84	14,961.26	944.24	1,456.47	74.06	116.02	3,316.52	20.06	5,927.38	18,270.38
0012	Clerk III	26,796.00	27,599.88	26,796.00	9,750.00	82,730.00	297,938.00	306,525.84	1.00	0.00	12,827	13,269.2	13,269.2	13,269.2	2,308.84	401,325.65	401,325.65	2,308.84	308,465.09	7,074.72	18,912.64	554.88	869.31	17,842.90	107.93	37,382.38	129,842.38

Salaries Paid By GF and Prof Inc = 9,750.00
 Salaries Paid By Other Sources Total = 97,480.00
 Fringes Paid by Other Sources Total = 37,367.38
 129,842.38

Required Amount of Match = 87,554.00 Note: Local match exceeds the required match of 20% (\$87,554.00).

Non-DHS Funding in Excess of Match = 37,288.38
 Budgeted as Personnel (Match) 91,814
 Budgeted as Fringes (Match) 324,867
 43,076.38

0.573264705 50,191.62
 0.426735295 37,367.38
 87,554.00

Match per Grant Budget 61,914.00
 Fringes per Grant Budget 524,902
 Supplies per Grant Budget 86,616.00
 87,554.00



TEXAS
Health and Human
Services

Texas Department of State Health Services

John Hellerstedt, M.D.
Commissioner

The Honorable Ramon Garcia, County Judge
Hidalgo County
1304 S. 25th Avenue
Edinburg, Texas 78542

Subject: Tuberculosis Prevention and Control Contract Amendment
Contract Number: HHS000036000012, Amendment No. 1
Contract Amount: \$1,050,650.00
Contract Term: 01/01/2018 – 12/31/2019

Dear Judge Garcia:

Enclosed is the TB Prevention and Control amendment between the Department of State Health Services and Hidalgo County.

The purpose of this contract amendment is to use state funds, along with the Contractor's cash match funds, to support TB prevention and control services in the Contractor's jurisdiction.

This amendment increases the contract by \$525,325.00 for FY 2019 and extends the contract end term to December 31, 2019.

Please let me know if you have any questions or need additional information.

Sincerely,

Ebony White, CTCM
Contract Manager
(512) 776-2152
ebony.white@dshs.texas.gov

**DEPARTMENT OF STATE HEALTH SERVICES
CONTRACT NO. HHS000036000012
AMENDMENT NO. 1**

The **DEPARTMENT OF STATE HEALTH SERVICES** ("System Agency" or "DSHS") and **HIDALGO COUNTY** ("Grantee") who are collectively referred to herein as the "Parties." to that certain grant Contract effective January 1, 2018, and denominated DSHS Contract No. HHS000036000012, now desire to amend the Contract.

WHEREAS, the System Agency has chosen to exercise its option to renew the Contract in accordance with Section III of the Contract Signature Document;

WHEREAS, the Parties desire to revise the Budget to add funds for the period beginning January 1, 2019, through December 31, 2019 (hereinafter referred to as "Fiscal Year 2019" or "FY 2019");

WHEREAS, the Parties desire to revise the Statement of Work.

NOW, THEREFORE, the Parties hereby amend and modify the Contract as follows:

1. **SECTION IV** of the Signature Document, **BUDGET**, is hereby amended to add **FOUR HUNDRED THIRTY-SEVEN THOUSAND SEVEN HUNDRED SEVENTY-ONE DOLLARS (\$437,771.00)** in DSHS funding with the grantee providing a total of **EIGHTY-SEVEN THOUSAND FIVE HUNDRED FIFTY-FOUR DOLLARS (\$87,554.00)** in matching funds, for a total Contract amount not to exceed **ONE MILLION FIFTY THOUSAND SIX HUNDRED FIFTY DOLLARS (\$1,050,650.00)**.
2. **SECTION I.G.** of **ATTACHMENT A, STATEMENT OF WORK**, is hereby amended to add the following: "During the term of this Contract, DSHS reserves the right to decrease funding amounts as a result of the Grantee's budgetary shortfalls and/or due to the Grantee lapsing more than 1% of total funds."
3. **SECTION III. A.** of **ATTACHMENT A, STATEMENT OF WORK**, is hereby amended to add the following email address to which vouchers and any supporting documentation must also be submitted by electronic mail: CMSinvoices@dshs.texas.gov.
4. **Section III. B.** of **ATTACHMENT A, STATEMENT OF WORK**, is hereby amended to add the following: "Contractor must submit final FSR and a reimbursement or final payment request no later than forty-five (45) calendar days following the end of the Contract term."
5. The Parties agree to add to the Contract **ATTACHMENT B-1, FY 2019 BUDGET**, which is attached to this Amendment and incorporated into the Contract as if fully set forth therein. All FY 2019 expenditures shall be made in accordance with **Attachment B-1**.

6. ATTACHMENT A, STATEMENT OF WORK, is hereby amended to add the following SECTION IV:

IV. PROGRAMMATIC REPORTING REQUIREMENTS

Report Name	Frequency	Period Begin	Period End	Due Date
FY18 Narrative Report	Annually	January 1, 2018	December 31, 2018	April 1, 2019
FY19 Narrative Report	Annually	January 1, 2019	December 31, 2019	April 1, 2020
Financial Status Report (FSR) & Match Reimbursement/ Certification Form (B-13A)	Quarterly	January 1, 2019	March 31, 2019	April 30, 2019
Financial Status Report (FSR) & Match Reimbursement/ Certification Form (B-13A)	Quarterly	April 1, 2019	June 30, 2019	July 31, 2019
Financial Status Report (FSR) & Match Reimbursement/ Certification Form (B-13A)	Quarterly	July 1, 2019	September 30, 2019	October 31, 2019
Financial Status Report (FSR) & Match Reimbursement/ Certification Form (B-13A)	Quarterly	October 1, 2019	December 31, 2019	February 17, 2020

7. ATTACHMENT D, SUPPLEMENTAL AND SPECIAL CONDITIONS is hereby amended to add the following new Section 1.16 under the Special Conditions:

SECTION 1.16 CONTRACTOR'S PROPERTY INVENTORY REPORT.

Grantee shall maintain an inventory of equipment, supplies defined as Controlled Assets, and real property and submit an annual cumulative report of the equipment and other property on HHS System Agency's Contractor's Property Inventory Report to the assigned DSHS Contract Manager and DSHS Contract Oversight and Support (email address: COSequip@dshs.texas.gov) by electronic mail no later than October 15 of each year. The Contractor's Property Inventory Report may be found at: <http://www.dshs.texas.gov/contracts/forms.shtm>.

8. Except as amended and modified by this Amendment No. 1, all terms and conditions of the Contract shall remain in full force and effect.
9. Any further revisions to the Contract shall be by written agreement of the Parties.

SIGNATURE PAGE FOLLOWS

**ATTACHMENT B-1
FY 2019 BUDGET**

Organization Name: Hidalgo County

Program ID: TB/PC-Federal

Contract Number: HHS000036000012– AMENDMENT 1

Budget Categories	DSHS Funds	Cash Match	Category Total
Personnel	\$308,464.00	\$61,914.00	\$370,378.00
Fringe Benefits	\$124,064.00	\$24,902.00	\$148,966.00
Travel	\$3,777.00	\$0.00	\$3,777.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$1,310.00	\$738.00	\$2,048.00
Contractual	\$0.00	\$0.00	\$0.00
Other	\$156.00	\$0.00	\$156.00
Total Direct Costs	\$437,771.00	\$87,554.00	\$525,325.00
Indirect Costs	\$0.00	\$0.00	\$0.00
Totals	\$437,771.00	\$87,554.00	\$525,325.00

Certificate Of Completion

Envelope Id: 1239E5F2CDF849868CC0795DFCB13966	Status: Sent
Subject: New \$1,050,650; HHS000036000012; Hidalgo County A-1; DSHS/CMS	
Source Envelope:	
Document Pages: 15	Signatures: 0
Certificate Pages: 2	Initials: 0
AutoNav: Enabled	
EnvelopeId Stamping: Enabled	
Time Zone: (UTC-06:00) Central Time (US & Canada)	
	Envelope Originator:
	Texas Health and Human Services Commission
	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 Commission	Location: DocuSign
11/2/2018 7:48:20 AM	PCS_DocuSign@hhsc.state.tx.us	

Signer Events

Greta Rymal
Greta.Rymal@hhsc.state.tx.us
Texas Health and Human Services Commission
Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

Ramon Garcia
ramon.garcia@co.hidalgo.tx.us
Hidalgo County Judge
Hidalgo County
Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

Andy Marker
Edward.Marker@hhsc.state.tx.us
Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

Karen Ray
Karen.Ray@hhsc.state.tx.us
Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

Cecile Young
cecile.young@hhsc.state.tx.us
Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

Signature

Completed

Using IP Address: 167.137.1.17

Timestamp

Sent: 11/2/2018 7:55:40 AM
Viewed: 11/2/2018 8:21:00 AM
Signed: 11/2/2018 8:22:31 AM

Sent: 11/2/2018 8:22:33 AM

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
CMU Mailbox CMUContracts@dshs.texas.gov Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign	COPIED	Sent: 11/2/2018 7:55:41 AM
Stefanie Jackson stefanie.jackson@hhsc.state.tx.us Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign	COPIED	Sent: 11/2/2018 7:55:40 AM
Ebony White Ebony.White@dshs.texas.gov Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign	COPIED	Sent: 11/2/2018 7:55:41 AM Viewed: 11/2/2018 7:56:00 AM
Mike Escaname mike.escaname@hchd.org Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign	COPIED	Sent: 11/2/2018 8:22:33 AM Viewed: 11/2/2018 9:03:22 AM
Pam Wells pam.wells@hhsc.state.tx.us Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign		
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	11/2/2018 8:22:33 AM
Payment Events	Status	Timestamps