

**SIGNATURE PAGE FOR SYSTEM AGENCY
CONTRACT NO. HHS000455900001**

DEPARTMENT OF STATE HEALTH SERVICES

GRANTEE

Date of execution: _____

Date of execution: _____

**THE FOLLOWING ATTACHMENTS TO SYSTEM AGENCY CONTRACT NO.
HHS000455900001 ARE HEREBY INCORPORATED BY REFERENCE:**

- ATTACHMENT A - STATEMENT OF WORK**
- ATTACHMENT B - BUDGET**
- ATTACHMENT C - UNIFORM TERMS AND CONDITIONS**
- ATTACHMENT D - CONTRACT AFFIRMATIONS**
- ATTACHMENT E - SUPPLEMENTAL & SPECIAL CONDITIONS**

update HHSC shall constitute breach of contract and may result in immediate contract termination.

- 31. Respondent understands, acknowledges, and agrees that any false representation or any failure to comply with a representation, warranty, or certification made by Respondent is subject to all civil and criminal consequences provided at law or in equity including, but not limited to, immediate termination of any contract resulting from this Solicitation.
- 32. Respondent represents and warrants that it will comply with all applicable laws and maintain all permits and licenses required by applicable city, county, state, and federal rules, regulations, statutes, codes, and other laws that pertain to any contract resulting from this Solicitation.
- 33. Respondent represents and warrants that the individual signing this Solicitation response is authorized to sign on behalf of Respondent and to bind Respondent.

Authorized representative on behalf of Respondent must complete and sign the following:

Legal Name of Respondent: Hidalgo County

Signature of Authorized Representative

Date Signed

Richard F. Cortez, Hidalgo County

(956)-318-2600

Printed Name and Title of Authorized Representative Judge

Phone Number

17460007176060

(956) 318-2699

Federal Employer Identification Number

Fax Number

103110834

richard.cortez@co.hidalgo.tx.us

DUNS Number

Email Address

100 E. Cano 2nd Floor

Edinburg, Texas 78539-4582

Physical Street Address

City, State, Zip Code

Mailing Address, if different

City, State, Zip Code