

**DEPARTMENT OF STATE HEALTH SERVICES
CONTRACT NO. HHS001026900001
AMENDMENT NO. 1**

The **DEPARTMENT OF STATE HEALTH SERVICES** (“System Agency” or “DSHS”) and the **HIDALGO COUNTY** (“Grantee”), who are collectively referred to herein as the “Parties” to that certain grant contract to improve or strengthen local public health infrastructure within Hidalgo County, Texas, effective September 1, 2021, and denominated DSHS Contract No. HHS001026900001 (“Contract”), now desire to amend the Contract.

WHEREAS, the Parties desire to revise the Statement of Work to insert a requirement for Grantee to biannually submit Financial Status Reports under this Contract.

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

1. **SECTION III, INVOICE AND PAYMENT, of ATTACHMENT A, STATEMENT OF WORK**, is hereby amended by inserting Subsection D as follows:

D. Grantee will submit biannual Financial Status Reports (FSRs) to System Agency by the last business day of the month following the end of each six (6) months of the Contract for System Agency’s review and financial assessment. The reporting periods are as follows and will start upon execution of Amendment No. 1 of this Contract:

1. September 1 through February 28 (or February 29, if a leap year); and
2. March 1 through August 31.

Grantee will submit its last FSR, as a final close-out FSR, not later than forty-five (45) calendar days following the termination date of the Contract.

The biannual FSRs are to be submitted, by the due dates indentified above, to the following email addresses:

1. invoices@dshs.texas.gov;
2. FSRGrants@dshs.texas.gov; and
3. the assigned System Agency Contract representative identified at **SECTION V, CONTRACT REPRESENTATIVES**, of the Contract.

2. This Amendment No. 1 shall be effective as of the date last signed below.
3. Except as amended and modified by this Amendment No. 1, all terms and conditions of the Contract shall remain in full force and effect.
4. Any further revisions to the Contract shall be by written agreement of the Parties.
5. Each Party represents and warrants that the person executing this Amendment No. 1 on its behalf has full power and authority to enter into this Amendment No. 1.

**SIGNATURE PAGE FOR AMENDMENT NO. 1
DSHS CONTRACT NO. HHS001026900001**

DEPARTMENT OF STATE HEALTH SERVICES

HIDALGO COUNTY

Signature

Signature

Printed Name

Printed Name

Title

Title

Date

Date