

WILLIAMSON COUNTY AFFIDAVIT AUTHORIZED VENDOR REPRESENTATIVE

I hereby swear, affirm and represent to Williamson County that my signature below represents that I am authorized to bind the supplier to fully comply with the rates, terms and conditions for the policies associated with the Texas Association of Counties Risk Management Pool and any extension thereof, if applicable. If signature is by an agent, other than the Sole Proprietor(s) or an officer of a Corporation, Limited Liability Company, General Partner or a member of a General Partnership, a power of attorney or equivalent document must be submitted to the Williamson County Purchasing Department prior to being recommended for award of the bid.

Printed name of person submitting affidavit:	Micahel Shannon	
Title/Representative Capacity: Assistant Director		
Name of Company:		
Texas Association of Counties		
Date: September 17,, 20_15	_	
Signature of person submitting affidavit:		

Notarized:

In witness hereof, I hereunto set n





AGREEMENT TO EXTEND AUTO LIABILITY, AUTO PHYSICAL DAMAGE, AND PUBLIC OFFICIALS LIABILITY UNDER TEXAS ASSOCIATION OF COUNTIES RISK MANAGEMENT POOL

Texas Association of Counties wishes to extend the following policies with Williamson County for the same terms and conditions as the existing policy, but with an annual rate increase of \$6,080 for the contract period beginning October 1, 2015 through September 30, 2016. The rate increase is due to an increase in the number of vehicles covered by the auto coverage and an increase in the number of employees covered by public officials' liability. The new premium will be \$428,582.

BY SIGNATURE BELOW, THE PARTIES AGREE TO THE TERMS OF EXTENSION SET OUT HEREIN

Vendor	Williamson County, 710 Main St., Georgetown, TX 78626
Name_Michael Shannon	Dan A. Gattis
Title Assistant Director	Williamson County Judge
Signature // // // // // Signature // // // // // // // // // // // // //	Signature
and the second of the second o	