



Summary Agreement for Renewal of Williamson County Contract

Purchase/Contract Type:	Commodity	Department:	Sheriff's Office/Jail
Vendor Name:	Westwood Pharmacy		
Vendor Address:	5823 Patterson Avenue, Richmond, VA 23226		
Purpose/Intended Use of Product or Service (summary):			
Jail Pharmaceuticals			
P.O./Contract Number:	14RFP00219	Effective Date:	10/01/2016
Purchaser/Contract Specialist:	Sydney Richardson	Expiration Date:	09/30/2017
Requested By:	Kurt Showalter, Financial Manager, Williamson County Sheriff's Office		
Detailed description of renewal of product and/or service.			
<ul style="list-style-type: none"> Williamson County wishes to extend this proposal for the same pricing, terms and conditions as the existing contract. PLEASE INCLUDE THE FOLLOWING: <ul style="list-style-type: none"> - COMPLETED 1295 FORM; AND - RENEWED INSURANCE CERTIFICATE IF IT WAS REQUIRED IN BID/PROPOSAL. Extend Contract for the 2nd of two (2), one (1) year renewal option periods: 			
Renewal Option Period 2		October 1, 2016 – September 30, 2017	
Renewal Option Period 1		October 1, 2015 – September 30, 2016	
Initial Contract Period		October 7, 2014 – September 30, 2015	
BY SIGNING BELOW, THE PARTIES AGREE TO THE TERMS OF EXTENSION SET OUT HEREIN			
Vendor <u>Westwood Pharmacy</u>		Williamson County, 710 Main St., Georgetown, TX 78626	
Name <u>Hunter Hoggatt</u>		Dan A. Gattis	
Title <u>Vice President of corrections</u>		Williamson County Judge	
Signature <u>[Signature]</u>		Signature _____	
Date <u>8.4.2016</u>		Date _____	



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 bidder/proposer to fully comply with the pricing, terms and conditions for the Contract listed below and any extension thereof, if applicable.

Note: 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 contract or renewal.

Contract Number:	14RFP00219
Contract Name:	Jail Pharmaceuticals
Printed Name of Person Submitting Affidavit:	<i>Hunter Hogatt</i>
Name of Company:	Westwood Pharmacy
Date:	<i>August</i> <i>4</i> , 20 <i>16</i>
Signature of Person Submitting Affidavit:	<i>[Signature]</i>

On this, the *4th* day of *August*, 20 *16*, before me a notary public, the undersigned officer, personally appeared *Hunter Hogatt*, known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument, and acknowledged that she/he executed the same for the purposes therein contained.

In witness hereof, I hereunto set my hand and official seal.

Notary Public

