



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 <u>[Signature]</u>	
Date <u>8.4.2016</u>		Date <u>08-17-2016</u>	



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.

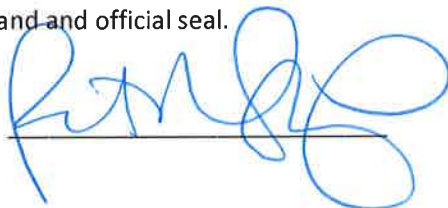
Note: If Signature is by an agent, other than the Sole Proprietor(s) or an officer of a Corporation, Limited Liability Company, General Partner or a member of a General Partnership, a Power of Attorney or equivalent document must be submitted to the Williamson County Purchasing Department prior to being recommended for award of the contract or renewal.

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

On this, the 4th day of August, 20 16, before me a notary public, the undersigned officer, personally appeared Hunter Haggatt, 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



PATRICIA NICOLE SHARP
NOTARY PUBLIC
REG. #7652820
COMMONWEALTH OF VIRGINIA
MY COMMISSION EXPIRES JUNE 30, 2019