

Designation of Subrecipient Agent

Texas Department of Public Safety - Texas Division of Emergency Management

Primary Contacts

Subrecipient: Williamson County

Disaster Number(s): DR-1999-019

Grant Program: HMGP

Primary Agent

Serves as the primary point of contact for projects.

Name: Jarred Thomas

Office Number: 512-864-8269

Position/Job Title: Director / EMC

Fax Number: 512-864-8227

Organization/employer: Williamson County OEM

Cell Number: 512-688-0065

Email* jthomas@wilco.org

The Primary Agent will have full GMS access

Secondary Agent

Serves as the secondary point of contact for projects.

Name: Michael Shoe

Office Number: 512-864-8267

Position/Job Title: Deputy Director / EMC

Fax Number: 512-864-8227

Organization/employer: Williamson County OEM

Cell Number: 512-688-0076

Email* michael.shoe@wilco.org

The Secondary Agent will have full GMS access

Primary Finance Agent

Serves as the primary point of contact for financial matters.

Name: Jerri Jones

Office Number: 512-943-1545

Position/Job Title: County Auditor

Fax Number:

Organization/employer: Williamson County

Cell Number:

Email* jjones@wilco.org

The Primary Finance Contact will have full GMS access

Certifying Official

Serves as the official representative of the organization.

Must possess the authority to obligate funds & enter into contracts for the organization.

Name: Bill Gravell

Office Number: 512-943-1550

Position/Job Title: County Judge

Fax Number:

Organization/employer: Williamson County

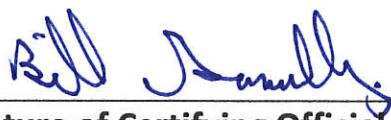
Cell Number:

Email* bgravell@wilco.org

GMS Access (pick 1) Full ☐ Read Only ☒ None ☐

The above Primary and Secondary Agents are hereby authorized to execute and file the application on behalf of this organization for the purpose of obtaining certain state and federal financial assistance under the Robert T. Stafford Disaster Relief & Emergency Assistance Act, (Public Law 93-288 as amended) or otherwise available. Primary Financial Agent and the Certifying Official are authorized to represent and act for this organization in all financial operations pertaining to this grant with the State of Texas. The Primary Agent will have authority to add or remove users within the Texas Division of Emergency Management (TDEM) Grant Management System (GMS) for all grants.

*Note: All email addresses must be unique to user



Bill Gravell

5/14/19

Signature of Certifying Official

Print Name

Date

(Must be a Mayor, Judge, or Executive Director with the authority to obligate funds & enter into contracts for the organization)

Designation of Subrecipient Agent

Texas Department of Public Safety - Texas Division of Emergency Management

Alternate Contacts (Optional)

Subrecipient: Williamson County

Disaster Number(s): DR-1999-019

Grant Program: HMGP

Alternate Contact

List any additional contact here

Name: Jody Cook

Office Number: 512-943-1595

Position/Job Title: Accountant II

Fax Number:

Organization/employer: Williamson County

Cell Number:

Email* jody.cook@wilco.org

GMS Access (pick 1) Full ☒ Read Only ☐ None ☐

If this contact replaces an existing contact, write their name below. Otherwise, leave blank or mark N/A

Alternate Contact

List any additional contact here

Name:

Office Number:

Position/Job Title:

Fax Number:

Organization/employer:

Cell Number:

Email*

GMS Access (pick 1) Full ☐ Read Only ☐ None ☐

If this contact replaces an existing contact, write their name below. Otherwise, leave blank or mark N/A

Alternate Contact

List any additional contact here

Name:

Office Number:

Position/Job Title:

Fax Number:

Organization/employer:

Cell Number:

Email*

GMS Access (pick 1) Full ☐ Read Only ☐ None ☐

If this contact replaces an existing contact, write their name below. Otherwise, leave blank or mark N/A

Alternate Contact

List any additional contact here

Name:

Office Number:

Position/Job Title:

Fax Number:

Organization/employer:

Cell Number:

Email*

GMS Access (pick 1) Full ☐ Read Only ☐ None ☐

If this contact replaces an existing contact, write their name below. Otherwise, leave blank or mark N/A

Additional Contacts are authorized to represent and act for this organization in all operations pertaining to this grant with the State of Texas.

*Note: All email addresses must be unique to user

Bill Gravell

Print Name

5/14/19
Date


Signature of Certifying Official

(Must be a Mayor, Judge, or Executive Director with the authority to obligate funds & enter into contracts for the organization)