

Purchase Services Agreement Amendment

UTHSCSA	AWARDEE
Name: The University of Texas Health Science Center at San Antonio	Name: Williamson County
Address: 7703 Floyd Curl Drive, MC 7828 San Antonio TX 78229-3900	Address: 3189 SE Inner Loop Georgetown, TX 78626
Study: Texas Targets Opioid Responses (TTOR)	PSA No. 168951/168682
Effective Date of Amendment: 05/19/2021	Amendment No. 01

Amendment(s) to Original Terms and Conditions

1. Article 4, Consideration and Payment.

Deleted: Payments and any other compensation to be provided for the conduct of the Study shall be as set forth in Attachment B, Payment Schedule, attached hereto and incorporated herein.

Substituted: UTHSCSA shall provide funding to AWARDEE in one lump sum payment. The attached sample invoice in Attachment D should be utilized to request payment.

2. Attachment B, Payment Schedule.

Deleted: In consideration for performance of the work by AWARDEE, UTHSCSA shall pay AWARDEE an amount not to exceed \$208,333.00. This amount is payable on based on actual hours that have been performed in accordance with the table below. Invoices should be submitted monthly in Clinical management for Behavioral Health Services

Substituted: A total of \$208,333.00 will be paid in one lump sum payment. The allocated provided amount will be to offset operational expenses emanating from the development and operational costs in accordance with the Statement of Work and estimated budget provided in Attachment C.

3. Attachment C, Budget.

Add the following language: Budget provided for estimated purposes only.

4. Attachment D, Sample Invoice.

This attachment is added to the Purchase Services Agreement.

All other terms and conditions remain unchanged.

By an Authorized Official of Prime Awardee



Digitally signed by Chris G. Green, CPA
DN: cn=Chris G. Green, CPA, o=UT
Health San Antonio, ou,
email=greenc@uthscsa.edu, c=US
Date: 2021.05.19 15:27:07 -05'00'

Name Chris G. Green, CPA

Date 05/19/21

Title Senior Director, Sponsored Programs

By an Authorized Official of Subrecipient



Name Bill Gravell

Date June 8, 2021

Title County Judge

**Attachment D
Sample Invoice**

**Williamson County
3189 SE Inner Loop
Georgetown, TX 78626**

Payor:

UTHSCSA
7703 Floyd Curl Drive
San Antonio, Texas 78229-3900
email: greenc@uthscsa.edu

Voucher No.:

1

Date:

5/19/2021

Re: Agreement 168591/168682

Fixed Price Agreement

\$208,333.00

Total Requested Costs:

\$208,333.00 USD

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812)."

Name:

Title: