



COMMISSIONERS COURT
COMMUNICATION

AGENDA DATE: 06/11/2013

CONSENT OR REGULAR: Consent

CONTRACT REFERENCE NO
(IF APPLICABLE): KK#-11-384

SUBJECT:

Approve and authorize the County Judge to sign the amended Animal Friendly Grant from the Department of State Health Services in the amount of \$5,000 for the El Paso County Sheriff's Office.

BACKGROUND/DISCUSSION OF TOPIC: To include statutory requirement, operational impact, or performance goal.

The El Paso County Sheriff's Office is requesting a reduction in the original contract amount of \$33,048.00 to \$5,000.00 due low County resident participation.

FISCAL IMPACT:

Index ACZOONOSIS11

PRIOR COMMISSIONERS COURT ACTION (IF ANY):

Approved on 09/19/2011, item #31, motion #7

RECOMMENDATION:

Recommend approval.

COUNTY ATTORNEY APPROVAL

The attached document has been given legal review by the El Paso County Attorney's Office on behalf of the County of El Paso, its officers, and employees. Said legal review should not be relied upon by any person or entity other than the County of El Paso, its officers, and employees.

COUNTY ATTORNEY:

LEGAL REVIEW:

LEGAL REVIEW NOTES (If Applicable):

DATE:

SUBMITTED BY: Richard D. Wiles, Sheriff (915) 538-2006

Isabel Hernandez

From: Janet Monteros
Sent: Wednesday, May 30, 2012 4:16 PM
To: Isabel Hernandez; Josefina Vasquez; Alicia Vera
Subject: KK-11-0384 -- SO/DSHS/ZoonosisCntrl/AnimalFriendlyGrnt-Award/20011-039013

COUNTY LEGAL REVIEW FORM

KK-11-0384

Contract Description: SO/DSHS/ZoonosisCntrl/AnimalFriendlyGrnt-Award/20011-039013

COUNTY ATTORNEY ACTION**

****Requested Amendments/Clarifications:** We assume you have submitted any questions or comments you have regarding the terms of the contract, as well as any specific provisions to which you object, or which you want to have changed.

Approved as to Form as Submitted
 Approved as to Form with Amendments/Modifications/Reservations Noted Below*
 Not Approved

*1)

This document has been given legal review by the El Paso County Attorney's Office on behalf of the County of El Paso, its officers, and employees. Said legal review should not be relied upon by any person or entity other than the County of El Paso, its officers, and employees.

Janet Monteros
Assistant County Attorney



JANET I. MONTEROS, ASSISTANT COUNTY ATTORNEY

General Counsel Unit

DEPARTMENT OF STATE HEALTH SERVICES



Amendment
To

The Department of State Health Services (DSHS) and EL PASO COUNTY (Contractor) agree to amend the Program Attachment # 001 (Program Attachment) to Contract # 2011-039013 (Contract) in accordance with this Amendment No. 001A : ZONOSIS CONTROL, effective 05/17/2012.

The purpose of this Amendment is to decrease contract amount to \$5,000.00, per Contractors request, due to low number of sterilizations.

Therefore, DSHS and Contractor agree as follows:

The program attachment number is revised as follows:

PROGRAM ATTACHMENT NO: ~~001~~ 001A

SECTION VII. BUDGET is revised as follows:

Total reimbursements will not exceed \$ ~~33,048.00~~ 5,000.00

The categorical budget is revised as attached

All other terms and conditions not hereby amended are to remain in full force and effect. In the event of a conflict between the terms of this contract and the terms of this Amendment, this Amendment shall control.

Department of State Health Services

Contractor

Signature of Authorized Official

Signature of Authorized Official

Date: _____

Date: _____

Bob Burnette, C.P.M., CTPM

Name: Veronica Escobar

Director, Client Services Contracting Unit

Title: County Judge

1100 WEST 49TH STREET
AUSTIN, TEXAS 78756

Address: 500 E. San Antonio St., Rm 301

(512) 458-7470

El Paso, TX 79901-2424

Bob.Burnette@dshs.state.tx.us

Phone: (915) 546-2098

Email: cjdescobar@epcounty.com

DEPARTMENT OF STATE HEALTH SERVICES



1100 WEST 49TH STREET
AUSTIN, TEXAS 78756-3199

CATEGORICAL BUDGET CHANGE REQUEST

DSHS PROGRAM: ZONOSIS CONTROL

CONTRATOR: EL PASO COUNTY

CONTRACT NO: 2011-039013

CONTRACT TERM: 08/31/2011 THRU: 08/30/2012

BUDGET PERIOD: 08/31/2011 THRU: 08/30/2012

CHG: 001A

DIRECT COST (OBJECT CLASS CATEGORIES)			
	Current Approved Budget (A)	Revised Budget (B)	Change Requested
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$33,048.00	\$5,000.00	\$(28,048.00)
Other	\$0.00	\$0.00	\$0.00
Total Direct Charges	\$33,048.00	\$5,000.00	\$(28,048.00)
INDIRECT COST			
Base (\$)	\$0.00	\$0.00	\$0.00
Rate (%)	0.00%	0.00%	0.00%
Indirect Total	\$0.00	\$0.00	\$0.00
PROGRAM INCOME			
Program Income	\$0.00	\$0.00	\$0.00
Other Match	\$0.00	\$0.00	\$0.00
Income Total	\$0.00	\$0.00	\$0.00
LIMITS/RESTRICTIONS			
Advance Limit	\$0.00	\$0.00	\$0.00
Restricted Budget	\$0.00	\$0.00	\$0.00
SUMMARY			
Cost Total	\$33,048.00	\$5,000.00	\$(28,048.00)
Performing Agency Share	\$0.00	\$0.00	\$0.00
Receiving Agency Share	\$33,048.00	\$5,000.00	\$(28,048.00)
Total Reimbursements Limit	\$33,048.00	\$5,000.00	\$(28,048.00)
JUSTIFICATION			
Amend Contract to decrease amount to \$5,000.00 per request from Contractor due to low number of sterilizations and expenditures.			

Financial status reports are due: 12/30/2011, 03/30/2012, 07/02/2012, 10/30/2012