

**AMENDMENT NO. 1
TO THE
INTERAGENCY COOPERATION CONTRACT
BETWEEN
THE TEXAS FACILITIES COMMISSION
AND
TEXAS DEPARTMENT OF INSURANCE**

This Amendment No. 1 is entered into by and between the Texas Facilities Commission (“TFC”) and the Texas Department of Insurance (“Receiving Agency”), to amend the original contract between the parties effective August 24, 2015 (hereinafter referred to as “Contract”).

WHEREAS, changed circumstances require mutually desirable alterations to the Contract; and

WHEREAS, the parties desire to amend certain terms to their mutual benefit to reflect the changed circumstances;

NOW, THEREFORE, the parties agree to amend the Contract as follows:

1. The parties agree to modify SECTION III – CONSIDERATION, SECTION 3.01 – CONTRACT AMOUNT, by increasing the total not to exceed amount to be paid under this Contract by Two Hundred Thousand and No/100 Dollars (\$200,000.00), thus increasing the total not to exceed amount to Two Hundred Fifty Thousand and No/100 Dollars (\$250,000.00).
2. The parties agree to modify ARTICLE IV – PAYMENT FOR SERVICES, by adding Section 4.04, as follows:

“CAPITAL BUDGET AUTHORITY. Pursuant to Rider 16 entitled *Capital Construction on Behalf of State Agencies* for TFC found in HB 1, 84th R.S., Art. I, any capital items related to construction of buildings and facilities including minor construction projects greater than \$100,000 performed by TFC on behalf of other state agencies do not apply to TFC for the purpose of the capital budget rider limitations specified in HB 1, 84th Leg., R.S., Art. IX, Sec. 14.03. By signing this Contract, Receiving Agency certifies it has the requisition capital budget authority to fund the services to be provided under this Contract.”

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Except as expressly amended above, the Contract remains in full force and effect.

IN WITNESS WHEREOF, the parties hereto have made and executed this Amendment No. 1 to this Contract to be effective as of the date of the last party to sign.

TEXAS FACILITIES COMMISSION

By: _____

Kay Molina

General Counsel

Date of Execution: _____

 K G.C.

 M Dir.

 M D.E.D.

TEXAS DEPARTMENT OF INSURANCE

By: _____

Print Name: _____

Title: _____

Date of Execution: _____

 Patricia David
 Deputy Commissioner, Administrative Operations