#### Early Voting for November 6th, 2012 General Election:

#### Votacion Temprana para Noviembre 6, 2012 Eleccion General

(Early Voting Location)

**Hunt County Voter Administration** 

(Locacion para Votacion Temprana) 2217 Washington

2217 Washington Greenville Tx 75401 (903) 454-5467

Regular hours for early voting:

October 22<sup>nd</sup> – November 2<sup>nd</sup> 8am to 5 pm, Monday – Friday Horas regulares para Votacion Temprana
Octubre 22 – Noviembre 2

Octubre 22 - Noviembre 2 8am a 5 pm, Lunes - Viernes

Saturday (Sabado), Oct. 27th

Additional Voting Hours @ Voter Admin. Office:

Horas Adicionales para Votacion en la oficina de Administracion de Votantes.

Voter Administration Office

2217 Washington 8am – 12pm

Greenville Tx 75474

Voter Administration Office Sunday (Domingo), Oct. 28th

2217 Washington 1pm – 5pm

Greenville Tx 75401

Voter Administration Office Thursday (Jueves), Nov. 1st

2217 Washington 8am – 7pm

Greenville Tx 75401

Election Day: Tuesday, November 6th, 2012 Polls open 7am - 7pm

Dia de Eleccion: Martes, Noviembre 6, 2012 Puesto se abre de 7am - 7pm

Also check out our web-site at <u>www.huntcounty.net</u> for this information

Tambien puede revisar nuestra pagina en linea en <u>www.huntcounty.net</u> para esta informacion

# 12,427 at\_FILED FOR RECORD\_M

AUG 1 4 2012

### # 12,428

#### ORDER OF GENERAL ELECTION (ORDEN DE ELECCION GENERAL)

| NW1-1<br>rescribed by Secretary of State<br>Sections 3.004, 3.006, 85.004, Texas Election Code<br>5/07   | aculiso for po   |
|--|--|
| # 12,428   | By South No. 1 / 2011  |
| ORDER OF GENERAL ELECTI<br>(ORDEN DE ELECCION GENER  | ON CONTRACTOR ON THE CONTRACTO |
| An election is hereby ordered to be held on NOVEMBER 6th (date)  | , 20 <sup>12</sup> , in <u>Hunt</u>  |
| County, Texas for the purpose of electing the following county and pre   | cinct officers as required by Article XVI,   |
| Section 65 of the Texas Constitution.  |  |
| (Por la presente se ordena que se lleve a cabo una elección el día _<br>2012 _, en el Condado de _ Hunt, Texas, con el prop<br>condado y del precinto como requerido por el Articulo XVI, Sección 65 | ósito de elegir los siguientes oficiales del   |
| (List Offices) (Enúmere los puestos oficiales) District Attorne<br>@ Law #2, Sheriff, Tax Assessor-Collector, Commissione<br>JP Pct 1 Pl. 1, Constable 1, Constable 2, Constable 3,                  | er Pct. 1, Commissioner Pct. 3,  |
| Early voting by personal appearance will be conducted each weekday a<br>(La votación adelantada en persona se llevará a cabo de lunes a viern  |  |
| Hunt County Voter Administration, 2217 Washington, G   |  |
| (location) (sitio)   |  |
| Recommended but not require  | d  |
| between the hours of 8 a.m. and 5 p.m. beginning on 0c  (entre las 8 de la mañana y las 5 de la tarde empezando el and ending on November 2, 2012 (date)   | (date) 22 de Octubre 2012 (fecha)  |
| Applications for ballot by mail shall be mailed to: (Las solicitudes para boletas que se votarán adelantada por correo de  | iberán enviarse a:)  |
| Almina Cook  | SEE ATTACHED FOR   |
| (Name of Early Voting Clerk)   | - ADDITIONAL VOTING HOURS  |
| (Nombre del Secretario de la Votación Adelantada)  | Para horas adicionales<br>de votacion  |
| 2217A Washington (Address) (Dirección)   | -  |
|  |  |
| Greenville Tx 75401  (City) (Ciudad) (Zip Code) (Zona Postal)  | <del>,</del>   |
| Applications for ballots by mail must be received no later than the clos<br>(Las solicitudes para boletas que se votarán adelantada por correo deberán rec   | se of business on: cibirse para el fin de las horas de negocio el:)  |
| October 30th, 2012 (30 de Octubre 2012)  |  |
| (date) (fecha)   |  |
| Issued this the 14 day of August , 20 12 .   | ,  |
| (Emitada este dia 14 de Agosto 20 12 .)  | . 4  |
| Romie<br>Signature of Count  | O L Kum'l''<br>y Judge (Firma del Juez del Condado)  |
| Signature of Count   | ,  |

# Johnnens C

#### RESOLUTION # 12,435

## A RESOLUTION OF THE HUNT COUNTY COMMISSIONERS COURT PROHIBITING ALL OUTDOOR BURNING WITH EXCEPTIONS AS SPECIFIED IN THIS RESOLUTION.

**WHEREAS**, the Commissioners Court of Hunt County, Texas, finds that circumstances present in all or part of the unincorporated area of the county create a public safety hazard that would be exacerbated by outdoor burning;

NOW, THEREFORE, IT IS HEREBY RESOLVED by the Commissioners Court of Hunt County, Texas that all outdoor burning is prohibited in the unincorporated area of the county for 90 days from the date of adoption of this Resolution, unless the restrictions are terminated earlier based on a determination made by the Texas Forest Service and this Court. This Resolution is adopted pursuant to the Local Government Code §352,081, and other applicable statutes. This Resolution does not prohibit outdoor burning activities related to public health and safety that are authorized by the Texas Commission on Environmental Quality for: (1) firefighter training; (2) public utility, natural gas pipeline or mining operations; (3) planting or harvesting of crops; or, (4) burns that are conducted by a prescribed burn manager certified under Section 153.048, Natural Resources Code, and meet the standards of Section 153.047, Natural Resources Code. This Resolution also does not prohibit the use of welders, cutting torches, and similar tools and machinery; however, it is required that while using such implements a separate individual is required to be present to observe for fires and sparks and to have some type of fire extinguisher present; nor does this Resolution prohibit any outdoor cooking activities in an enclosed apparatus, designed for cooking purpose.

In accordance with Local Government Code §352.081(h), a violation of this Order is a Class C misdemeanor, punishable by a fine not to exceed \$600.00.

ADOPTED this 14th day of August, 2012.

Judge Horn

Commissioner Thornton

Commissioner Atkins

Attest:

Land Clerk

August, 2012.

Commissioner Middlebrooks

Commissioner Latham

# AUG 14 2012 M.

#### DEPARTMENT OF STATE HEALTH SERVICES



This contract, number 2013-041725 (Contract), is entered into by and between the Department of State Health Services (DSHS or the Department), an agency of the State of Texas, and HUNT COUNTY (Contractor), a Government Entity, (collectively, the Parties).

- 1. <u>Purpose of the Contract.</u> DSHS agrees to purchase, and Contractor agrees to provide, services or goods to the eligible populations as described in the Program Attachments.
- 2. Total Amount of the Contract and Payment Method(s). The total amount of this Contract is \$52,467.00, and the payment method(s) shall be as specified in the Program Attachments.
- 3. <u>Funding Obligation.</u> This Contract is contingent upon the continued availability of funding. If funds become unavailable through lack of appropriations, budget cuts, transfer of funds between programs or health and human services agencies, amendment to the Appropriations Act, health and human services agency consolidation, or any other disruptions of current appropriated funding for this Contract, DSHS may restrict, reduce, or terminate funding under this Contract.
- 4. <u>Term of the Contract.</u> This Contract begins on 09/01/2012 and ends on 08/31/2013. DSHS has the option, in its sole discretion, to renew the Contract as provided in each Program Attachment. DSHS is not responsible for payment under this Contract before both parties have signed the Contract or before the start date of the Contract, whichever is later.
- 5. <u>Authority.</u> DSHS enters into this Contract under the authority of Health and Safety Code, Chapter 1001.
- 6. **Documents Forming Contract.** The Contract consists of the following:
  - a. Core Contract (this document)
  - b. Program Attachments:

2013-041725-001 CPS - CITIES READINESS INITIATIVE

- c. General Provisions (Sub-recipient)
- d. Solicitation Document(s), and
- e. Contractor's response(s) to the Solicitation Document(s).
- f. Exhibits

Any changes made to the Contract, whether by edit or attachment, do not form part of the Contract unless expressly agreed to in writing by DSHS and Contractor and incorporated herein.

- 7. <u>Conflicting Terms.</u> In the event of conflicting terms among the documents forming this Contract, the order of control is first the Core Contract, then the Program Attachment(s), then the General Provisions, then the Solicitation Document, if any, and then Contractor's response to the Solicitation Document, if any.
- 8. <u>Payee.</u> The Parties agree that the following payee is entitled to receive payment for services rendered by Contractor or goods received under this Contract:

Name: HUNT COUNTY Address: P. O. BOX 1097

GREENVILLE, TX 75403-1097

Vendor Identification Number: 17560010179027

9. Entire Agreement. The Parties acknowledge that this Contract is the entire agreement of the Parties and that there are no agreements or understandings, written or oral, between them with respect to the subject matter of this Contract, other than as set forth in this Contract.

By signing below, the Parties acknowledge that they have read the Contract and agree to its terms, and that the persons whose signatures appear below have the requisite authority to execute this Contract on behalf of the named party.

| DEPARTMENT OF STATE HEALTH SERVICES          | HUNT COUNTY  |
|--|--|
| By:  | By James ares  |
| Signature of Authorized Official             | Signature  |
|  | 08-14-2612   |
| Date   | Date   |
| Bob Burnette, C.P.M., CTPM                   | J. David Jones, CRI Coordinator<br>Printed Name and Title              |
| Director, Client Services Contracting Unit   | P.O. Box 1097 Address  |
| 1100 WEST 49TH STREET<br>AUSTIN, TEXAS 78756 | City, State, Zip   |
| (512) 458-7470                               | 903-408-4188<br>Telephone Number                                       |
| Bob.Burnette@dshs.state.tx.us                | hunterio huntcounty, net<br>E-mail Address for Official Correspondence |

#### 2013-041725-001

#### Categorical Budget:

| PERSONNEL            | \$37,500.00 |
|----------------------|-------------|
| FRINGE BENEFITS      | \$14,498.00 |
| TRAVEL               | \$3,789.00  |
| EQUIPMENT            | \$0.00      |
| SUPPLIES             | \$960:00    |
| CONTRACTUAL          | \$0.00      |
| OTHER #              | \$1,019,00  |
| TOTAL DIRECT CHARGES | \$57,766.00 |
| INDIRECT CHARGES     | \$0.00      |
| TOTAL                | \$57,766.00 |
| DSHSISHARE           | \$52;467:00 |
| CONTRACTOR SHARE     | \$5,299.00  |
| OTHER MATCH          | \$5,299.00  |

Total reimbursements will not exceed \$52,467.00

Financial status reports are due: 12/31/2012, 03/29/2013, 07/30/2013, 10/30/2013

# Fiscal Federal Funding Accountability and Transparency Act (FFATA) CERTIFICATION

For Fiscal Year (FY13)

The certifications enumerated below represent material facts upon which DSHS relies where prorting information to the federal government required under federal law. If the Department later determines that the Contractor knowingly rendered an erroneous certification, DSHS may pursue all available remedies in accordance with Texas and U.S. law. Signor further agrees that it will provide immediate written notice to DSHS if at any time Signor learns that any of the certifications provided for below were certoneous when submitted or have since become erroneous by reason of changed circumstances. If the Signor cannot certify all of the statements contained in this section, Signor must provide written notice to DSHS detailing which of the below statements it cannot certify and why.

| Legal Name of Contractor:  HUNT COUNTY  Jimmy P. Hamilton  iphamilton@huntcounty.net  903.408.4123  Hunt County Auditor  |  |  |  |
|--|--|--|--|
| Primary Address of Contractor: 2507 Lee Street Greenville, TX  | FFATA Contact #2 Name, Email and Phone Number: Delores Shelton <a href="mailto:hctreasurer@huntcounty.net">hctreasurer@huntcounty.net</a> 903.408.4171 Hunt County Treasurer |  |  |
| ZIP Code: 9-digits Required <u>www.usps.com</u>  | DUNS Number: 9-digits Required www.ccr.gov   |  |  |
| 7       5       4       0       1       -       4       2       4       5         State of Texas Comptroller Vendor Identification         1       7       5       6       0       0       1       0       1       7       9       0       1 | 0 2 8 1 6 1 1 5 6  Number (VIN) 14 Digits  |  |  |

| Printed Name of Authorized Representative<br>Jerome David Jones | Signature of Authorized Representative |
|---|--|
| Title of Authorized Representative CRI Coordinator              | Date 07-30-2012                        |

## Fiscal Federal Funding Accountability and Transparency Act (FFATA) CERTIFICATION

| Sally Tom:300000 Provide compensation information here:   |   |
|---|---|
| If your answer is "No" to this question, you must provid compensation of the top five highly compensated officers belo For example:  John Blum:500000;Mary Redd:50000;Eric Gant:400000;Todd P   | w.  |
| If your answer is "Yes" to this question, where can this inform.  | ation be accessed?                                |
| C. <u>Certification Regarding Public Access to Compensation Info</u><br>Does the public have access to information about the comexecutives in your business or organization (including parent of and all affiliates worldwide) through periodic reports filed undof the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d) Internal Revenue Code of 1986? Yes No | rpensation of the senior or an inches,            |
| If your answer is "Yes" to both question "A" and "B", you must if your answer is "No" to either question "A" or "B", skip quertification.   | answer question "C".<br>estion "C" and finish the |
| B. Certification Regarding Amount of Annual Gross from Feder<br>Did your organization receive \$25 million or more in annual grawards in the preceding fiscal year? Yes No  | eral Awards.<br>Oss revenues from federal         |
| A. Certification Regarding % of Annual Gross from Federal Aw<br>Did your organization receive 80% or more of its annual grawards during the preceding fiscal year? Yes No   | vards.<br>oss revenue from federal                |
| If your answer is "Yes", skip questions "A", "B", and "C" and fir If your answer is "No", answer questions "A" and "B".   | ish the certification.                            |
| the statements made by me in this certification form are truthe best of my knowledge.  Did your organization have a gross income, from all sources your previous tax year? Yes  | e, complete and correct to                        |

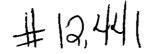
# HUNT COUNTY BID TABULATION Annual Tax Levy Mailing Tax Department August 14, 2012

|          |  | THE COMEST WIN DESCRIPTION   | THE LOWES  |                                 |
|----------|--|--|--|---------------------------------|
|          | The Purchasing Department recommends award to AMG Printing & Mailing | nmends award to A  | ing Department recor   | The Purchas                     |
|          | ・ 新聞 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)                         | The state of the s | The state of the second |                                 |
| NO BID   | \$46,196.50  | \$36,324.90  | \$45,391.19  | Grand Total                     |
|          | \$32,200.00  | \$21,300.00  | \$32,200.00  | Estimated Postage               |
| NO BID   | \$13,996.50  | \$15,024.90  | \$13,191.19  | Total                           |
|          | \$3,082.00<br>NO BID   | \$2,927.90<br>\$1,000.00   | \$3,292.00<br>\$306.19   | Delinquent Mailing<br>Levy Roll |
| NO Bid   | \$10,914.50  | \$11,097.00  | \$9,593.00   | September Mailing               |
| Latson's | Variverge (formerly West Texas Micro Imaging)                        | AMG Printing<br>& Mailing  | Direct Mail Partners   |                                 |
|          | VENDOR   | VEN  | <b>K</b> 8   |                                 |

at FILED FOR RECORD M #19,437



6555 Sierra Drive Irving, TX 75039 Phone 888.399,5501



## ENROLLMENT FOR ELECTRIC SERVICE LETTER OF AUTHORIZATION

Business Secure - QUOTED
Offer Date: 07/26/2012
Price Request Number: 60073

|   | UIRED FOR ACCEPT   | ANCE  |                        | Price Red   | uest Nu   | mber                                    | 600    | 73031          |
|---|--|---|------------------------|---|-----------|---|--------|----------------|
| COMPANY NAME:                           | HUNT COUNTY  |   | **                     | ***************************************               |           |   | . 000  | 70001          |
| TYPE OF ENTITY:<br>(SELECT ONE)         | ☐ Corporation<br>☐ Sole Proprietorship<br>☐ Non-Profit Corporation | ☐ Limited Liability Pa<br>☐ Limited Liability Co<br>☐ Limited Partnership | mpany                  | ☐ Partnership<br>☐ General Partnetsh<br>☐ Association | ip        | C                                       | ∃ Oth  | er             |
| BILLING NAME:                           | HUNT COUNTY  |   |                        | 100000000000000000000000000000000000000               |           |   |        |                |
| BILLING<br>ADDRESS:                     |  |   | CITY:                  | Greenville  | State:    | TX                                      | Zip:   | 75403-1097     |
| PHONE #:                                | (903) 408-4292   |   | FAX#:                  | (903) 408   | -4242     | *************************************** | [      |                |
| CONTACT NAME:                           | DIANNE TERRY   |   | E MAIL:                |   |           | <del></del>                             | ···    |                |
| TAX EXEMPT:<br>(SELECT ONE)             | □ No □ Yes (If Yes   | , please request and se   | nd us a co             | ppy of the completed T                                | XU Energy | / Tax Ex                                | emptio | n certificate) |
| LANGUAGE<br>PREFERENCE:<br>(SELECT ONE) | ☐ English OF SO  | FEDERAL TA<br>CIAL SECURITY NUMB  | X ID #, or<br>ER IF SO | LAST 4 #'s<br>LE PROPRIETORSH                         | 1017      | ,                                       |        |                |
|   |  |   |                        |   |           |   |        |                |

#### **Charges for Electricity**

| Minimum Term           | 24 Months   |
|------------------------|---|
| Agreement Start Date   | 10/15/2012  |
| Energy Charge          | \$0.0760000 per Kilowatt hour.  |
| Demand Charges         | Not Applicable  |
| Base Charge            | \$7.90 per meter/ESI ID per month.  |
| TDU Delivery Charges   | Transmission and Distribution Utility provider ("TDU") charges for delivering electricity will be passed through to customer with no increase.  |
| Early Cancellation Fee | You may be charged an early cancellation fee equal to the greater of one-sixth of the total estimated billing for the remainder of the term for electric service per ESI ID or \$300 per ESI ID.  |
| Credit and Deposit     | Initial deposit of \$0.00 required in order to enroll. See terms of Service Agreement for additional Information.   |
| Total Price            | Based upon the above listed Charges the estimated average total price is \$0.14231 per kWh. This price disclosure is based on your estimated usage — your actual total price for electric service will depend upon your monthly usage.  |
| Taxes                  | Applicable state and local sales taxes and reimbursement for the state gross receipts tax are not included in the average total price and will be billed each month based on your total electric bill.  |
| Non-Recurring Fees     | Your price does not include any non-recurring fees which may be charged by the TDU or other TXU Energy service fees. If applicable such fees would be listed separately on your bill. The TDU may charge for a special meter reading if you request a start date that falls on any date outside of the Standard Switch period for that ESI ID. TXU Energy does not charge any switching fees other than those that may be charged by the TDU and passed through to you. |

V050510

BP# 12046880 Quote# 60073031

Page 1 of 2

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AUG 1 4 2012

JENNIFER LINDENZWEIG

By 1919 Out one by fex.



#### **ENROLLMENT FOR ELECTRIC SERVICE** LETTER OF AUTHORIZATION

Business Secure - QUOTED Offer Date: 07/26/2012 Price Request Number: 60073031

| ESIID  | Service Address  |
|--|--|
| 10443720004722978                                | 27 GILMER CADDO MILLS TX 75135-0000  |
| 10443720004965953                                | 115 E MAIN ST WOLFE CITY TX 75496-3104   |
| 10443720004870879                                | 112 E MAIN ST QUINI AN TX 75474-9700   |
| Please check he wish to establish TXU Energy, or | ere to verify that the above listed ESI ID(s) are the correct service locations for which you new service with TXU Energy, change from your current retail electric provider (REP) to change the electric product you are receiving from TXU Energy. |

I understand that if I am switching to TXU Energy, I have a right to review, and rescind the Terms of Service Agreement without penalty within three (3) federal business days (includes Saturdays) of receiving the Terms of Service Agreement, Electricty Facts Label, and Your Rights As A Customer document. The written copy of the Terms of Service Agreement explains all of the terms of the agreement and provides details on how to exercise the right of rescission, if applicable.

The term for each ESI ID will begin and end on each ESI ID's first regularly scheduled meter read on or after the Agreement Start Date, or as soon thereafter as practicable. I understand that if I decide to enroll the ESI IDs referenced In this letter of authorization with a different retail electric provider prior to the effective date of this enrollment with TXU Energy I will be subject to any applicable early cancellation fees.

By signing below, I acknowledge that I have read and understand this Letter of Authorization and the associated terms of service for the product for which I am enrolling. I wish to establish new service with TXU Energy, change from my current retail electric provider (REP) to TXU Energy, or change the electric product I am receiving from TXU Energy. I authorize TXU Energy to act as my agent to perform the tasks necessary to switch or establish my electric service with TXU Energy on the electric product described herein. My authorization covers the ESI ID(s)Service location(s) listed in this Letter of Authorization. I am at least eighteen (18) years old and am legally authorized to select or change retail electric providers and electric products for the location(s) listed on this Letter of Authorization.

| And                  | Som Hoan   | Coury Jung | 8-15-2012 |
|----------------------|------------|------------|-----------|
| Authorized Signature | Print Name | Title      | Date      |
| V050510              |            | 1          | Date      |

Sales Rep : Karen Miranda

To accept the terms of the offer identified in this Letter of Authorization, please sign and date in the signature field above. This document must be properly signed and returned to TXU Energy on the same day of the offer in order for this offer to be accepted by TXU Energy and for your request for service to be accepted and processed.

Please fax all pages of this offer to TXU Energy at: (877) 578-3557