

Resource Committee Meeting

November 11, 2025

9:00 am

- I. DECLARATION OF A QUORUM**
- II. PUBLIC COMMENTS**
- III. APPROVAL OF MINUTES**
 - A. Approve Minutes of the Board of Trustees Resource Committee Meeting Held on Tuesday, October 21, 2025
(EXHIBIT R-1)
- IV. CONSIDER AND RECOMMEND ACTION**
 - A. November 2025 Contract Renewals Over 250K
(EXHIBIT R-2 Ernest Savoy)
 - B. November 2025 Interlocal Agreements
(EXHIBIT R-3 Ernest Savoy)
- V. EXECUTIVE SESSION-**
 - ***As authorized by §551.071 of the Texas Government Code, the Board of Trustees reserves the right to adjourn into Executive Session at anytime during the course of this meeting to seek legal advice from its attorney about any matters listed on the agenda.***
- VI. RECONVENE INTO OPEN SESSION**
- VII. CONSIDER AND TAKE ACTION AS A RESULT OF THE EXECUTIVE SESSION**
- VIII. INFORMATION ONLY**
 - A. November 2025 Contract Amendments 100K-250K
(EXHIBIT R-4)
 - B. November 2025 Contract Renewals 100K-250K
(EXHIBIT R-5)
 - C. November 2025 New Contracts Under 100K
(EXHIBIT R-6)
 - D. November 2025 Contract Amendments Under 100K
(EXHIBIT R-7)
 - E. November 2025 Contract Renewals Under 100K
(EXHIBIT R-8)
 - F. November 2025 Affiliation Agreement, Grants, MOU's and Revenues Information Only
(EXHIBIT R-9)
- IX. ADJOURN**

Veronica Franco

Veronica Franco, Board Liaison

Gerald Womack, Chairman

Resource Committee

THE HARRIS CENTER for Mental Health and IDD

Board of Trustees

EXHIBIT R-1

**BOARD OF TRUSTEES
THE HARRIS CENTER *for*
MENTAL HEALTH AND IDD
RESOURCE COMMITTEE MEETING
TUESDAY, OCTOBER 21, 2025
MINUTES**

Mr. Gerald Womack, Chairman, called the meeting to order at 9:02 a.m. in the Room 109, 9401 Southwest Freeway, noting a quorum of the Committee was present.

RECORD OF ATTENDANCE

Committee Members in Attendance: Dr. R. Gearing, G. Womack, J. Lykes
Committee Member Absent: Dr. M. Miller Jr.
Other Board Member Present: Dr. K. Bacon, Dr. J. Lankford, N. Hurtado-videoconference,
R. Thomas-videoconference

1. CALL TO ORDER

Mr. G. Womack. called the Resource Committee meeting to order at 9:02 am.

2. DESIGNATION OF BOARD MEMBERS AS VOTING COMMITTEE MEMBERS

Mr. G. Womack designated Dr. K. Bacon, Dr. J. Lankford, N. Hurtado and R. Thomas as voting members of the committee.

3. DECLARATION OF QUORUM

Mr. G. Womack declared a quorum was present.

4. PUBLIC COMMENTS

There were no public comments.

5. MINUTES

Approve Minutes of the Board of Trustees Resource Committee Meeting Held on Tuesday September 16, 2025.

MOTION: LANKFORD SECOND: LYKES

With unanimous affirmative votes,

BE IT RESOLVED that the Minutes of the Board of Trustees Resource Committee Meeting Held on Tuesday, September 16, 2025, as presented under Exhibit R-1, are approved and recommended to the Full Board.

6. CONSIDER AND RECOMMEND ACTION

A. FY'25 Year-to-Date Budget Report-September

MOTION: LYKES SECOND: BACON

With unanimous affirmative votes,

BE IT RESOLVED FY'25 Year-to-Date Budget Report-September, as presented under R-2, are approved and recommended to the Full Board.

B. October 2025 New Contracts Over 250K

MOTION: GEARING SECOND: LYKES

With unanimous affirmative votes,

BE IT RESOLVED October 2025 New Contracts Over 250K, as presented under R-3, are approved and recommended to the Full Board.

C. October 2025 Internal Agreements

MOTION: GEARING SECOND: BACON

Dr. Lankford recused himself from voting on item #7 UT Health San Antonio (Be well Texas)

With unanimous affirmative votes,

BE IT RESOLVED October 2025 Internal Agreements Exhibit R-5 items are approved and recommended to the Full Board.

7. EXECUTIVE SESSION-No Executive Session needed.

8. RECOVENE INTO OPEN SESSION

9. CONSIDER AND TAKE ACTION AS A RESULT OF EXECUTIVE SESSION

10. ADJOURN

MOTION: LANKFORD

SECOND: LYKES

With unanimous affirmative voted and there being no further business, the meeting was adjourned at 9:35 am.

**Veronica Franco, Board Liaison
Gerald W. Womack, Chairman Resource Committee
THE HARRIS CENTER for Mental Health and IDD
Board of Trustees**

EXHIBIT R-2

NOVEMBER 2025 RENEWALS OVER 250k

NOVEMBER 2025
FISCAL YEAR 2026[illegible]

Current Fiscal Year Contract Information

Current Fiscal Year

2026

Contract ID# *

2023-0813

Contractor Name *

Escape Velocity Holdings, Inc. d/b/a Trace2, LLC

Service Provided* (?)

Crowdstrike FalconComplete Threat Protection Software and Support purchased thru
Choice Partners: 21/031KN-55.

Renewal Term Start Date *

12/18/2025

Renewal Term End Date *

12/17/2026

Term for Off-Cycle Only (For Reference Only)

Agenda Item Submitted For: (?)

- ☐ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☒ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ Grant Proposal
- ☐ Revenue
- ☐ SOW-Change Order-Amendment#
- ☐ Other

Procurement Method(s) *

Check all that Apply

- | | |
|--|---|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☒ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☐ Not Applicable (If there are no funds required) | ☒ Other Choice Partners 21/031KN-55 |

Contract Description / Type

- | | |
|--|---|
| ☐ Personal/Professional Services | ☐ Consultant |
| ☐ Consumer Driven Contract | ☐ New Contract/Agreement |
| ☐ Memorandum of Understanding | ☐ Amendment to Existing Contract |
| ☐ Affiliation or Preceptor | ☐ Service/Maintenance |
| ☐ BAA/DUA | ☐ IT/Software License Agreement |
| ☐ Pooled Contract | ☐ Lease |
| ☒ Renewal of Existing Contract | ☐ Other |

Vendor/Contractor a Historically Underutilized Business (HUB) (?)

- ☐ Yes
- ☒ No
- ☐ Unknown

Contract NTE* (?)

\$ 284,516.27

Rate(s)/Rate(s) Description

Varies

Unit(s) Served*

1130

G/L Code(s)*

570000

Current Fiscal Year Purchase Order Number*

CT144100

Contract Requestor*

Rick Hurst

Contract Owner*

Mustafa Cochinwala

File Upload (?)

Evaluation of Current Fiscal Year Performance

Have there been any significant performance deficiencies within the current fiscal year? *

☐ Yes ☒ No

Were Services delivered as specified in the contract? *

☒ Yes ☐ No

Did Contractor perform duties in a manner consistent with standards of the profession? *

☒ Yes ☐ No

Did Contractor adhere to the contracted schedule? * (?)

☒ Yes ☐ No

Were reports, billing and/or invoices submitted in a timely manner? * (?)

☒ Yes ☐ No

Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? * (?)

☒ Yes ☐ No

Did Contractor render services consistent with Agency policy and procedures? * (?)

☒ Yes ☐ No

Maintained legally required standards for certification, licensure, and/or training? * (?)

☒ Yes ☐ No

Renewal Determination

Is the contract being renewed for next fiscal year with this Contractor? * (?)

☒ Yes ☐ No

How does this contract support Agency/Unit Strategic priorities? *

Supports our initiative for a robust Information Security posture

Renewal Information for Next Fiscal Year



Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1130	\$ 284,516.27	574000
Budget Manager*		Secondary Budget Manager*
Campbell, Ricardo		Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

Year 3 of 3
\$284,516.27

Project WBS (Work Breakdown Structure)* (?)

N/A

Fiscal Year* (?)	Amount* (?)
2026	\$ 284,516.27

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

General Revenue (GR)

Contract Content Changes



Are there any required changes to the contract language?* (?)

☐ Yes ☒ No

Will the scope of the Services change?*

☐ Yes ☒ No

Is the payment deadline different than net (45)?*

☐ Yes ☒ No

Are there any changes in the Performance Targets?*

☐ Yes ☒ No

Are there any changes to the Submission deadlines for notes or supporting documentation?*

☐ Yes ☒ No

File Upload (?)

FY2026 Trace3 - Crowdstrike Year 3 of 3.pdf

222.45KB

Contract Owner



Contract Owner* (?)

Please Select Contract Owner

Mustafa Cochinwala

Budget Manager Approval(s)



Approved by

Ricardo Campbell

Contract Owner Approval



Approved by

Mustafa Cechinnala

Contracts Approval

Approve*

- ☒ Yes
- ☐ No, reject entire submission
- ☐ Return for correction

Approved by*

Belinda Stude

Approval Date*

10/23/2025

EXHIBIT R-3

NOVEMBER 2025 INTERLOCAL AGREEMENTS

[illegible]



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2026

Contract ID# *

2022-0515

Contractor Name *

Harris County Resources for Children and Adults

Service Provided* (?)

Comprehensive Mental Health Services for the TRIAD Prevention program for at-risk youth and their families.

Renewal Term Start Date *

10/1/2025

Renewal Term End Date *

9/30/2026

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☐ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☒ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ Grant Proposal
- ☒ Revenue
- ☐ SOW-Change Order-Amendment#
- ☐ Other

Procurement Method(s) *

Check all that Apply

- | | |
|--|--|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☐ Tag-On |
| ☒ Interlocal | ☐ Consumer Driven |
| ☐ Not Applicable (If there are no funds required) | ☐ Other |

Contract Description / Type

- | | |
|--|---|
| ☐ Personal/Professional Services | ☐ Consultant |
| ☐ Consumer Driven Contract | ☐ New Contract/Agreement |
| ☐ Memorandum of Understanding | ☐ Amendment to Existing Contract |
| ☐ Affiliation or Preceptor | ☐ Service/Maintenance |
| ☐ BAA/DUA | ☐ IT/Software License Agreement |
| ☐ Pooled Contract | ☐ Lease |
| ☒ Renewal of Existing Contract | ☐ Other |

Vendor/Contractor a Historically Underutilized Business (HUB) (?)

- ☐ Yes
- ☒ No
- ☐ Unknown

Contract NTE* (?)

\$ 392,374.00

Rate(s)/Rate(s) Description

N/A

Unit(s) Served*

N/A

G/L Code(s)*

N/A

Current Fiscal Year Purchase Order Number*

N/A

Contract Requestor*

Sheenia Williams-Wesley

Contract Owner*

Monalisa Jiles

File Upload (?)**Renewal Determination****Is the contract being renewed for next fiscal year with this Contractor?* (?)**☒ Yes ☐ No**How does this contract support Agency/Unit Strategic priorities?***

Working with at-risk youth and their families to divert them from the juvenile justice system

Renewal Information for Next Fiscal Year**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6702	\$ 392,374.00	540000

Budget Manager*

Williams-Wesley, Sheenia

Secondary Budget Manager*

Reyes, Elizabeth

Provide Rate and Rate Descriptions if applicable* (?)

n/a

Project WBS (Work Breakdown Structure)* (?)

n/a

Fiscal Year* (?)

2026

Amount* (?)

\$ 359,676.00

Fiscal Year* (?)

2027

Amount* (?)

\$ 32,698.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

County

Contract Content Changes

Are there any required changes to the contract language?* (?)

☐ Yes ☒ No

Will the scope of the Services change?*

☐ Yes ☒ No

Is the payment deadline different than net (45)?*

☐ Yes ☒ No

Are there any changes in the Performance Targets?*

☐ Yes ☒ No

Are there any changes to the Submission deadlines for notes or supporting documentation?*

☐ Yes ☒ No

File Upload (?)

Contract Owner

Contract Owner* (?)

Please Select Contract Owner

Sean McElroy

Budget Manager Approval(s)

Approved by

Sherrin Williams-Wesley

Contract Owner Approval

Approved by

Sean McElroy

Contracts Approval

Approve*

- ☒ Yes
- ☐ No, reject entire submission
- ☐ Return for correction

Approved by*

Belinda Stude

Approval Date*

10/13/2025

EXHIBIT R-4

NOVEMBER 2025 AMENDMENTS 100k - 250k



Executive Contract Summary

Contract Section

Contractor*

MCKESSON CORPORATION

Contract ID #*

7137

Presented To*

- ☐ Resource Committee
☒ Full Board

Date Presented*

10/28/2025

Parties* (?)

HARRIS CENTER AND MCKESSON CORPORATION

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ Grant Proposal
☐ Revenue
☐ SOW-Change Order-Amendment#
☐ Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|--|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☒ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☐ Not Applicable (If there are no funds required) | ☒ Other TAG-ON THROUGH GPO VIZIENT |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

- ☐ Yes ☒ No

Funding Information*

- ☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

9/1/2025

Contract Term End Date* (?)

8/31/2026

If contract is off-cycle, specify the contract term (?)

Current Contract Amount*

\$ 5,000.00

Increase Not to Exceed*

\$ 219,419.00

Revised Total Not to Exceed (NTE)*

\$ 224,419.00

Fiscal Year* (?)

2026

Amount* (?)

\$ 224,419.00

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)☐ Personal/Professional Services☐ Consumer Driven Contract☐ Memorandum of Understanding☐ Affiliation or Preceptor☐ BAA/DUA☐ Pooled Contract☐ Renewal of Existing Contract☐ Consultant☐ New Contract/Agreement☒ Amendment to Existing Contract☐ Service/Maintenance☐ IT/Software License Agreement☐ Lease☒ Other TAG-ON GPO**Justification/Purpose of Contract/Description of Services Being Provided* (?)**

AGENCY WIDE MEDICAL SURGICAL SUPPLIES-TAG-ON GPO VIZIENT

Contract Owner*

Kia Walker

Previous History of Contracting with Vendor/Contractor*☒ Yes ☐ No ☐ Unknown**Please add previous contract dates and what services were provided***AGENCY WIDE MEDICAL SURGICAL SUPPLIES-TAG-ON
TO GPO VIZIENT**Vendor/Contractor a Historically Underutilized Business (HUB)* (?)**☐ Yes ☐ No ☒ Unknown**Community Partnership* (?)**☐ Yes ☐ No ☒ Unknown**Supporting Documentation Upload (?)****Vendor/Contractor Contact Person****Name***

MCKESSON CORPORATION

Address*

Street Address

PO BOX 933207

Address Line 2

City

ATLANTA

Postal / Zip Code

31193-3024

State / Province / Region

GA

Country

US

Phone Number*

(800) 950-9229

Email*

Sarah.Zujic@mckesson.com

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9206	\$ 75,000.00	547002

Budget Manager

Oshman, Jodel

Secondary Budget Manager

Ramirez, Priscilla

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2212	\$ 10,000.00	547002

Budget Manager

Shelby, Debbie

Secondary Budget Manager

Smith, Janai

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2213	\$ 3,000.00	547002

Budget Manager

Shelby, Debbie

Secondary Budget Manager

Smith, Janai

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2214	\$ 10,000.00	547002

Budget Manager

Shelby, Debbie

Secondary Budget Manager

Smith, Janai

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2215	\$ 6,000.00	547002

Budget Manager

Shelby, Debbie

Secondary Budget Manager

Smith, Janai

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2250	\$ 2,600.00	547002

Budget Manager

Oshman, Jodel

Secondary Budget Manager

Ramirez, Priscilla

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2301	\$ 4,500.00	547002
Budget Manager	Secondary Budget Manager	
Shelby, Debbie	Smith, Janai	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2801	\$ 8,000.00	547002
Budget Manager	Secondary Budget Manager	
Smith, Janai	Shelby, Debbie	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
3611	\$ 50.00	547002
Budget Manager	Secondary Budget Manager	
Degracia, Ericka	Collins, Evanthe	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
4323	\$ 2,956.00	547002
Budget Manager	Secondary Budget Manager	
Shelby, Debbie	Smith, Janai	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
4325	\$ 2,180.00	547002
Budget Manager	Secondary Budget Manager	
Shelby, Debbie	Smith, Janai	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
4736	\$ 3,200.00	547002
Budget Manager	Secondary Budget Manager	
Shelby, Debbie	Smith, Janai	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6302	\$ 3,000.00	547002
Budget Manager	Secondary Budget Manager	
Williams-Wesley, Sheenia	Reyes, Elizabeth	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
6500	\$ 2,250.00	547002
Budget Manager	Secondary Budget Manager	
Williams-Wesley, Sheenia	Reyes, Elizabeth	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9274	\$ 3,683.00	547002
Budget Manager	Secondary Budget Manager	
Ramirez, Priscilla	Puente, Giovanni	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9208	\$ 1,500.00	547002
Budget Manager	Secondary Budget Manager	
Oshman, Jodel	Ramirez, Priscilla	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9209	\$ 55,000.00	547002
Budget Manager	Secondary Budget Manager	
Oshman, Jodel	Ramirez, Priscilla	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9210	\$ 7,000.00	547002
Budget Manager	Secondary Budget Manager	
Oshman, Jodel	Ramirez, Priscilla	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9240	\$ 1,000.00	547002
Budget Manager	Secondary Budget Manager	
Ramirez, Priscilla	Puente, Giovanni	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9243	\$ 50.00	547002
Budget Manager	Secondary Budget Manager	
Ramirez, Priscilla	Puente, Giovanni	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9261	\$ 3,370.00	547002
Budget Manager	Secondary Budget Manager	
Ramirez, Priscilla	Puente, Giovanni	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9264	\$ 1,177.00	547002
Budget Manager	Secondary Budget Manager	
Ramirez, Priscilla	Puente, Giovanni	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9274	\$ 3,683.00	547002
Budget Manager	Secondary Budget Manager	
Ramirez, Priscilla	Puente, Giovanni	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9403	\$ 2,183.00	547002
Budget Manager	Secondary Budget Manager	
Ramirez, Priscilla	Puente, Giovanni	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9404	\$ 1,455.00	547002
Budget Manager	Secondary Budget Manager	
Ramirez, Priscilla	Puente, Giovanni	
Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9407	\$ 300.00	547002
Budget Manager	Secondary Budget Manager	
Ramirez, Priscilla	Puente, Giovanni	

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9502	\$ 1,782.00	547002

Budget Manager	Secondary Budget Manager
Ramirez, Priscilla	Puente, Giovanni

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9810	\$ 4,500.00	547002

Budget Manager	Secondary Budget Manager
Oshman, Jodel	Ramirez, Priscilla

Provide Rate and Rate Descriptions if applicable* (?)

N/A

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name

Conger, Lesley

Submission Date

10/21/2025

Budget Manager Approval(s)

Approved by

Jodel Oshman

Approval Date

10/21/2025

Approved by

Debbie Chambers Shelby

Approval Date

10/21/2025

Approved by

Janae Lynnette Smith

Approval Date

10/21/2025

Approved by

Erica Degracia

Approval Date

10/21/2025

Approved by

Shenita Williams-Wesley

Approval Date

10/21/2025

Approved by

Priscilla M. Ramirez

Approval Date

10/21/2025

Procurement Approval

File Upload (?)

Approved by

Approval Date

Sign

Contract Owner Approval



Approved by

Approval Date

Kia Donae Walker

10/21/2025

Contracts Approval

Approve *

- ☒ Yes
- ☐ No, reject entire submission
- ☐ Return for correction

Approved by *

Approval Date *

Belinda Stude

10/22/2025

Executive Contract Summary

Contract Section

Contractor*

Otis Elevator Company

Contract ID #*

6093

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

11/11/2025

Parties* (?)

The Harris Center for MH & IDD and Otis Elevator

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ Grant Proposal
☐ Revenue
☐ SOW-Change Order-Amendment#
☐ Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|---|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☐ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☐ Not Applicable (If there are no funds required) | ☒ Other By assignment-9401 SW property acquisition. |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

- ☐ Yes ☒ No

Funding Information*

- ☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

11/1/2025

Contract Term End Date* (?)

10/31/2026

If contract is off-cycle, specify the contract term (?)

11/1/2025-10/31/2026

Current Contract Amount*

\$ 55,000.00

Increase Not to Exceed*

\$ 51,588.65

Revised Total Not to Exceed (NTE)*

\$ 106,588.65

Fiscal Year* (?)

2026

Amount* (?)

\$ 106,588.65

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- ☐ Personal/Professional Services
☐ Consumer Driven Contract
☐ Memorandum of Understanding
☐ Affiliation or Preceptor
☐ BAA/DUA
☐ Pooled Contract
☐ Renewal of Existing Contract

- ☐ Consultant
☐ New Contract/Agreement
☒ Amendment to Existing Contract
☐ Service/Maintenance
☐ IT/Software License Agreement
☐ Lease
☐ Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

upgrade obsolete drive for Elevator #1.
 This is one of the two client elevators

Contract Owner*

Mustafa Cochinwala

Previous History of Contracting with Vendor/Contractor*

☒ Yes ☐ No ☐ Unknown

Please add previous contract dates and what services were provided*

2015-Present

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

☐ Yes ☒ No ☐ Unknown

Please provide an explanation*

not eligible

Community Partnership* (?)

☐ Yes ☒ No ☐ Unknown

Supporting Documentation Upload (?)

QTE-002288650-Otis T-Order Proposal - New Drive Upgrade - Harris
 Center.pdf

97.89KB

Vendor/Contractor Contact Person**Name***

Megan Milford

Address*

Street Address

1289 North Post Oak Road suite 100

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77040

Country

US

Phone Number*

346-499-1457

Email*

jaron.alexander@otis.com

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No. *
1817	\$ 51,588.65	569009
Budget Manager	Secondary Budget Manager	
Campbell, Ricardo	Moynihan, Kelly	

Provide Rate and Rate Descriptions if applicable* (?)

Attached

Project WBS (Work Breakdown Structure)* (?)

n/a

Requester Name

Cantu-Espinoza, Lisa

Submission Date

10/20/2025

Budget Manager Approval(s)**Approved by***Ricardo Campbell***Approval Date**

10/20/2025

Contract Owner Approval**Approved by***Mustafa Coshinnala***Approval Date**

10/22/2025

Contracts Approval

Approve *

- ☒ Yes
☐ No, reject entire submission
☐ Return for correction

Approved by *

Belinda Stude

Approval Date *

10/22/2025

EXHIBIT R-5

NOVEMBER 2025

RENEWALS 100k - 250k



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2026

Contract ID# *

2024-0952

Contractor Name *

Innovative Network Technologies, Corp.

Service Provided* (?)

SafeBreach, Breach and Attack Simulation (BAS) Platform Software Subscription and Support Services

Renewal Term Start Date *

10/13/2025

Renewal Term End Date *

10/14/2026

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ Grant Proposal
- ☐ Revenue
- ☐ SOW-Change Order-Amendment#
- ☐ Other

Procurement Method(s) *

Check all that Apply

- | | |
|--|---|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☒ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☐ Not Applicable (If there are no funds required) | ☒ Other TIPS 230105 |

Contract Description / Type

- | | |
|--|---|
| ☐ Personal/Professional Services | ☐ Consultant |
| ☐ Consumer Driven Contract | ☐ New Contract/Agreement |
| ☐ Memorandum of Understanding | ☐ Amendment to Existing Contract |
| ☐ Affiliation or Preceptor | ☐ Service/Maintenance |
| ☐ BAA/DUA | ☐ IT/Software License Agreement |
| ☐ Pooled Contract | ☐ Lease |
| ☒ Renewal of Existing Contract | ☐ Other |

Vendor/Contractor a Historically Underutilized Business (HUB) (?)

- ☐ Yes
- ☒ No
- ☐ Unknown

Contract NTE* (?)

\$ 142,860.00

Rate(s)/Rate(s) Description

N/A

Unit(s) Served*

1130

G/L Code(s)*

574000

Current Fiscal Year Purchase Order Number*

CT144364

Contract Requestor*

Rick Hurst

Contract Owner*

Mustafa Cochinwala

File Upload (?)

Evaluation of Current Fiscal Year Performance

Have there been any significant performance deficiencies within the current fiscal year? *

☐ Yes ☒ No

Were Services delivered as specified in the contract? *

☒ Yes ☐ No

Did Contractor perform duties in a manner consistent with standards of the profession? *

☒ Yes ☐ No

Did Contractor adhere to the contracted schedule? * (?)

☒ Yes ☐ No

Were reports, billing and/or invoices submitted in a timely manner? * (?)

☒ Yes ☐ No

Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? * (?)

☒ Yes ☐ No

Did Contractor render services consistent with Agency policy and procedures? * (?)

☒ Yes ☐ No

Maintained legally required standards for certification, licensure, and/or training? * (?)

☒ Yes ☐ No

Renewal Determination

Is the contract being renewed for next fiscal year with this Contractor? * (?)

☒ Yes ☐ No

How does this contract support Agency/Unit Strategic priorities? *

Information Security Platform

Renewal Information for Next Fiscal Year



Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1130	\$ 139,022.40	574000

Budget Manager*	Secondary Budget Manager*
Campbell, Ricardo	Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

See attached

Project WBS (Work Breakdown Structure)* (?)

N/A

Fiscal Year* (?)	Amount* (?)
2026	\$ 139,022.40

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

General Revenue (GR)

Contract Content Changes



Are there any required changes to the contract language?* (?)

☐ Yes ☒ No

Will the scope of the Services change? *

☐ Yes ☒ No

Is the payment deadline different than net (45)? *

☐ Yes ☒ No

Are there any changes in the Performance Targets? *

☐ Yes ☒ No

Are there any changes to the Submission deadlines for notes or supporting documentation? *

☐ Yes ☒ No

File Upload (?)

FY2026 InNet SafeBreach Simulator Subscription.pdf

97.4KB

DIR-CPO-4873_InNet .pdf

339.06KB

Contract Owner



Contract Owner* (?)

Please Select Contract Owner

Mustafa Cochinwala

Budget Manager Approval(s)



Approved by

Ricardo Campbell

Contract Owner Approval



Approved by

Mustafa Coshinnala

Contracts Approval

Approve *

- ☒ Yes
- ☐ No, reject entire submission
- ☐ Return for correction

Approved by *

Belinda Stude

Approval Date *

10/15/2025

EXHIBIT R-6

**NOVEMBER 2025
NEW CONTRACTS
UNDER 100k**

[illegible]



Executive Contract Summary

Contract Section

Contractor*

The Ballroom at Tanglewood

Contract ID #*

NA

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

11/11/2025

Parties* (?)

The Harris Center for Mental Health and IDD and The Ballroom at Tanglewood

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ Grant Proposal
☐ Revenue
☐ SOW-Change Order-Amendment#
☐ Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|--|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☐ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☐ Not Applicable (If there are no funds required) | ☒ Other Only affordable venue for date needed. |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

- ☐ Yes ☒ No

Funding Information*

- ☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

11/1/2025

Contract Term End Date* (?)

8/31/2026

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2026

Amount* (?)

\$ 16,000.00

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- | | |
|--|---|
| ☒ Personal/Professional Services | ☐ Consultant |
| ☐ Consumer Driven Contract | ☐ New Contract/Agreement |
| ☐ Memorandum of Understanding | ☐ Amendment to Existing Contract |
| ☐ Affiliation or Preceptor | ☐ Service/Maintenance |
| ☐ BAA/DUA | ☐ IT/Software License Agreement |
| ☐ Pooled Contract | ☐ Lease |
| ☐ Renewal of Existing Contract | ☐ Other <input type="text"/> |

Justification/Purpose of Contract/Description of Services Being Provided* (?)

This will serve as the venue for the annual Employee Recognition luncheon.

Contract Owner*

Ninfa Escobar

Previous History of Contracting with Vendor/Contractor*☐ Yes ☐ No ☒ Unknown**Vendor/Contractor a Historically Underutilized Business (HUB)* (?)**☐ Yes ☐ No ☒ Unknown**Community Partnership* (?)**☐ Yes ☐ No ☒ Unknown**Supporting Documentation Upload (?)**

Banquet Event Order - The Harris Center for Mental Health IDD - The Ballroom at Tanglewood_original.pdf	35.89KB
Ballroom W9.pdf	4.82MB
COI Ballroom.png	86.07KB

Vendor/Contractor Contact Person**Name***

Craig Howard

Address*

Street Address

5430 Westheimer Road

Address Line 2

City

Houston

Postal / Zip Code

77056-5302

State / Province / Region

TX

Country

US

Phone Number*

713-292-9443

Email*

craig@theballroomhouston.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1108	\$ 16,000.00	549009

Budget Manager	Secondary Budget Manager
Moynihan, Kelly	Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

NA

Project WBS (Work Breakdown Structure)* (?)

NA

Requester Name	Submission Date
Escobar, Ninfa	10/1/2025

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Approval Date

10/1/2025

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Ninfa Escobar

Approval Date

10/1/2025

Contracts Approval

Approve*

- ☒ Yes
☐ No, reject entire submission
☐ Return for correction

Approved by*

Belinda Stude

Approval Date*

10/9/2025

EXHIBIT R-7

NOVEMBER 2025 AMENDMENTS UNDER 100k



Executive Contract Summary

Contract Section

Contractor*

Avalon Event Rentals

Contract ID #*

2025-1132

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

11/11/2025

Parties* (?)

The Harris Center and Avalon Event Rentals

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ Grant Proposal
☐ Revenue
☐ SOW-Change Order-Amendment#
☐ Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|--|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☒ Request for Quote | ☐ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☐ Not Applicable (If there are no funds required) | ☐ Other |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

- ☐ Yes ☒ No

Funding Information*

- ☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

10/6/2025

Contract Term End Date* (?)

10/31/2025

If contract is off-cycle, specify the contract term (?)

Current Contract Amount*

\$ 5,521.83

Increase Not to Exceed*

\$ 85.00

Revised Total Not to Exceed (NTE)*

\$ 5,606.83

Fiscal Year* (?)

2026

Amount* (?)

\$ 5,606.38

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)☐ Personal/Professional Services☐ Consumer Driven Contract☐ Memorandum of Understanding☐ Affiliation or Preceptor☐ BAA/DUA☐ Pooled Contract☐ Renewal of Existing Contract☐ Consultant☐ New Contract/Agreement☒ Amendment to Existing Contract☐ Service/Maintenance☐ IT/Software License Agreement☐ Lease☐ Other**Justification/Purpose of Contract/Description of Services Being Provided* (?)**

Tent rental for opening ceremony on October 13th for 6168 South Loop East apartments.

Added 25 chairs for new total of \$5606.38

Contract Owner*

Karen Hurst

Previous History of Contracting with Vendor/Contractor*☐ Yes ☒ No ☐ Unknown**Vendor/Contractor a Historically Underutilized Business (HUB)* (?)**☐ Yes ☐ No ☒ Unknown**Community Partnership* (?)**☐ Yes ☐ No ☒ Unknown**Supporting Documentation Upload (?)**

Acme Reservation-18536 tent.pdf

270.1KB

Any Occasion-230813404 tent.pdf

175.07KB

Avalon unsigned-contract-v2-The-Harris-Center-for-Mental-Health-and-IDD-230846972.pdf

158.1KB

Bright Quote-2804559 tent.pdf

185.9KB

COI - The Harris Center for Mental Health and IDD_Avalon Event Rentals LLC.pdf

88.04KB

w9 - Avalon Event Rentals 2025.pdf

76.8KB

Vendor/Contractor Contact Person**Name***

Avalon Event Rentals

Address*

Street Address

6747 Signat Drive

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77041-2714

Country

US

Phone Number*

713-974-3646

Email*

yvonne@avaloneventrentals.com

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1124	\$ 5,606.38	595000
Budget Manager	Secondary Budget Manager	
Campbell, Ricardo	Moynihan, Kelly	

Provide Rate and Rate Descriptions if applicable* (?)

See attached

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name

Hurst, Richard

Submission Date

10/6/2025

Budget Manager Approval(s)**Approved by***Ricardo Campbell***Approval Date**

10/6/2025

Procurement Approval**File Upload (?)****Approved by***Sharon Brauner***Approval Date**

10/7/2025

Contract Owner Approval

Approved by

Karen E. Hurst

Approval Date

10/9/2025

Contracts Approval

Approve *

- ☒ Yes
- ☐ No, reject entire submission
- ☐ Return for correction

Approved by *

Belinda Stude

Approval Date *

10/16/2025



Executive Contract Summary

Contract Section

Contractor*

EFI-Global

Contract ID #*

2025-1054

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

11/11/2025

Parties* (?)

EFI Global and The Harris Center

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ Grant Proposal
☐ Revenue
☐ SOW-Change Order-Amendment#
☐ Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|--|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☒ Request for Quote | ☐ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☐ Not Applicable (If there are no funds required) | ☐ Other |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

- ☐ Yes ☒ No

Funding Information*

- ☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

5/20/2025

Contract Term End Date* (?)

5/31/2026

If contract is off-cycle, specify the contract term (?)

Current Contract Amount*

\$ 33,500.00

Increase Not to Exceed*

\$ 9,500.00

Revised Total Not to Exceed (NTE)*

\$ 43,000.00

Fiscal Year* (?)

2026

Amount* (?)

\$ 43,000.00

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)☒ Personal/Professional Services☐ Consumer Driven Contract☐ Memorandum of Understanding☐ Affiliation or Preceptor☐ BAA/DUA☐ Pooled Contract☐ Renewal of Existing Contract☐ Consultant☐ New Contract/Agreement☒ Amendment to Existing Contract☐ Service/Maintenance☐ IT/Software License Agreement☐ Lease☐ Other**Justification/Purpose of Contract/Description of Services Being Provided* (?)**

increase cost due to additional work shifts needed to oversee abatement

Contract Owner*

Karen Hurst

Previous History of Contracting with Vendor/Contractor*☒ Yes ☐ No ☐ Unknown**Please add previous contract dates and what services were provided***

2012 to present - abatement and remediation oversight

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)☐ Yes ☒ No ☐ Unknown**Please provide an explanation***

does not meet criteria

Community Partnership* (?)☐ Yes ☒ No ☐ Unknown**Supporting Documentation Upload (?)**

EFI Invoice No. 400000313491-THC6160SouthLoopEastFacility-AsbestosConsultingServices09302025.pdf

466.5KB

Vendor/Contractor Contact Person**Name***

EFI Global / Rick Anderson

Address*

Street Address

2000 South Dairy Ashford Road ste 600

Address Line 2

City

Houston

State / Province / Region

TX

Postal / Zip Code

77077-5700

Country

US

Phone Number*

8325185145

Email*

rick.anderson@efiglobal.com

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No. *
1126	\$ 9,500.00	900040
Budget Manager	Secondary Budget Manager	
Campbell, Ricardo	Campbell, Ricardo	

Provide Rate and Rate Descriptions if applicable* (?)

increase PO by \$9,500.00 for a total NTE of \$43,000.00 due to additional work needed to complete project, see attachment

Project WBS (Work Breakdown Structure)* (?)

FM25.1126.01 - 6160 Improvements

Requester Name

Harper, Sarah

Submission Date

10/15/2025

Budget Manager Approval(s)**Approved by***Ricardo Campbell***Approval Date**

10/15/2025

Procurement Approval**File Upload (?)****Approved by**

Sign

Approval Date**Contract Owner Approval**

Approved by

Karen E. Hurst

Approval Date

10/15/2025

Contracts Approval

Approve *

- ☒ Yes
- ☐ No, reject entire submission
- ☐ Return for correction

Approved by *

Belinda Stude

Approval Date *

10/15/2025



Executive Contract Summary

Contract Section

Contractor*

KONE Inc.

Contract ID #*

1072

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

11/11/2025

Parties* (?)

The Harris Center for MH and IDD and KONE Inc.

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ Grant Proposal
☐ Revenue
☐ SOW-Change Order-Amendment#
☐ Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|--|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☐ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☐ Not Applicable (If there are no funds required) | ☒ Other Transferred Contract from The ReCenter |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

- ☐ Yes ☒ No

Funding Information*

- ☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

12/1/2024

Contract Term End Date* (?)

1/31/2026

If contract is off-cycle, specify the contract term (?)

12/1/2024-1/31/2026

Current Contract Amount*

\$ 10,608.84

Increase Not to Exceed*

\$ 5,000.00

Revised Total Not to Exceed (NTE)*

\$ 15,608.84

Fiscal Year* (?)

2026

Amount* (?)

\$ 5,000.00

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- ☐ Personal/Professional Services
☐ Consumer Driven Contract
☐ Memorandum of Understanding
☐ Affiliation or Preceptor
☐ BAA/DUA
☐ Pooled Contract
☐ Renewal of Existing Contract

- ☐ Consultant
☐ New Contract/Agreement
☒ Amendment to Existing Contract
☒ Service/Maintenance
☐ IT/Software License Agreement
☐ Lease
☐ Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

Elevator Service for 1104 Alabama - Add funding for FY26

Contract Owner*

Karen Hurst

Previous History of Contracting with Vendor/Contractor*☒ Yes ☐ No ☐ Unknown**Please add previous contract dates and what services were provided***

12/1/2024-1/31/2026

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)☐ Yes ☒ No ☐ Unknown**Please provide an explanation***

not eligible

Community Partnership* (?)☐ Yes ☐ No ☒ Unknown**Supporting Documentation Upload (?)**241219_-_Change_of_Ownership_contract_rider_-_1104_Alabama (fully
executed0.pdf

793.43KB

Vendor/Contractor Contact Person**Name***

Kim Caleb

Address*

Street Address

15800 International Plaza Drive, Ste 150

Address Line 2

City

Houston

State / Province / Region

Texas

Postal / Zip Code

77032

Country

United States

Phone Number*

3463869892

Email*

caleb.kim@kone.com

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No. *
1821	\$ 5,000.00	569009
Budget Manager		Secondary Budget Manager
Campbell, Ricardo		Moynihan, Kelly

Provide Rate and Rate Descriptions if applicable* (?)

no change

Project WBS (Work Breakdown Structure)* (?)

n/a

Requester Name

Cantu-Espinoza, Lisa

Submission Date

10/16/2025

Budget Manager Approval(s)**Approved by***Ricardo Campbell***Approval Date**

10/16/2025

Contract Owner Approval**Approved by***Karen E. Hurst***Approval Date**

10/16/2025

Contracts Approval

Approve*

- ☒ Yes
- ☐ No, reject entire submission
- ☐ Return for correction

Approved by*

Belinda Stude

Approval Date*

10/16/2025



Executive Contract Summary

Contract Section

Contractor*

KONE, Inc.

Contract ID #*

1056

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

11/11/2025

Parties* (?)

The Harris Center for Mental Health and IDD and KONE Inc.

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ Grant Proposal
☐ Revenue
☐ SOW-Change Order-Amendment#
☐ Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|---|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☐ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☐ Not Applicable (If there are no funds required) | ☒ Other Contract Transfer from The ReCenter |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)?

*

- ☐ Yes ☒ No

Funding Information*

- ☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

12/1/2024

Contract Term End Date* (?)

1/31/2026

If contract is off-cycle, specify the contract term (?)

12/1/2024-1/31/2026

Current Contract Amount*

\$ 10,459.80

Increase Not to Exceed*

\$ 7,000.00

Revised Total Not to Exceed (NTE)*

\$ 17,459.80

Fiscal Year* (?)

2026

Amount* (?)

\$ 7,000.00

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- ☐ Personal/Professional Services
☐ Consumer Driven Contract
☐ Memorandum of Understanding
☐ Affiliation or Preceptor
☐ BAA/DUA
☐ Pooled Contract
☐ Renewal of Existing Contract

- ☐ Consultant
☐ New Contract/Agreement
☒ Amendment to Existing Contract
☐ Service/Maintenance
☐ IT/Software License Agreement
☐ Lease
☐ Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

Elevator Service for 3809 Main St - Need to add funds for FY26

Contract Owner*

Karen Hurst

Previous History of Contracting with Vendor/Contractor*☒ Yes ☐ No ☐ Unknown**Please add previous contract dates and what services were provided***

12/1/2024-1/31/2026

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)☐ Yes ☒ No ☐ Unknown**Please provide an explanation***

not eligible

Community Partnership* (?)☐ Yes ☐ No ☒ Unknown**Supporting Documentation Upload (?)**

241219 - Change of Ownership contract rider - 3809 Main St_VAS Full.pdf

679.92KB

Vendor/Contractor Contact Person**Name***

Lisa Ann Cantu

Address*

Street Address

15800 International Plaza Drive, Ste 150

Address Line 2

City

Houston

State / Province / Region

Texas

Postal / Zip Code

77032

Country

United States

Phone Number*

3463869892

Email*

caleb.kim@kone.com

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No. *
1822	\$ 7,000.00	569009
Budget Manager	Secondary Budget Manager	
Campbell, Ricardo	Moynihan, Kelly	

Provide Rate and Rate Descriptions if applicable* (?)

no change

Project WBS (Work Breakdown Structure)* (?)

n/a

Requester Name

Cantu-Espinoza, Lisa

Submission Date

10/16/2025

Budget Manager Approval(s)**Approved by***Ricardo Campbell***Approval Date**

10/16/2025

Contract Owner Approval**Approved by***Karen E. Hurst***Approval Date**

10/16/2025

Contracts Approval

Approve*

- ☒ Yes
☐ No, reject entire submission
☐ Return for correction

Approved by*

Belinda Stude

Approval Date*

10/17/2025



Executive Contract Summary

Contract Section


Contractor*

MSX Group, LLC

Contract ID #*

7414

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

11/11/2025

Parties* (?)

MSX Group and The Harris Center

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ Grant Proposal
☐ Revenue
☐ SOW-Change Order-Amendment#
☐ Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|--|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☒ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☐ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☐ Not Applicable (If there are no funds required) | ☐ Other |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

- ☐ Yes ☒ No

Funding Information*

- ☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

9/1/2025

Contract Term End Date* (?)

8/31/2026

If contract is off-cycle, specify the contract term (?)

Current Contract Amount*

\$ 6,500.00

Increase Not to Exceed*

\$ 953.69

Revised Total Not to Exceed (NTE)*

\$ 7,453.69

Fiscal Year* (?)

2026

Amount* (?)

\$ 7,453.69

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- ☐ Personal/Professional Services
☐ Consumer Driven Contract
☐ Memorandum of Understanding
☐ Affiliation or Preceptor
☐ BAA/DUA
☐ Pooled Contract
☐ Renewal of Existing Contract

- ☐ Consultant
☐ New Contract/Agreement
☒ Amendment to Existing Contract
☐ Service/Maintenance
☐ IT/Software License Agreement
☐ Lease
☐ Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

Added users in FY2025 that were not calculated in the FY2026 renewal. Proprietary Budgeting Software for The Harris Center.

Contract Owner*

Mustafa Cochinwala

Previous History of Contracting with Vendor/Contractor*

☒ Yes ☐ No ☐ Unknown

Please add previous contract dates and what services were provided*

FY18- FY25 - Budgeting Software

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

☐ Yes ☐ No ☒ Unknown

Community Partnership* (?)

☐ Yes ☐ No ☒ Unknown

Supporting Documentation Upload (?)

FW_ Prospero Annual Support Renewal Invoice .msg	92.5KB
ID 7414 - MSX Group - June 2025 Board Report.pdf	140.99KB
ID_7414-MSX_Group_-_FY26_Contract_Renewal (FE).pdf	370.73KB

Vendor/Contractor Contact Person**Name***

Derek Krebs

Address*

Street Address

100 South Pace Boulevard

Address Line 2

City

Pensacola

State / Province / Region

FL

Postal / Zip Code

32502-5004

Country

US

Phone Number*

877-456-7632

Email*

Finance@msxgroup.com

Budget Section**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No. *
1122	\$ 7,453.69	553002
Budget Manager	Secondary Budget Manager	
Campbell, Ricardo	Campbell, Ricardo	

Provide Rate and Rate Descriptions if applicable* (?)

See attached

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name

Hurst, Richard

Submission Date

10/14/2025

Budget Manager Approval(s)**Approved by***Ricardo Campbell***Approval Date**

10/14/2025

Procurement Approval**File Upload (?)****Approved by**

Sign

Approval Date**Contract Owner Approval**

Approved by

Mustafa Cochinnala

Approval Date

10/14/2025

Contracts Approval

Approve *

- ☒ Yes
- ☐ No, reject entire submission
- ☐ Return for correction

Approved by *

Belinda Stude

Approval Date *

10/15/2025



Executive Contract Summary

Contract Section

Contractor*

Sugar Land Astros, LLC DBA/SL Baseball, LLC

Contract ID #*

2025-1112

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

11/11/2025

Parties* (?)

The Harris Center for Mental Health and IDD and Sugar Land Astros, LLC DBA/SL Baseball, LLC

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ Grant Proposal
☐ Revenue
☐ SOW-Change Order-Amendment#
☐ Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|--|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☐ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☐ Not Applicable (If there are no funds required) | ☒ Other NA |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)?
 *

- ☐ Yes ☒ No

Funding Information*

- ☐ New Contract ☒ Amendment

Contract Term Start Date* (?)

10/1/2025

Contract Term End Date* (?)

10/31/2025

If contract is off-cycle, specify the contract term (?)

Current Contract Amount*

\$ 51,405.00

Increase Not to Exceed *

\$ 2,701.25

Revised Total Not to Exceed (NTE) *

\$ 54,106.25

Fiscal Year* (?)

2026

Amount* (?)

\$ 54,106.25

Funding Source *

Private Pay Source

Contract Description / Type* (?)

- ☒ Personal/Professional Services
- ☐ Consumer Driven Contract
- ☐ Memorandum of Understanding
- ☐ Affiliation or Preceptor
- ☐ BAA/DUA
- ☐ Pooled Contract
- ☐ Renewal of Existing Contract

- ☐ Consultant
- ☐ New Contract/Agreement
- ☐ Amendment to Existing Contract
- ☐ Service/Maintenance
- ☐ IT/Software License Agreement
- ☐ Lease
- ☐ Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

This is the venue for our Employee Wellness Picnic

Contract Owner*

Ninfa Escobar

Previous History of Contracting with Vendor/Contractor*☐ Yes ☐ No ☒ Unknown**Vendor/Contractor a Historically Underutilized Business (HUB)* (?)**☐ Yes ☐ No ☒ Unknown**Community Partnership* (?)**☐ Yes ☐ No ☒ Unknown**Supporting Documentation Upload (?)****Vendor/Contractor Contact Person****Name ***

Brandon McArthur

Address *

Street Address

1 Stadium Drive

Address Line 2

City

Sugar Land

Postal / Zip Code

77498-1852

State / Province / Region

TX

Country

US

Phone Number*

281-207-9124

Email*

wmcarthur@astros.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1111	\$ 54,106.25	549009
Budget Manager		Secondary Budget Manager
Moynihan, Kelly		Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

NA

Project WBS (Work Breakdown Structure)* (?)

NA

Requester Name

Escobar, Ninfa

Submission Date

10/7/2025

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Approval Date

10/7/2025

Contract Owner Approval

Approved by

Ninfa Escobar

Approval Date

10/7/2025

Contracts Approval

Approve*

- ☒ Yes
- ☐ No, reject entire submission
- ☐ Return for correction

Approved by*

Belinda Stude

Approval Date*

10/8/2025

EXHIBIT R-8

NOVEMBER 2025 RENEWALS UNDER 100k

NOVEMBER 2025
FISCAL YEAR 2026[illegible]



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2026

Contract ID# *

7012

Contractor Name *

Centre Technologies, Inc.

Service Provided* (?)

VMware Software Subscription Maintenance & Support Services

Renewal Term Start Date *

11/1/2025

Renewal Term End Date *

10/31/2026

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ Grant Proposal
- ☐ Revenue
- ☐ SOW-Change Order-Amendment#
- ☐ Other

Procurement Method(s) *

Check all that Apply

- | | |
|--|--|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☒ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☐ Not Applicable (If there are no funds required) | ☒ Other DIR-TSO-4288 |

Contract Description / Type

- | | |
|--|---|
| ☐ Personal/Professional Services | ☐ Consultant |
| ☐ Consumer Driven Contract | ☐ New Contract/Agreement |
| ☐ Memorandum of Understanding | ☐ Amendment to Existing Contract |
| ☐ Affiliation or Preceptor | ☐ Service/Maintenance |
| ☐ BAA/DUA | ☐ IT/Software License Agreement |
| ☐ Pooled Contract | ☐ Lease |
| ☒ Renewal of Existing Contract | ☐ Other |

Vendor/Contractor a Historically Underutilized Business (HUB) (?)

- ☐ Yes
- ☒ No
- ☐ Unknown

Contract NTE* (?)

\$ 48,464.16

Rate(s)/Rate(s) Description

Annual 3rd year Fee \$48,464.16 due 11/1/2026

Unit(s) Served*

1130

G/L Code(s)*

553002

Current Fiscal Year Purchase Order Number*

CT144372

Contract Requestor*

Rick Hurst

Contract Owner*

Mustafa Cochinwala

File Upload (?)**Evaluation of Current Fiscal Year Performance****Have there been any significant performance deficiencies within the current fiscal year? ***☐ Yes ☒ No**Were Services delivered as specified in the contract? ***☒ Yes ☐ No**Did Contractor perform duties in a manner consistent with standards of the profession? ***☒ Yes ☐ No**Did Contractor adhere to the contracted schedule? * (?)**☒ Yes ☐ No**Were reports, billing and/or invoices submitted in a timely manner? * (?)**☒ Yes ☐ No**Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? * (?)**☒ Yes ☐ No**Did Contractor render services consistent with Agency policy and procedures? * (?)**☒ Yes ☐ No**Maintained legally required standards for certification, licensure, and/or training? * (?)**☒ Yes ☐ No**Renewal Determination****Is the contract being renewed for next fiscal year with this Contractor? * (?)**☒ Yes ☐ No**How does this contract support Agency/Unit Strategic priorities? ***

Provides software/support that maintains systems and data for The Harris Center

Renewal Information for Next Fiscal Year



Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1130	\$ 50,000.00	553002

Budget Manager*	Secondary Budget Manager*
Campbell, Ricardo	Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

\$50,000 annually

Project WBS (Work Breakdown Structure)* (?)

N/A

Fiscal Year* (?)

2026

Amount* (?)

\$ 50,000.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

General Revenue (GR)

Contract Content Changes



Are there any required changes to the contract language?* (?)

☐ Yes ☒ No

Will the scope of the Services change?*

☐ Yes ☒ No

Is the payment deadline different than net (45)?*

☐ Yes ☒ No

Are there any changes in the Performance Targets?*

☐ Yes ☒ No

Are there any changes to the Submission deadlines for notes or supporting documentation?*

☐ Yes ☒ No

File Upload (?)

THC - Centre VMware Renewal Year 2.pdf

79.85KB

Contract Owner



Contract Owner* (?)

Please Select Contract Owner

Mustafa Cochinwala

Budget Manager Approval(s)



Approved by

Ricardo Campbell

Contract Owner Approval



Approved by

Mustafa Cochinwala

Contracts Approval

Approve *

- ☒ Yes
- ☐ No, reject entire submission
- ☐ Return for correction

Approved by *

Belinda Stude

Approval Date *

10/23/2025



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2026

Contract ID# *

2021-0240

Contractor Name *

Escape Velocity Holdings, Inc. d/b/a Trace3, LLC

Service Provided* (?)

CyberArk Privileged Access Management (PAM) - Tag On through Choice Partners
Cooperative Contract #21/031KN-55.

Renewal Term Start Date *

11/30/2025

Renewal Term End Date *

10/31/2026

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ Grant Proposal
- ☐ Revenue
- ☐ SOW-Change Order-Amendment#
- ☐ Other

Procurement Method(s) *

Check all that Apply

- | | |
|--|---|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☒ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☐ Not Applicable (If there are no funds required) | ☒ Other Choice Partners 21/031KN-55 |

Contract Description / Type

- | | |
|--|---|
| ☐ Personal/Professional Services | ☐ Consultant |
| ☐ Consumer Driven Contract | ☐ New Contract/Agreement |
| ☐ Memorandum of Understanding | ☐ Amendment to Existing Contract |
| ☐ Affiliation or Preceptor | ☐ Service/Maintenance |
| ☐ BAA/DUA | ☐ IT/Software License Agreement |
| ☐ Pooled Contract | ☐ Lease |
| ☒ Renewal of Existing Contract | ☐ Other |

Vendor/Contractor a Historically Underutilized Business (HUB) (?)

- ☐ Yes
- ☒ No
- ☐ Unknown

Contract NTE* (?)

\$ 42,802.50

Rate(s)/Rate(s) Description

Rate: \$42,802.50 annually

Unit(s) Served*

1130

G/L Code(s)*

574000

Current Fiscal Year Purchase Order Number*

CT144067

Contract Requestor*

Rick Hurst

Contract Owner*

Mustafa Cochinwala

File Upload (?)

Evaluation of Current Fiscal Year Performance

Have there been any significant performance deficiencies within the current fiscal year?*

☐ Yes ☒ No

Were Services delivered as specified in the contract?*

☒ Yes ☐ No

Did Contractor perform duties in a manner consistent with standards of the profession?*

☒ Yes ☐ No

Did Contractor adhere to the contracted schedule?* (?)

☒ Yes ☐ No

Were reports, billing and/or invoices submitted in a timely manner?* (?)

☒ Yes ☐ No

Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency?* (?)

☒ Yes ☐ No

Did Contractor render services consistent with Agency policy and procedures?* (?)

☒ Yes ☐ No

Maintained legally required standards for certification, licensure, and/or training?* (?)

☒ Yes ☐ No

Renewal Determination

Is the contract being renewed for next fiscal year with this Contractor?* (?)

☒ Yes ☐ No

How does this contract support Agency/Unit Strategic priorities?*

Protects Harris Center computer assets

Renewal Information for Next Fiscal Year



Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1130	\$ 46,225.25	574000

Budget Manager*

Campbell, Ricardo

Secondary Budget Manager*

Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

See Attached

Project WBS (Work Breakdown Structure)* (?)

N/A

Fiscal Year* (?)

2026

Amount* (?)

\$ 46,225.25

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

General Revenue (GR)

Contract Content Changes



Are there any required changes to the contract language?* (?)

☐ Yes ☒ No

Will the scope of the Services change? *

☐ Yes ☒ No

Is the payment deadline different than net (45)? *

☐ Yes ☒ No

Are there any changes in the Performance Targets? *

☐ Yes ☒ No

Are there any changes to the Submission deadlines for notes or supporting documentation? *

☐ Yes ☒ No

File Upload (?)

FY2026 Trace3 - CyberArk Renewal.pdf

227.04KB

Contract Owner



Contract Owner* (?)

Please Select Contract Owner

Mustafa Cochinwala

Budget Manager Approval(s)



Approved by

Ricardo Campbell

Contract Owner Approval



Approved by

Mustafa Cechinnala

Contracts Approval

Approve *

- ☒ Yes
- ☐ No, reject entire submission
- ☐ Return for correction

Approved by *

Belinda Stude

Approval Date *

10/15/2025



Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2026

Contract ID#*

2022-0663

Contractor Name*

Rainbow Health LLC

Service Provided* (?)

Set up, Implementation, and Sustaining of Website for MCOT Rapid Response's Web Portal and Mobile Applications

Renewal Term Start Date*

9/1/2025

Renewal Term End Date*

8/31/2026

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ Grant Proposal
- ☐ Revenue
- ☐ SOW-Change Order-Amendment#
- ☐ Other

Procurement Method(s)*

Check all that Apply

- | | |
|--|--|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☐ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☐ Not Applicable (If there are no funds required) | ☒ Other Informal Request for Quote |

Contract Description / Type

- | | |
|--|---|
| ☐ Personal/Professional Services | ☐ Consultant |
| ☐ Consumer Driven Contract | ☐ New Contract/Agreement |
| ☐ Memorandum of Understanding | ☐ Amendment to Existing Contract |
| ☐ Affiliation or Preceptor | ☐ Service/Maintenance |
| ☐ BAA/DUA | ☐ IT/Software License Agreement |
| ☐ Pooled Contract | ☐ Lease |
| ☒ Renewal of Existing Contract | ☐ Other |

Vendor/Contractor a Historically Underutilized Business (HUB) (?)

- ☐ Yes
- ☐ No
- ☒ Unknown

Contract NTE* (?)

\$ 94,500.00

Rate(s)/Rate(s) Description

Unit(s) Served*

9248

G/L Code(s)*

553002

Current Fiscal Year Purchase Order Number*

CT144280

Contract Requestor*

Rick Hurst

Contract Owner*

Mustafa Cochinwala

File Upload (?)

Evaluation of Current Fiscal Year Performance

Have there been any significant performance deficiencies within the current fiscal year? *

☐ Yes ☒ No

Were Services delivered as specified in the contract? *

☒ Yes ☐ No

Did Contractor perform duties in a manner consistent with standards of the profession? *

☒ Yes ☐ No

Did Contractor adhere to the contracted schedule? * (?)

☒ Yes ☐ No

Were reports, billing and/or invoices submitted in a timely manner? * (?)

☒ Yes ☐ No

Did Contractor provide adequate or proper supporting documentation of time spent rendering services for the Agency? * (?)

☒ Yes ☐ No

Did Contractor render services consistent with Agency policy and procedures? * (?)

☒ Yes ☐ No

Maintained legally required standards for certification, licensure, and/or training? * (?)

☒ Yes ☐ No

Renewal Determination

Is the contract being renewed for next fiscal year with this Contractor? * (?)

☒ Yes ☐ No

How does this contract support Agency/Unit Strategic priorities? *

Rapid Response Software for CCD and MCOT

Renewal Information for Next Fiscal Year

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
1130	\$ 65,000.00	553002

Budget Manager*	Secondary Budget Manager*
Campbell, Ricardo	Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

See Attached

Project WBS (Work Breakdown Structure)* (?)

N/A

Fiscal Year* (?)	Amount* (?)
2026	\$ 65,000.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source*

General Revenue (GR)

Contract Content Changes

Are there any required changes to the contract language?* (?)

☐ Yes ☒ No

Will the scope of the Services change?*

☐ Yes ☒ No

Is the payment deadline different than net (45)?*

☐ Yes ☒ No

Are there any changes in the Performance Targets?*

☐ Yes ☒ No

Are there any changes to the Submission deadlines for notes or supporting documentation?*

☐ Yes ☒ No

File Upload (?)

FY2026 Rainbow Health - RR MCOT Harris Center Budget_Oct 2025.xlsx

230.87KB

Contract Owner

Contract Owner* (?)

Please Select Contract Owner

Mustafa Cochinwala

Budget Manager Approval(s)

Approved by

Ricardo Campbell

Contract Owner Approval



Approved by

Mustafa Cochinwala

Contracts Approval

Approve *

- ☒ Yes
- ☐ No, reject entire submission
- ☐ Return for correction

Approved by *

Belinda Stude

Approval Date *

10/23/2025

EXHIBIT R-9

**NOVEMBER 2025
AFFILIATION AGREEMENTS,
GRANTS, MOU'S AND
REVENUES
INFORMATION ONLY**

[illegible]



Executive Contract Summary

Contract Section

Contractor*

The Association for the Advancement of Mexican Americans

Contract ID #*

NA

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

11/11/2025

Parties* (?)

The Association for the Advancement of Mexican Americans
The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- ☐ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ Grant Proposal
☐ Revenue
☐ SOW-Change Order-Amendment#
☒ Other Memorandum of Understanding

Procurement Method(s)*

Check all that Apply

- | | |
|---|--|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☐ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☒ Not Applicable (If there are no funds required) | ☐ Other |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

- ☐ Yes ☒ No

Funding Information*

- ☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

10/2/2025

Contract Term End Date* (?)

10/2/2026

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2026

Amount* (?)

\$ 0.00

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- ☐ Personal/Professional Services
☐ Consumer Driven Contract
☒ Memorandum of Understanding
☐ Affiliation or Preceptor
☐ BAA/DUA
☐ Pooled Contract
☐ Renewal of Existing Contract

- ☐ Consultant
☐ New Contract/Agreement
☐ Amendment to Existing Contract
☐ Service/Maintenance
☐ IT/Software License Agreement
☐ Lease
☐ Other

Justification/Purpose of Contract/Description of Services Being Provided* (?)

MOU for substance use referral source to increase access to services

Contract Owner*

Lance Britt

Previous History of Contracting with Vendor/Contractor*

☐ Yes ☒ No ☐ Unknown

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

☐ Yes ☐ No ☒ Unknown

Community Partnership* (?)

☐ Yes ☐ No ☒ Unknown

Supporting Documentation Upload (?)

The Harris Center MOU updated_DRAFT FROM AAMA.docx

74.79KB

Vendor/Contractor Contact Person

Name*

Adolfo Melara, PhD., CEO, President and Superintendent

Address*

Street Address

204 Clifton Street

Address Line 2

City

Houston

Postal / Zip Code

77011-3314

State / Province / Region

TX

Country

US

Phone Number*

713-926-9491

Email*

tmartinez@aama.org

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
2802	\$ 0.00	na

Budget Manager

Smith, Janai

Secondary Budget Manager

Shelby, Debbie

Provide Rate and Rate Descriptions if applicable* (?)

NA

Project WBS (Work Breakdown Structure)* (?)

NA

Requester Name

Boswell, Jennifer

Submission Date

10/2/2025

Budget Manager Approval(s)

Approved by

Debbie Chambers & Shelby

Approval Date

10/7/2025

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Lance Britt

Approval Date

10/8/2025

Contracts Approval

Approve*

- ☒ Yes
- ☐ No, reject entire submission
- ☐ Return for correction

Approved by*

Belinda Stude

Approval Date*

10/10/2025



Executive Contract Summary

Contract Section

Contractor*

TLC Health & Wellness

Contract ID #*

NA

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

11/18/2025

Parties* (?)

TLC Health & Wellness and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ Grant Proposal
☐ Revenue
☐ SOW-Change Order-Amendment#
☐ Other

Procurement Method(s)*

Check all that Apply

- | | |
|---|--|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☐ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☒ Not Applicable (If there are no funds required) | ☐ Other |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)? *

☐ Yes ☒ No

Funding Information*

☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

12/1/2025

Contract Term End Date* (?)

8/31/2027

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2026

Amount* (?)

\$ 0.00

Funding Source*

Private Pay Source

Contract Description / Type* (?)

- | | |
|---|--|
| ☐ Personal/Professional Services | ☐ Consultant |
| ☐ Consumer Driven Contract | ☒ New Contract/Agreement |
| ☒ Memorandum of Understanding | ☐ Amendment to Existing Contract |
| ☐ Affiliation or Preceptor | ☐ Service/Maintenance |
| ☐ BAA/DUA | ☐ IT/Software License Agreement |
| ☐ Pooled Contract | ☐ Lease |
| ☐ Renewal of Existing Contract | ☐ Other <input type="text"/> |

Justification/Purpose of Contract/Description of Services Being Provided* (?)

TLC provides referrals for individuals who enter all three of their housing programs as well as their Community Entry System Assessment Services Grant for Youth and Young Adults program to The Harris Center's Behavioral Health Response Team. We would like an information sharing agreement / MOU that will allow us the ability to better coordinate care and services for mutual consumers.

Contract Owner*

Kim Kornmayer

Previous History of Contracting with Vendor/Contractor*☐ Yes ☒ No ☐ Unknown**Vendor/Contractor a Historically Underutilized Business (HUB)* (?)**☐ Yes ☐ No ☒ Unknown**Community Partnership* (?)**☐ Yes ☐ No ☒ Unknown**Supporting Documentation Upload (?)****Vendor/Contractor Contact Person****Name***

Shun Johnson

Address*

Street Address

2626 S Loop W

Address Line 2

City

Houston

Postal / Zip Code

77054-2654

State / Province / Region

TX

Country

US

Phone Number*

713-703-8244

Email*

sjohnson@tlchealthandwellness.org

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9245	\$ 0.00	0

Budget Manager

Ramirez, Priscilla

Secondary Budget Manager

Oshman, Jodel

Provide Rate and Rate Descriptions if applicable* (?)

NA

Project WBS (Work Breakdown Structure)* (?)

NA

Requester Name

Honsinger, Amber

Submission Date

10/22/2025

Budget Manager Approval(s)

Approved by

Priscilla M. Ramirez

Approval Date

10/22/2025

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Kim Kornmayer

Approval Date

10/22/2025

Contracts Approval

Approve*

- ☒ Yes
☐ No, reject entire submission
☐ Return for correction

Approved by*

Belinda Stude

Approval Date*

10/23/2025



Executive Contract Summary

Contract Section


Contractor*

UNITED HEALTHCARE SERVICES, INC.

Contract ID #*

NA

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

10/21/2025

Parties* (?)

UNITED HEALTHCARE SERVICES, INC. and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ Grant Proposal
☐ Revenue
☐ SOW-Change Order-Amendment#
☐ Other

Procurement Method(s)*

Check all that Apply

- | | |
|---|--|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☐ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☒ Not Applicable (If there are no funds required) | ☐ Other |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)?
 *

☐ Yes ☒ No

Funding Information*

☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

9/1/2025

Contract Term End Date* (?)

8/31/2026

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2026

Amount* (?)

\$ 0.00

Funding Source*

Federal

Contract Description / Type* (?)

- | | |
|---|---|
| ☐ Personal/Professional Services | ☐ Consultant |
| ☐ Consumer Driven Contract | ☐ New Contract/Agreement |
| ☒ Memorandum of Understanding | ☐ Amendment to Existing Contract |
| ☐ Affiliation or Preceptor | ☐ Service/Maintenance |
| ☐ BAA/DUA | ☐ IT/Software License Agreement |
| ☐ Pooled Contract | ☐ Lease |
| ☐ Renewal of Existing Contract | ☐ Other |

Justification/Purpose of Contract/Description of Services Being Provided* (?)

To coordinate on CFC assessments, reassessments, service planning, and service authorization for members. United and LIDDA agree that no compensation will be owed to either party for the services described in MOU.

See attached supporting documentation for detailed description.

Contract Owner*

Dr. Evanthe Collins

Previous History of Contracting with Vendor/Contractor*

☐ Yes ☐ No ☒ Unknown

Vendor/Contractor a Historically Underutilized Business (HUB)* (?)

☐ Yes ☒ No ☐ Unknown

Please provide an explanation*

They do not meet the criteria

Community Partnership* (?)

☒ Yes ☐ No ☐ Unknown

Specify Name*

UNITED HEALTHCARE SERVICES, INC.

Supporting Documentation Upload (?)

STAR+PLUS - LIDDA - MOU The Harris Center for Mental Health and IDD
09082025.pdf

156.9KB

Vendor/Contractor Contact Person**Name***

Maria Moreland

Address*

Street Address

2950 North Loop West, Suite 200

Address Line 2

City

HOUSTON

Postal / Zip Code

77092-8843

State / Province / Region

Texas

Country

United States

Phone Number*

832-550-6504

Email*

maria_d_moreland@uhc.com

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
3418	\$ 0.00	0
Budget Manager		Secondary Budget Manager
Degracia, Ericka		Collins, Evanthe

Provide Rate and Rate Descriptions if applicable* (?)

No compensation will be owed to either party for the services described in MOU.

Project WBS (Work Breakdown Structure)* (?)

N/A

Requester Name

Degracia, Ericka

Submission Date

10/1/2025

Budget Manager Approval(s)

Approved by

Ericka Degracia

Approval Date

10/1/2025

Procurement Approval

File Upload (?)

Approved by

Sign

Approval Date

Contract Owner Approval

Approved by

Evanthe Collins

Approval Date

10/3/2025

Contracts Approval

Approve*

- ☒ Yes
☐ No, reject entire submission
☐ Return for correction

Approved by*

Belinda Stude

Approval Date*

10/6/2025



Executive Contract Summary

Contract Section


Contractor*

Vaughn Gage Center

Contract ID #*

na

Presented To*

- ☒ Resource Committee
☐ Full Board

Date Presented*

11/11/2025

Parties* (?)

Vaughn Gage Center and The Harris Center for Mental Health and IDD

Agenda Item Submitted For: * (?)

- ☒ Information Only (Total NTE Amount is Less than \$250,000.00)
☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
☐ Grant Proposal
☐ Revenue
☐ SOW-Change Order-Amendment#
☐ Other

Procurement Method(s)*

Check all that Apply

- | | |
|---|--|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☐ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☒ Not Applicable (If there are no funds required) | ☐ Other |

Does this contract contain an element of Information Technology (Hardware, Software, or Professional Services)?

*

- ☐ Yes ☒ No

Funding Information*

- ☒ New Contract ☐ Amendment

Contract Term Start Date* (?)

10/1/2025

Contract Term End Date* (?)

8/31/2026

If contract is off-cycle, specify the contract term (?)

Fiscal Year* (?)

2026

Amount* (?)

\$ 0.00

Funding Source*

General Revenue (GR)

Contract Description / Type* (?)

- | | |
|---|---|
| ☐ Personal/Professional Services | ☐ Consultant |
| ☐ Consumer Driven Contract | ☐ New Contract/Agreement |
| ☒ Memorandum of Understanding | ☐ Amendment to Existing Contract |
| ☐ Affiliation or Preceptor | ☐ Service/Maintenance |
| ☐ BAA/DUA | ☐ IT/Software License Agreement |
| ☐ Pooled Contract | ☐ Lease |
| ☐ Renewal of Existing Contract | ☐ Other <input type="text"/> |

Justification/Purpose of Contract/Description of Services Being Provided* (?)

The MOU serves to confirm a mutual understanding of The Harris Center and Vaughn Gage Center as a referral partner. This MOU will assist both parties in being able to share needed referral and disposition information for individuals needing help with their mental health needs.

Program Director: Sarah Strang

Contract Owner*

Kim Kornmayer

Previous History of Contracting with Vendor/Contractor*☐ Yes ☐ No ☒ Unknown**Vendor/Contractor a Historically Underutilized Business (HUB)* (?)**☐ Yes ☐ No ☒ Unknown**Community Partnership* (?)**☐ Yes ☐ No ☒ Unknown**Supporting Documentation Upload (?)****Vendor/Contractor Contact Person****Name***

Asheva Phillips

Address*

Street Address

12903 Jones Rd.

Address Line 2

City

Houston

Postal / Zip Code

77070

State / Province / Region

TX

Country

US

Phone Number*

713-922-2822

Email*

asheva@vaughngage.org

Budget Section

Budget Units and Amounts Charged to each Budget Unit

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No.*
9208	\$ 0.00	0

Budget Manager

Oshman, Jodel

Secondary Budget Manager

Ramirez, Priscilla

Provide Rate and Rate Descriptions if applicable* (?)

na

Project WBS (Work Breakdown Structure)* (?)

na

Requester Name

Singh, Patricia

Submission Date

10/2/2025

Budget Manager Approval(s)

Approved by



Approval Date

10/2/2025

Procurement Approval

File Upload (?)

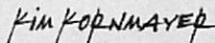
Approved by

Sign

Approval Date

Contract Owner Approval

Approved by



Approval Date

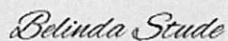
10/3/2025

Contracts Approval

Approve*

- ☒ Yes
- ☐ No, reject entire submission
- ☐ Return for correction

Approved by*



Approval Date*

10/8/2025

Annual Renewal Evaluation

Current Fiscal Year Contract Information

Current Fiscal Year

2026

Contract ID# *

2022-0583

Contractor Name *

Communities In Schools of Houston, Inc.

Service Provided* (?)

Crisis Line Services

Renewal Term Start Date *

9/1/2025

Renewal Term End Date *

8/31/2026

Term for Off-Cycle Only (For Reference Only)
Agenda Item Submitted For: (?)

- ☐ Information Only (Total NTE Amount is Less than \$250,000.00)
- ☐ Board Approval (Total NTE Amount is \$250,000.00 or more)
- ☐ Grant Proposal
- ☒ Revenue
- ☐ SOW-Change Order-Amendment#
- ☐ Other

Procurement Method(s) *

Check all that Apply

- | | |
|---|--|
| ☐ Competitive Bid | ☐ Competitive Proposal |
| ☐ Request for Proposal | ☐ Sole Source |
| ☐ Request for Application | ☐ Request for Qualification |
| ☐ Request for Quote | ☐ Tag-On |
| ☐ Interlocal | ☐ Consumer Driven |
| ☒ Not Applicable (If there are no funds required) | ☐ Other |

Contract Description / Type

- | | |
|--|---|
| ☐ Personal/Professional Services | ☐ Consultant |
| ☐ Consumer Driven Contract | ☐ New Contract/Agreement |
| ☐ Memorandum of Understanding | ☐ Amendment to Existing Contract |
| ☐ Affiliation or Preceptor | ☐ Service/Maintenance |
| ☐ BAA/DUA | ☐ IT/Software License Agreement |
| ☐ Pooled Contract | ☐ Lease |
| ☒ Renewal of Existing Contract | ☐ Other |

Vendor/Contractor a Historically Underutilized Business (HUB) (?)

- ☐ Yes
- ☐ No
- ☒ Unknown

Contract NTE* (?)

\$ 39,700.00

Rate(s)/Rate(s) Description**Unit(s) Served***

7001

G/L Code(s)*

420015

Current Fiscal Year Purchase Order Number*

NA

Contract Requestor*

Janice Cote

Contract Owner*

Jennifer Battle

File Upload (?)**Renewal Determination****Is the contract being renewed for next fiscal year with this Contractor? * (?)**☒ Yes ☐ No**How does this contract support Agency/Unit Strategic priorities? ***

Helps persons in Harris County get connected with MH services.

Renewal Information for Next Fiscal Year**Budget Units and Amounts Charged to each Budget Unit**

Budget Unit Number*	Amount Charged to Unit*	Expense/GL Code No. *
7001	\$ 39,700.00	420015

Budget Manager*

Ilejay, Kevin

Secondary Budget Manager*

Campbell, Ricardo

Provide Rate and Rate Descriptions if applicable* (?)

n/a

Project WBS (Work Breakdown Structure)* (?)

n/a

Fiscal Year* (?)

2026

Amount* (?)

\$ 0.00

Next Fiscal Year Not to Exceed Amount for Master Pooled Contracts

Contract Funding Source *

Private Pay Source

Contract Content Changes

Are there any required changes to the contract language? * (?)

☐ Yes ☒ No

Will the scope of the Services change? *

☐ Yes ☒ No

Is the payment deadline different than net (45)? *

☐ Yes ☒ No

Are there any changes in the Performance Targets? *

☐ Yes ☒ No

Are there any changes to the Submission deadlines for notes or supporting documentation? *

☐ Yes ☒ No

File Upload (?)

Contract Owner**Contract Owner** * (?)

Please Select Contract Owner

Jennifer Battle

Budget Manager Approval(s)

Approved by

*Kevin Ileyay***Contract Owner Approval**

Approved by

*Jennifer Battle***Contracts Approval****Approve** *

- ☒ Yes
- ☐ No, reject entire submission
- ☐ Return for correction

Approved by *

Belinda Stude

Approval Date *

10/24/2025

