



Texas Department of Public Safety Purchase Order

Purchase Order Number

405-16-P006334

SHOW THIS NUMBER ON ALL
PACKAGES, INVOICES AND
SHIPPING DOCUMENTS.

**V
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Vendor Number: 00028160
DERRELYNN PERRYMAN

4104 SHANNON DR
FORT WORTH, TX 76116-8042

**S
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Texas Department of Public Safety
Psychological Services - MSC 0258
PO Box 4087
Austin, TX 78773-0258
US
Email: eprocurementshipping@dps.texas.gov
Phone: (512) 424-2000

State Sales Tax Exemption Certificate: The undersigned claims an exemption from taxes under Chapter 20, Title 122A, Revised Civil Statutes of Texas, for purchase of tangible personal property described in this numbered order, purchased from contractor and/or shipper listed above, as this property is being secured for the exclusive use of the State of Texas.

**B
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Texas Department of Public Safety
Finance - Accounts Payable - MSC 0130
PO Box 4087
Austin, TX 78773-0130
US
Email: apinvoices@dps.texas.gov
Phone: (512) 424-2060

Solicitation (Bid) No.:

Payment Terms: State of Texas Prompt Pay
Shipping Terms: F.O.B., Destination
Delivery Calendar Day(s) A.R.O.: 0

Item # 1
 Class-Item 924-40

Memorandum of Understanding (MOU) executed 1/21/2016

The provisions of this MOU apply to reimbursement of travel expenses related to Derrellynn Perryman, MSSW, LCSW provision of training at the request of the DPS. The scope of this MOU is for Derrellynn Perryman, MSSW, LCSW to provide training to DPS VESS personnel, peer team members and volunteer chaplains. The sole compensation for Derrellynn Perryman, MSSW, LCSW services under this MOU or otherwise due under this MOU is the reimbursement of Derrellynn Perryman, MSSW, LCSW travel expenses. No other amounts will be paid for any purpose.

Period Covered: 01/21/2016 to 8/31/2016.

Quantity	Unit Price	UOM	Discount %	Total Discount Amt.	Tax Rate	Tax Amount	Freight	Total Cost
1.00	\$ 693.00	JOB	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 693.00

<u>LN/FY/Account Code</u> 1/16/16-23021-6213-1001- - -1300- - -	<u>Dollar Amount</u> \$ 693.00
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S H I P T O	Texas Department of Public Safety Administration Division 5805 North Lamar Blvd Austin, TX 78752-4431 US Email: eprocurementsshipping@dps.texas.gov Phone: (512) 424-2000
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Item # 2

Change Orders

Change orders will be allowed only if unforeseen conditions arise such as, but not limited to, increasing or decreasing quantities or if the department needs dictate changes. All changes shall be in the scope of original work. No verbal change orders will be permitted. All change orders must be in writing with a Purchase Order Change Notice (POCN) issued by Procurement & Contract Services.

U.S. Department of Homeland Security E-Verify System

By entering into this Contract, the Contractor certifies and ensures that it utilizes and will continue to utilize, for the term of this Contract, the U.S. Department of Homeland Security E-Verify system to determine the eligibility of

1. All persons employed to perform duties within Texas, during the term of the Contract; and
 2. All persons, including subcontractors, assigned by the Contractor to perform work pursuant to the Contract, within the United States of America.
- The Contractor shall provide, upon request of TXDPS an electronic or hardcopy screenshot of the confirmation or tentative non-confirmation screen containing the E-Verify case verification number for attachment to the Form I-9 for the three most recent hires that match the criteria above, by the Contractor, and Contractor subcontractors, as proof that this provision is being followed.

If this certification is falsely made, the Contract may be immediately terminated, at the discretion of the state and at no fault to the state, with no prior notification. The Contractor shall also be responsible for the costs of any re-solicitation that the state must undertake to replace the terminated Contract.

Notice Under Government Code 2261.252

Pursuant to Government Code 2261.252 the Department may not enter into a contract for the purchase of goods or services with a private vendor if members of the Public Safety Commission or certain positions within the agency including the Executive Director, the General Counsel or the Procurement Director or their covered family members have a financial interest in the vendor. Any contract found to violate Government Code 2261.252 is void.

Notice Under Government Code 2252.908

Pursuant to Government Code 2252.908 the Department may not enter into certain contracts with a business entity unless the business entity submits a disclosure of interested parties to the Department at the time the business entity submits the signed contract to the Department. The Texas Ethics Commission has adopted rules and procedures under these provisions:

https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm

Any contract found to violate Government Code 2252.908 is void.

Item # 3

Contact Information:

Vendor Contact:

Derrelynn Perryman, MSSW, LCSW 682-552-4799
derrelynn@att.net

TXDPS Contact:

Laura Ryland 512-424-7973
laura.ryland@dps.texas.gov

Procurement Contact:

Cathy Richter 512-424-5579
cathrin.richter@dps.texas.gov

TAX:	\$ 0.00
FREIGHT:	\$ 0.00
TOTAL:	\$ 693.00

APPROVED

By: Cathy Richter, CTPM

Phone#: (512) 424-5579

BUYER

Memorandum of Understanding
Between
Texas Department of Public Safety
Victim & Employee Support Services and
Derrelenn Perryman, MSSW, LCSW

This Memorandum of Understanding (MOU) is a Reimbursement Agreement entered into this 21th day of January, 2016, and becomes effective the date of final signature, by and between the Texas Department of Public Safety (DPS) Victim & Employee Support Services (VESS), and Derrelenn Perryman (Provider).

I. PURPOSE

To delineate travel expense reimbursement procedures for Provider under the authority of the DPS VESS.

II. SCOPE

The provisions of this MOU apply to reimbursement of travel expenses related to Provider's provision of training at the request of the DPS. The scope of this MOU is for Provider to provide training to DPS VESS personnel, peer team members and volunteer chaplains.

The sole compensation for the Provider's services under this MOU or otherwise due under this MOU is the reimbursement of Provider's travel expenses. No other amounts will be paid for any purpose.

III. PERIOD OF PERFORMANCE

This MOU commences on the date of the last signature and continues for a period of three (3) years, unless terminated earlier in accordance with section VIIB.

IV. DEFINITIONS

- A. Training: The International Critical Incident Stress Foundation (ICISF)-Group Crisis Intervention course.
- B. Provider: Provider who is a licensed mental health provider and is a certified instructor for the ICISF Group Crisis Intervention course.
- C. Team members: VESS behavioral health professionals, DPS employees trained to provide peer support as a collateral duty and DPS-VESS volunteer chaplains.

D. State: For the purpose of this MOU, the State of Texas through the DPS-VESS.

V. PROGRAM DETAILS

The DPS-VESS is responsible for providing peer support and behavioral health services to DPS employees and their family members following critical incidents. Services are provided by a DPS team composed of behavioral health professionals, peers and chaplains. The ICISF-Group Crisis Intervention course is required training for all team members.

A. The State:

1. Identifies team members who need the required training.
2. Provides a training location and the audio-visual equipment.
3. Purchases the required training manuals and certificates directly from the International Critical Incident Stress Foundation.
4. Registers the training with the ICISF per the course requirement.
5. Oversees class registration and creates the student roster.
6. Provides the Provider with a copy of DPS travel rules and policy.

B. The Provider:

1. Provides the training to DPS VESS team members on mutually agreed upon dates and location. Provider may decline to provide the training.
2. Maintains all knowledge, skills, and certification as required by the International Critical Incident Stress Foundation for instructors.
3. Submits required documents to the International Critical Incident Stress Foundation following the provision of the training.
4. Maintains and provides proof of professional licensure.

VI. ADMINISTRATIVE AND FINANCIAL MANAGEMENT

A. Reimbursement of Provider:

1. The DPS will reimburse the Provider for reasonable (as determined by the DPS) travel expenses associated with the Provider's travel for providing the training to DPS-VESS team members. All travel reimbursements will be in accordance with DPS policy and the State of Texas Travel Allowance Guide, published by the Comptroller of Public Accounts.

<https://fmx.cpa.state.tx.us/fmx/travel/texttravel/index.php>

2. The Provider will submit to the DPS all reimbursement requests within thirty (30) days of the completion of the DPS sponsored training event.

B. Liability

The DPS and the Provider will each be responsible for their own losses arising out of the performance of this MOU.

C. Reimbursement Process

1. All requests for reimbursement will be submitted using the most current DPS Reimbursement Forms.
2. The DPS will process payment to the Provider for all allowable expenses within 30 days of receipt of the properly completed Reimbursement Forms and required supporting documentation or receipts.
3. The Provider will not be reimbursed for costs incurred by activities that are outside the scope of this MOU.
4. The Provider must comply with DPS travel rules as provided by the State.

D. Employment Status

1. At no time will the Provider become an employee of the DPS.
2. The DPS has no obligation to make any payments to or on behalf of the Provider except as expressly stated in this MOU.

VII CONDITIONS, AMENDMENTS, AND TERMINATION

- A. This MOU may be modified or amended only by the written agreement of the parties.

- B. Any party, upon thirty (30) days' written notice, may terminate this MOU.
- C. The State complies with the provisions of the Department of Labor Executive Order 11246 of September 24, 1965, as amended and with the rules, regulations and relevant orders of the Secretary of Labor. To that end, the State will not discriminate against any employee or Provider on the grounds of race, color, religion, sex, or national origin. In addition, the use of state or federal facilities, services, and supplies will be in compliance with regulations prohibiting duplication of benefits and guaranteeing nondiscrimination. Distribution of supplies, processing of applications, provisions of technical assistance, and other relief assistance activities will be accomplished in an equitable and impartial manner, without discrimination on the grounds of race, color, religion, nationality, sex, age, or economic status.

This MOU is governed by the laws of the State of Texas. The Provider will use the process delineated in Texas Government Code, Chapter 2260, to resolve any issues arising under this MOU.

VIII. POINTS OF CONTACT

<p style="text-align: center;"><u>VESS</u></p> <p>Melissa Atwood VESS 5805 N. Lamar Blvd Austin, Texas 78752 Tel#: 512-424-5163 E-mail: melissa.atwood@dps.texas.gov</p>	<p style="text-align: center;"><u>PROVIDER</u></p> <p>Derrelynn Perryman, MSSW, LCSW ICISF Instructor 4104 Shannon Drive Fort Worth, Texas 76116 Tel#: 682-552-4799 Email: derrelynn@att.net</p>
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IX. GENERAL PROVISIONS

- A. This MOU, with the rights and privileges it creates, is assignable only with the written consent of the parties.
- B. Pursuant to Texas Government Code Section 321.013, acceptance of funds under this MOU constitutes acceptance of the authority of the State, the Texas State Auditor's Office, or any successor agency (collectively, "Auditor"), to conduct an audit or investigation in connection with those funds under Texas Government Code Section 2155.326. The Provider will cooperate with the Auditor in the conduct of the audit or investigation, including without limitation, providing all records requested.
- C. Pursuant to Texas Government Code Section 2252.903 any payments owing to the Provider under this MOU may be applied directly toward certain debts or delinquencies

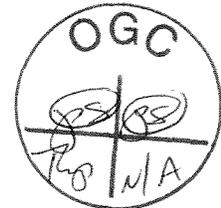
that the Provider owes the State of Texas or any agency of the State of Texas regardless of when they arise, until such debts or delinquencies are paid in full.

The Provider hereby acknowledges that she has read and understands this entire MOU. All oral or written agreements between the parties hereto relating to the subject matter of this MOU that were made prior to the execution of this MOU have been reduced to writing and are contained herein. The Provider agrees to abide by all terms and conditions specified herein and certify that the information provided to DPS VESS is true and correct in all respects to the best of her knowledge and belief.

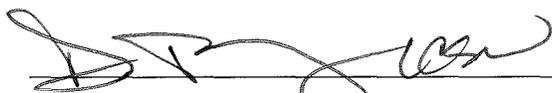
This MOU is entered into by and between the following parties:

DPS:

Signature: 
Name: Robert J. Bodisch, Sr.
Title: Deputy Director Homeland Security and Services
Date: _____



Provider:

Signature: 
Name: Derrelynn Perryman, MSSW, LCSW
Date: 1-21-14