

Wise County, Tx

Group Membership Agreement Extension
Plan Year 10/01 – 09/30

This agreement is by and between CareFlite, a 501(c)3 non-profit Texas Corporation and the County of Wise, Texas is effective on the first day of October, 2016.

Whereas; CareFlite is authorized by the State of Texas to offer Air Ambulance Memberships in Wise County, Texas, and

Whereas; Wise County desires to extend the current contract that provides a CareFlite Air Ambulance Membership for each of its personnel as defined below for the coming year;

Therefore; the parties agree as follows:

Wise County agrees to extend the current contract which expires September 30, 2016. The extension will provide a CareFlite Ambulance Membership for each of its employees and officials at a cost of \$12 per employee or official for the plan year shown above. Wise County agrees to pay the total sum of \$12 times the number of employees and officials on or before October 31, 2016 in order to comply with the State regulations governing membership programs. All other terms and conditions of the original contract between CareFlite and Wise County will remain in effect throughout this extension. As of the date of this extension agreement, Wise County has a total of 4060 personnel to be covered.

This agreement shall automatically renew annually unless either party shall give the other written notice on or before July 31st of each year.

Each membership covers the entire household provided the other family members are listed on the application. If an employee does not fill out an application and turn it in, they are not a member. New applications are not required for renewing personnel who already participate in this program unless there are changes to their household. Medicaid recipients are not permitted to enroll in this program.

By their signature below, the individuals signing represent that they have the authority to enter this agreement and that their respective organizations intend to be bound by the terms herein. A fax copy shall have the same force and effect as an original document.

CAREFLITE

WISE COUNTY, TEXAS

James C. Swartz 09/06/2016
James C. Swartz Date
President & CEO

The Honorable JD Clark 9-12-16
The Honorable JD Clark Date
County Judge

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
 Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

Certificate Number:
 2016-109415

Date Filed:
 09/08/2016

Date Acknowledged:
 9-12-16

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
 CareFlite
 Grand Prairie, TX United States

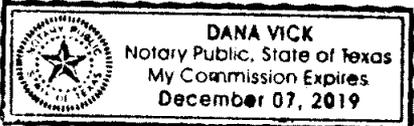
2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
 Wise County

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.
 Membership Program
 Enrollment in CareFlite's Caring Heart Membership Program

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



[Handwritten Signature]
 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Douglas Filbert, this the 8th day of Sept, 2016, to certify which, witness my hand and seal of office.

[Handwritten Signature] Dana Vick *[Handwritten Signature]*
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath