

AGENDA NOTES

Solicitation Name and Number	Sole Source- Annual maintenance of the ProQA® Emergency Fire Dispatch (EFD) and Emergency Medical Dispatch (EMD) Protocols
Procurement Technician	Lola Awonusi
Date Solicitation bid prices expires. (Indicate if vendor has agreed to extend bid date/prices. Include new date.)	N/A
Solicitation Name, Number and Contract Number of expiring/expired contract (If no previous contract, please indicate N/A)	N/A
Contract Number, Contractor Name and Award Amount (Include increases and Total Award Amount)	N/A
Amount Spent on Expiring/Expired Contract (If multiple award, List Amount Spent per Contract and include Total Amount Spent)	N/A
Prime Contractor Information and LSBE – Subcontractor (Prime: Company Name, Owner Name and Title, Number years in business and Number of Years doing business with DeKalb County) (LSBE: LSBE Type (DeKalb or MSA, Participation Percentage, Company Name, Owner Name and Title, Address, Type of Work Provided and Number of years in business)	<p><u>Priority Dispatch, Corp – Prime</u> Jeff Clawson, CEO & Medical Director Years in Business: 41 Years Doing Business with Dekalb: 16</p>
Attachments	Sole Source Form