AGENDA NOTES

Procurement Agent Date Solicitation prices expires. (Indicate if vendor has agreed to extend bid date/prices. Include new date.) Solicitation Name, Number and Contract Number of expiring/expired contract (If no previous contract, please indicate N/A) Contract Number, Contractor Name and Award Amount (Include increases and Total Award Amount) Amount Spent to Date on Expiring/Expired Contract (If multiple award, List Amount Spent per Contract and include Total Amount Spent) 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,		Sole Source - Flock Safety Cameras
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Type of Work Provided and Number of	Type of Work Provided and Number of	
years in business)	years in business)	
Attachment • Change Order Request Form	Attachment	Change Order Request Form