AGENDA NOTES

Solicitation Name and Number Procurement Agent Solicitation Name, Number and Contract Number of expiring/expired contract (If no previous contract, please indicate N/A) Previous Contract Number, Contractor Name and Award Amount (Include increases and Total Award Amount)	Inventory of Capital Assets (Multiyear) RFP No. 18-500489 Jennifer Schofield Inventory of Capital Assets RFP No. 18-500489 CPA No. 1136419 HCA Asset Management LLC \$579,100.00
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)	### Sare States ### Sare State
Attachments	UD Change Order Form