AGENDA NOTES

Solicitation Name and Number	In-Home Services for Seniors (Annual Contract with 4 Options to Renew) ITB No. 19-101126
Procurement Agent	Kyheem Bristol
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)	In-Home Services for Seniors (Annual Contract with 4 Options to Renew) ITB No. 19-101126
Previous Contract Number, Contractor Name and Award Amount (Include increases and Total Award Amount)	N/A.
Previous 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, Number of years in business and Previous Business/Contracts and Amounts in DeKalb County)	Medi CareGivers, Inc. – Prime - LSBE-MSA Jessica Lane, CEO Years in business: 10 Years doing business with DeKalb: 0
Attachments	User Department Request Approved Agenda Item