



*DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE*

**CONTRACT RENEWAL AGREEMENT**

**DEPARTMENT:** \_Juvenile Court

**BID/RFP# NUMBER:** 25RFP1391212A-KM

**BID/RFP# TITLE:** Family Treatment Court Peer Support Specialist

**ORIGINAL APPROVAL DATE:** July 1<sup>st</sup>, 2025

**RENEWAL EFFECTIVE DATES:** July 1<sup>st</sup>, 2026 through June 30<sup>th</sup>, 2027

**RENEWAL OPTION #:** 1 OF 2

**NUMBER OF RENEWAL OPTIONS:** 1

**RENEWAL AMOUNT:** \$10,000.00

**COMPANY'S NAME:** Kelly Cox

**ADDRESS:** 1425 Harbin Road

**CITY:** Atlanta

**STATE:** GA

**ZIP:** 30311

This Renewal Agreement No. [Insert] was approved by the Fulton County Board of Commissioners on **BOC DATE:** \_\_\_\_\_ **BOC NUMBER:** \_\_\_\_\_

**RENEWAL OF CERTIFICATE OF INSURANCE:** The Contractor is required to maintain insurance during the entire term of this Agreement, including contract renewal options. The Contractor must furnish the County a renewal Certificate of Insurance showing the required coverage as specified in the Contract Agreement. A current COI must be provided before the commencement of work on this project. The cancellation of any policy of insurance required by this Agreement shall meet the requirements of notice under the laws of the State of Georgia as presently set forth in the Georgia Code.

**SIGNATURES: SEE NEXT PAGE**

**SIGNATURES:**

Contractor/Vendor agrees to accept the renewal option and abide by the terms and conditions set forth in the contract and specifications as referenced herein:

**FULTON COUNTY, GEORGIA**

**fld\_suppliernameone**

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**Robert L. Pitts, Chairman  
Fulton County Board of Commissioners**

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**[Insert name]  
[Insert title]**

**ATTEST:**

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**Tonya R. Grier  
Clerk to the Commission**

**(Affix County Seal)**

**AUTHORIZATION OF RENEWAL:**

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**[Insert Department Head Name & Title]  
fld\_departmentone**

<b>ITEM#: _____ RM: _____ REGULAR MEETING</b>	<b>ITEM#: _____ 2<sup>ND</sup> RM: _____ SECOND REGULAR MEETING</b>
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# **CERTIFICATE OF INSURANCE**