



**DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE**

**CONTRACT RENEWAL AGREEMENT**

**DEPARTMENT: Finance**

**BID/RFP# NUMBER: 19RFP10172019C-BKJ**

**BID/RFP# TITLE: Healthcare Benefit Consulting Services**

**ORIGINAL APPROVAL DATE: 3/18/2020**

**RENEWAL EFFECTIVE DATES: 1/1/2022 to 12/31/2022**

**RENEWAL OPTION #: 2 OF 2**

**NUMBER OF RENEWAL OPTIONS: 2**

**RENEWAL AMOUNT: \$207,478.00**

**COMPANY'S NAME: Segal Group, Inc.**

**ADDRESS: 2727 Paces Ferry Rd SE Building 1 Suite 1400**

**CITY: Atlanta**

**STATE: Georgia**

**ZIP: 30339**

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

**SIGNATURES: SEE NEXT PAGE**

**SIGNATURES:**

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**

**SEGAL GROUP, INC.**

\_\_\_\_\_  
Robert L. Pitts, Chairman  
Fulton County Board of Commissioners

\_\_\_\_\_  
CEO, President, Vice President

**ATTEST:**

**ATTEST:**

\_\_\_\_\_  
Tonya R. Grier  
Clerk to the Commission

\_\_\_\_\_  
Secretary/  
Assistant Secretary

(Affix County Seal)

(Affix Corporate Seal)

**AUTHORIZATION OF RENEWAL:**

**ATTEST:**

\_\_\_\_\_  
Hakeem Oshikoya, Finance Director  
Finance

\_\_\_\_\_  
Notary Public

County: \_\_\_\_\_

Commission Expires: \_\_\_\_\_

(Affix Notary Seal)

ITEM#: _____ RCS: _____ <b>RECESS MEETING</b>	ITEM#: _____ RM: _____ <b>REGULAR MEETING</b>
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