FULTON COUNTY

CONTRACT RENEWAL AGREEMENT

DEPARTMENT: Finance

BID/RFP# NUMBER: 21RFP071321C-MH

BID/RFP# TITLE: Employee Voluntary Benefits

ORIGINAL APPROVAL DATE: September 1, 2021

RENEWAL EFFECTIVE DATES: January 1, 2026, THROUGH December 31, 2026

RENEWAL OPTION #: 4 OF 4

NUMBER OF RENEWAL OPTIONS: 4

RENEWAL AMOUNT: 100% employee-paid premiums based on approved rates.

COMPANY'S NAME: Pre-Paid Legal Services, Inc. dba Legal Shield

ADDRESS: One Pre-Paid Way

CITY: Ada

STATE: Oklahoma

ZIP: 74820

This Renewal Agreement No. 4 was approved by the Fulton County Board of

Commissioners on BOC DATE: 09/17/2025 **BOC NUMBER:** 25-0711

CERTIFICATE OF INSURANCE: The Contractor renewals. Upon request, the Contractor must furnish the County a Certificate of Insurance showing the required coverage as specified in the Contract Agreement and any renewals. A current COI must be provided before the commencement of work on this project under this Contract Renewal. 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

Docusign Envelope ID: 99763354-6B67-4E7D-91CC-96BA56B1A878

SIGNATURES:

Contractor 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

Signed by:
Robert L. Pitts
14E1B4AA5F6A44A...

Robert L. Pitts, Chairman
Fulton County Board of Commissioners

ATTEST:

Signed by:
EEC476C4837648D...

Tonya R. Grier
Clerk to the Commission

(Affix County Seal)

Signed by:

AUTHORIZATION OF RENEWAL:

Signed by:
Ray Turner
43EAB45F3E5E409...

Ray Turner, Finance Interim Director,
Finance Department

PREPAID LEGAL SERVICES DBA LEGAL SHIELD

Signed by:
Mandy Simmons
2136757E57F2474...

Mandy Simmons,

ITEM#:_____________ RCS:_______ **FIRST REGULAR MEETING**	**ITEM#:** 25-0711 **RM:** 09/17/2025 **SECOND REGULAR MEETING**

Certificate of Insurance

Docusign Envelope ID: 99763354-6B67-4E7D-91CC-96BA56B1A878

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 6/3/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Higginbotham Insurance Agency, Inc. 500 W. 13TH Fort Worth TX 76102	**CONTACT NAME:** Morayma Gonzalez **PHONE (A/C, No, Ext):** 817-336-1197 **FAX (A/C, No):** 817-347-6981 **E-MAIL ADDRESS:** Mgonzalez@higginbotham.net
INSURED PRE-LEG-01 Pre-Paid Legal Services, Inc. dba LegalShield **complete list of named insureds below 1 Prepaid Way Ada OK 74820	**INSURER(S) AFFORDING COVERAGE** / **NAIC #** **INSURER A :** Federal Insurance Company — 20281 **INSURER B :** Accident Fund Insurance Company Of America — 10166 **INSURER C :** **INSURER D :** **INSURER E :** **INSURER F :**

COVERAGES **CERTIFICATE NUMBER:** 1617058975 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X **COMMERCIAL GENERAL LIABILITY** CLAIMS-MADE / X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY / PRO-JECT / LOC OTHER:			3606-28-64TUL	6/1/2025	6/1/2026	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG 	$ 1,000,000 $ 1,000,000 $ 10,000 $ 1,000,000 $ 2,000,000 $ 2,000,000 $
A	**AUTOMOBILE LIABILITY** X ANY AUTO OWNED AUTOS ONLY / SCHEDULED AUTOS X HIRED AUTOS ONLY / X NON-OWNED AUTOS ONLY			73615376	6/1/2025	6/1/2026	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) 	$ 1,000,000 $ $ $ $
A	**UMBRELLA LIAB** X OCCUR X **EXCESS LIAB** CLAIMS-MADE DED / RETENTION $			78191675	6/1/2025	6/1/2026	EACH OCCURRENCE AGGREGATE 	$ 10,000,000 $ 10,000,000 $
B	**WORKERS COMPENSATION AND EMPLOYERS' LIABILITY** ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N **(Mandatory in NH)** If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		0077194960	6/1/2025	6/1/2026	X PER STATUTE / OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ 1,000,000 $ 1,000,000 $ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

**Named Insureds:
LS Parent Corporation
LS, Inc.
PPL Holdings Corp
Pre-Paid Legal Casualty, Inc.
Pre-Paid Legal Access, Inc.
EAP, Inc. dba CLC
PPLSI Insurance Company, Inc.
See Attached...

CERTIFICATE HOLDER

FOR INFORMATIONAL PURPOSES ONLY
United States

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

AGENCY CUSTOMER ID: PRE-LEG-01

LOC #: _____

ADDITIONAL REMARKS SCHEDULE

AGENCY Higginbotham Insurance Agency, Inc.	**NAMED INSURED** Pre-Paid Legal Services, Inc. dba LegalShield **complete list of named insureds below 1 Prepaid Way Ada OK 74820
POLICY NUMBER	
CARRIER / **NAIC CODE**	**EFFECTIVE DATE:**

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 **FORM TITLE:** CERTIFICATE OF LIABILITY INSURANCE

Pre-Paid Canadian Holdings, LLC
PPL Legal Care of Canada Corporation

Workers Compensation Policy-0077194960 All States except IA, MS, ND, OH, WA and those states listed in 3A (3A consists of AR AZ CA CO CT FL GA HI IL IN KS KY MA MI MO MN NC NJ NH NV NY OK OR PA RI TN TX SC VA UT WI

The General Liability Additional insured includes From 80-02-2367 (5-07) Persons or organizations that you are obligated, pursuant to a contract or agreement, to provide with such insurance as is afforded by this policy.

The Automobile Additional Insured includes form (CA 20 48) Persons or organizations that you are obligated, pursuant to a contract or agreement between you and such person or organization, to provide with such insurance as is afforded by this policy. However, no such person or organization is an insured under this provision who is more specifically described under any other provision of the “Who Is An Insured” section of this policy (regardless of any limitation applicable thereto) or who is a branch, department, agency, corporation or other governmental authority of the Federal Government of the United States of America.

The General Liability Waiver of Subrogation includes form (80-02-2000) provides a blanket waiver of subrogation endorsement when required by written contract.

The Automobile Liability Transfer of Right of Recovery against others to us under Loss Conditions.

Workers Compensation waiver of Subrogation includes Any person or organization against whom you have agreed to waive your right of recovery in a written contract, provided such contract was executed prior to the date of loss.

The General Liability has a blanket Primary & Non Contributory endorsement that affords that coverage to certificate holders only where there is a written contract 80-02-2367 (5-07).

The Automobile Primary & Non Contributory included form (16-02-0316) Persons or organizations that you are obligated, pursuant to a contract or agreement between you and such person or organization, to provide primary and non-contributory insurance.

The General Liability (80-02-9779) Automobile Liability (16-02-0306) If you are obligated, pursuant to a written contract or agreement, to provide persons or organizations with Notice of cancellation, then we will notify such persons or organizations provided that within 15 days of the date we send Notice of Cancellation to the first named insured, the first named insured or producer of record provides us with a spreadsheet containing the name, mailing address and, if available, e-mail address of the persons or organizations.

Excess Liability is follow form.

Certificate Of Completion

Envelope Id: 99763354-6B67-4E7D-91CC-96BA56B1A878
Status: Completed
Subject: Renewal Sept 17, 2025 Boc#25-0711 Identity Legal Shield 21RFP071321C-MH, Voluntary Worksite
Parcel ID:
Source Envelope:
Document Pages: 5
Signatures: 4
Certificate Pages: 5
Initials: 0
AutoNav: Enabled
Stamps: 1
EnvelopeId Stamping: Enabled
Time Zone: (UTC-08:00) Pacific Time (US & Canada)

Envelope Originator:
Mark Hawks
141 Pryor Street
Purchasing & Contract Compliance, Suite 1168
Atlana, GA 30303
mark.hawks@fultoncountyga.gov
IP Address: 74.174.59.4

Record Tracking

Status: Original
9/29/2025 12:51:13 PM
Holder: Mark Hawks
mark.hawks@fultoncountyga.gov
Location: DocuSign
Security Appliance Status: Connected
Pool: StateLocal
Storage Appliance Status: Connected
Pool: Fulton County Government
Location: Docusign

Signer Events	Signature	Timestamp
Mandy Simmons mandysimmons@pplsi.com VP Business Solutions Services Security Level: Email, Account Authentication (None)	Signed by: Mandy Simmons 2136757E57F2474... Signature Adoption: Pre-selected Style Using IP Address: 4.26.205.178	Sent: 9/29/2025 1:01:16 PM Viewed: 9/29/2025 1:09:16 PM Signed: 10/1/2025 7:59:44 AM
Electronic Record and Signature Disclosure: Accepted: 9/29/2025 1:09:16 PM ID: 0d868fe3-bd0c-40a4-8402-d2619f5fc619		
Ray Turner Ray.Turner@fultoncountyga.gov Deputy Director Fulton County Government Security Level: Email, Account Authentication (None)	Signed by: Ray Turner 43EAB45F3E5E409... Signature Adoption: Pre-selected Style Using IP Address: 74.174.59.10	Sent: 10/1/2025 7:59:45 AM Viewed: 10/1/2025 8:00:08 AM Signed: 10/1/2025 8:00:37 AM
Electronic Record and Signature Disclosure: Not Offered via Docusign		
Nikki Peterson nikki.peterson@fultoncountyga.gov Chief Deputy Clerk to the Board of Commissioners Fulton County Government Security Level: Email, Account Authentication (None)	**Completed** Using IP Address: 74.174.59.10	Sent: 10/1/2025 8:00:39 AM Viewed: 10/1/2025 8:25:53 AM Signed: 10/1/2025 8:26:48 AM
Electronic Record and Signature Disclosure: Accepted: 11/27/2017 10:39:37 AM ID: b7ce88ee-0c66-4f3a-bfee-705e0af602d8		
Robert L. Pitts harriet.thomas@fultoncountyga.gov Chairman Fulton County Security Level: Email, Account Authentication (None)	Signed by: Robert L. Pitts 14E1B4AA5F6A44A... Signature Adoption: Pre-selected Style Using IP Address: 74.174.59.10	Sent: 10/1/2025 8:26:50 AM Viewed: 10/1/2025 8:35:24 AM Signed: 10/1/2025 8:35:35 AM
Electronic Record and Signature Disclosure:		

Signer Events	Signature	Timestamp
Accepted: 10/1/2025 8:35:24 AM ID: aae14c9f-611a-4f35-a70f-a17908b020f7		
Tonya Grier tonya.grier@fultoncountyga.gov Clerk to the Commission Fulton County Government Security Level: Email, Account Authentication (None)	Signed by:  EEC476C4837648D...  Signature Adoption: Uploaded Signature Image Using IP Address: 74.174.59.10	Sent: 10/1/2025 8:35:36 AM Viewed: 10/1/2025 10:49:49 AM Signed: 10/1/2025 10:50:13 AM
Electronic Record and Signature Disclosure: Accepted: 3/16/2018 7:54:59 AM ID: f3f241e8-3027-4447-9476-6cf20ae25dd4		

In Person Signer Events	Signature	Timestamp

Editor Delivery Events	Status	Timestamp

Agent Delivery Events	Status	Timestamp

Intermediary Delivery Events	Status	Timestamp

Certified Delivery Events	Status	Timestamp

Carbon Copy Events	Status	Timestamp
Dian DeVaughn dian.devaughn@fultoncountyga.gov Security Level: Email, Account Authentication (None) **Electronic Record and Signature Disclosure:** Not Offered via Docusign	COPIED	Sent: 10/1/2025 10:50:15 AM Viewed: 10/2/2025 6:29:13 AM
Verna Thomas verna.thomas@fultoncountyga.gov Employee Benefits Manager FINANCE DEPARTMENT Security Level: Email, Account Authentication (None) **Electronic Record and Signature Disclosure:** Accepted: 8/22/2025 6:35:20 AM ID: 3e69db81-0350-40c9-8377-7ab7c8c55cae	COPIED	Sent: 10/1/2025 10:50:16 AM

Witness Events	Signature	Timestamp

Notary Events	Signature	Timestamp

Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	9/29/2025 1:01:16 PM
Certified Delivered	Security Checked	10/1/2025 10:49:49 AM
Signing Complete	Security Checked	10/1/2025 10:50:13 AM
Completed	Security Checked	10/1/2025 10:50:16 AM

Payment Events	Status	Timestamps

Electronic Record and Signature Disclosure

CONSUMER DISCLOSURE

From time to time, Carahsoft OBO Fulton County, Georgia (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through the DocuSign, Inc. (DocuSign) electronic signing system. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to these terms and conditions, please confirm your agreement by clicking the 'I agree' button at the bottom of this document.

Getting paper copies

At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after signing session and, if you elect to create a DocuSign signer account, you may access them for a limited period of time (usually 30 days) after such documents are first sent to you. You may request delivery of such paper copies from us by following the procedure described below.

Withdrawing your consent

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

Consequences of changing your mind

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. To indicate to us that you are changing your mind, you must withdraw your consent using the DocuSign 'Withdraw Consent' form on the signing page of a DocuSign envelope instead of signing it. This will indicate to us that you have withdrawn your consent to receive required notices and disclosures electronically from us and you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

All notices and disclosures will be sent to you electronically

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

How to contact Carahsoft OBO Fulton County, Georgia:

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:
To contact us by email send messages to: glenn.king@fultoncountyga.gov

To advise Carahsoft OBO Fulton County, Georgia of your new e-mail address
To let us know of a change in your e-mail address where we should send notices and disclosures electronically to you, you must send an email message to us at glenn.king@fultoncountyga.gov and in the body of such request you must state: your previous e-mail address, your new e-mail address. We do not require any other information from you to change your email address..
In addition, you must notify DocuSign, Inc. to arrange for your new email address to be reflected in your DocuSign account by following the process for changing e-mail in the DocuSign system.
To request paper copies from Carahsoft OBO Fulton County, Georgia
To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an e-mail to glenn.king@fultoncountyga.gov and in the body of such request you must state your e-mail address, full name, US Postal address, and telephone number. We will bill you for any fees at that time, if any.
To withdraw your consent with Carahsoft OBO Fulton County, Georgia
To inform us that you no longer want to receive future notices and disclosures in electronic format you may:

i. decline to sign a document from within your DocuSign session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;
ii. send us an e-mail to glenn.king@fultoncountyga.gov and in the body of such request you must state your e-mail, full name, US Postal Address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

Required hardware and software

Operating Systems:	Windows® 2000, Windows® XP, Windows Vista®; Mac OS® X
Browsers:	Final release versions of Internet Explorer® 6.0 or above (Windows only); Mozilla Firefox 2.0 or above (Windows and Mac); Safari™ 3.0 or above (Mac only)
PDF Reader:	Acrobat® or similar software may be required to view and print PDF files
Screen Resolution:	800 x 600 minimum
Enabled Security Settings:	Allow per session cookies

** These minimum requirements are subject to change. If these requirements change, you will be asked to re-accept the disclosure. Pre-release (e.g. beta) versions of operating systems and browsers are not supported.
Acknowledging your access and consent to receive materials electronically
To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please verify that you were

able to read this electronic disclosure and that you also were able to print on paper or electronically save this page for your future reference and access or that you were able to e-mail this disclosure and consent to an address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format on the terms and conditions described above, please let us know by clicking the 'I agree' button below.
By checking the 'I agree' box, I confirm that:

- I can access and read this Electronic CONSENT TO ELECTRONIC RECEIPT OF ELECTRONIC CONSUMER DISCLOSURES document; and

- I can print on paper the disclosure or save or send the disclosure to a place where I can print it, for future reference and access; and

- Until or unless I notify Carahsoft OBO Fulton County, Georgia as described above, I consent to receive from exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to me by Carahsoft OBO Fulton County, Georgia during the course of my relationship with you.