

AMENDMENT NO. 3 TO FORM OF CONTRACT

Contractor: Southern Home Care Services, Inc. dba All Ways Caring Homecare

Contract No. 21RFQ000007A-CJ – In-Home Services

Address: 2296 Henderson Mill Road Suite 202
City, State Atlanta, GA 30345

Telephone: (478) 951-5852

E-mail: kmcdougal@allwayscaring.com

Contact: Kelley McDougal,
State Director

W I T N E S S E T H

WHEREAS, Fulton County (“County”) entered into a Contract with All Ways Caring Homecare to provide in-home services, dated January 1, 2025, on behalf of the Department of Senior Services; and

WHEREAS, increasing the reimbursable rate within the existing spending authority of the agreement with All Ways Caring Homecare for a total of \$68,100 to plan and coordinate the provision of homemaker, personal care and respite care for All Ways Caring Homecare eligible seniors aged 60 and above; and

WHEREAS, the Contractor has performed satisfactorily over the period of the contract; and

WHEREAS, this amendment was approved by the Fulton County Board of Commissioners on March __, 2025, BOC Item **Number _____**.

NOW, THEREFORE, the County and the Contractor agree as follows:

This Amendment No. 3 to Form of Contract is effective as of the ____ day of _____, 20__, between the County and All Ways Caring Homecare, who agree that all Services specified will be performed in accordance with this Amendment No. 3 to Form of Contract and the Contract Documents.

1. **SCOPE OF WORK TO BE PERFORMED:** To plan and coordinate the provision of homemaker services, personal care and respite care for eligible seniors aged 60 and above.
2. **COMPENSATION:** The services described under Scope of Work herein shall be

performed by Contractor at an increased reimbursable rate of ____.

3. **LIABILITY OF COUNTY:** This Amendment No. 3 to Form of Contract shall not become binding on the County and the County shall incur no liability upon same until such agreement has been executed by the Chair to the Commission, attested to by the Clerk to the Commission and delivered to Contractor.
4. **EFFECT OF AMENDMENT NO. 3 TO FORM OF CONTRACT:** Except as modified by this Amendment No. 3 to Form of Contract, the Contract, and all Contract Documents, remain in full force and effect.

[INTENTIONALLY LEFT BLANK]

IN WITNESS THEREOF, the Parties hereto have caused this Contract to be executed by their duly authorized representatives as attested and witnessed and their corporate seals to be hereunto affixed as of the day and year date first above written.

OWNER:

FULTON COUNTY, GEORGIA

CONSULTANT:

**SOUTHERN HOME CARE
SERVICES, INC. DBA ALL WAYS
CARING HOMECARE**

Robert L. Pitts, Chairman
Fulton County Board of Commissioners

Kelly McDougal
State Director

ATTEST:

ATTEST:

Tonya R. Grier
Clerk to the Commission

Secretary/
Assistant Secretary

(Affix County Seal)

(Affix Corporate Seal)

APPROVED AS TO FORM:

ATTEST:

Office of the County Attorney

Notary Public

APPROVED AS TO CONTENT:

County: _____

Ladisa Onyiliogwu, Director
Department of Senior Services

Commission Expires: _____

(Affix Notary Seal)

ITEM#: _____ RCS: _____ RECESS MEETING	ITEM#: _____ RM: _____ REGULAR MEETING
--	--