



Fulton County Board of Commissioners
Agenda Item Summary

BOC Meeting Date **# 17-0554**
 7/19/2017

Requesting Agency

Medical Examiner

Commission Districts Affected

All Districts

Requested Action *(Identify appropriate Action or Motion, purpose, cost, timeframe, etc.)*

Request ratification of emergency purchase order – Medical Examiner, Emergency Purchase Order #17SC108573C-GS in the amount of \$96,000 with Final Diagnosis, Inc., (Tampa, FL) to provide Board certified forensic pathologist to assist with the examinations; including autopsies. Effective upon BOC Approval.

Requirement for Board Action *(Cite specific Board policy, statute or code requirement)*

In accordance with Purchasing Code Section 102-385, when the County Manager has approved an emergency procurement, the item shall be forwarded to the Board of Commissioners for ratification.

Is this Item related to a Strategic Priority Area? *(If yes, note strategic priority area below)*

Yes All People are Safe

Is this a purchasing item?

No

Summary & Background

(First sentence includes Agency recommendation. Provide an executive summary of the action that gives an overview of the relevant details for the item.)

Scope of Work: to provide Board certified forensic pathologist to assist our office with the performance of required forensic examinations; including autopsies.

Community Impact: There is no impact to the Community.

Department Recommendation: The department recommends approval.

Project Implications: None that the department is aware of.

Community Issues/Concerns: None that the department is aware of.

Department Issues/Concerns: None that the department is aware of.

History of BOC Agenda Item: Emergency procurement

Contract & Compliance Information

(Provide Contractor and Subcontractor details.)

Agency Director Approval

County Manager's Approval

Typed Name and Title

Felicia Strong-Whitaker, Director

Signature

Phone

(404) 612-5800

Date

Revised 03/12/09 (Previous versions are obsolete)

Solicitation Information	NON-MFBE	MBE	FBE	TOTAL
No. Bid Notices Sent:				
No. Bids Received:				
Total Contract Value				
Total M/FBE Values				
Total Prime Value				
Fiscal Impact / Funding Source	<i>(Include projected cost, approved budget amount and account number, source of funds, and any future funding requirements.)</i>			
100-340-3400-1160: General, Medical Examiner, Professional Services - \$96,000.00				
Exhibits Attached	<i>(Provide copies of originals, number exhibits consecutively, and label all exhibits in the upper right corner.)</i>			
Exhibit 1: Emergency PO 17SC108573C-GS				
Source of Additional Information	<i>(Type Name, Title, Agency and Phone)</i>			
Dr. Jan Gorniak, Chief Medical Examiner (404) 613-4400				

Procurement

Contract Attached: No	Previous Contracts: No
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Solicitation Number: 17SC1085773C-GS	Submitting Agency: Medical Examiner	Staff Contact: Dr. Jan Gorniak	Contact Phone: 404-613-4400
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Description: Emergency Purchase Order for Locum Pathologist, to provide Board certified forensic pathologist to assist with the performance of required forensic examinations; including autopsies.

FINANCIAL SUMMARY

Total Contract Value:		MBE/FBE Participation:	
Original Approved Amount:	.	Amount:	%:
Previous Adjustments:	.	Amount:	%:
This Request:	\$0.00	Amount:	%:
TOTAL:	\$96,000	Amount:	%:

Grant Information Summary:

Amount Requested:	.	<input type="checkbox"/>	Cash
Match Required:	.	<input type="checkbox"/>	In-Kind
Start Date:	.	<input type="checkbox"/>	Approval to Award
End Date:	.	<input type="checkbox"/>	Apply & Accept
Match Account \$:	.		

Funding Line 1: 100-340-3400-1160	Funding Line 2: .	Funding Line 3: .	Funding Line 4: .
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KEY CONTRACT TERMS

Start Date:	End Date:
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Cost Adjustment: .	Renewal/Extension Terms:
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ROUTING & APPROVALS

(Do not edit below this line)

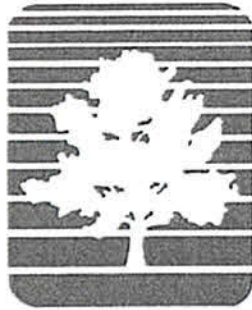
Originating Department:		Date:
County Attorney:		Date:
Purchasing/Contract Compliance:		Date:
Finance/Budget Analyst/Grants Admin:		Date:
Grants Management:		Date:
County Manager:		Date:

Jan Gorniak DO
Chief Medical Examiner

Karen E. Sullivan, MD
Deputy Chief Medical Examiner

Michael M. Heninger, MD
Medical Examiner

430 Pryor Street, SW
Atlanta, Georgia 30312
404 -613-4400
FAX 404-322-0386
www.fultoncountyga.gov/feme-home



FULTON COUNTY
OFFICE OF THE MEDICAL EXAMINER

John M. Cross
Chief Administrative &
Investigative Officer

Paul Desamours
Operations Manager

Mark Guilbeau, PhD
Senior Investigator

Charles Love
Forensic Technician Supervisor



To: Mr. Dick Anderson, County Manager

From: Dr. Jan Gorniak, Chief Medical Examiner

Date: May 12, 2017

Subject: Approval of Emergency Purchase Order for Locum Pathologist

Mr. Anderson,

Our request for use of salary savings to hire a part-time physician to assist us with our case load was approved and the Fulton County Finance Department has transferred the funds to the appropriate budget line.

Now, we need your assistance again. The Fulton County Purchasing Department has advised our office that we should seek an emergency purchasing order to set into motion the payment of the physician who has agreed to assist us. According to Purchasing, this can only be done by obtaining your approval of the same and then having that decision ratified by the Board of Commissioners.

I have previously forwarded to you our justification for our emergency request and we would like, if possible, to get the ratification by the Board of Commissioners on the next meeting agenda. I realize that this very late notice, but as I indicated before our office is in dire straits and needs immediate aid as soon as humanly possible. Thank you in advance for any assistance you may be able to provide.

17-0554

If you have any questions, or need any additional information, please feel free to contact me at your convenience.

This request meets the requirements pursuant to purchasing Code Section 102-395, Emergency Procurement

Felicia J. [Signature] 6/29/2017

SW for PDA
Coerdy Manager Approval

FULTON COUNTY
 PURCHASING DEPARTMENT
 130 Peachtree St. SW Suite 1168
 Atlanta, GA 30303-3459
 Phone # (404) 612-5800

PURCHASE ORDER

17-0554

Invoices must be forwarded to:

Fulton County Medical Examiner
 430 Pryor Street SW

 Atlanta, GA 30312

Purchase Order Number:
PO 340 17SC108573C-GS
Purchase Order Date:
06/27/17
Delivery Date:
12/31/17

To:

Final Diagnosis, Inc.
 Unit E-20 501 S Falkenburg Dr.

 Tampa, FL 33619
Contact: Marcie Schultz

Ship To Address:

Medical Examiner, Office Of
 79 Milton Avenue

 Atlanta, GA 30315

F.O.B.: FOB Dest, Freight Prepaid

Vendor No.: VS0000065428

Special Instructions:

Line	Commodity Code / Description	Quantity	Unit(s)	Unit Price	Total Amount
1	96140 Forensic Services Board certified forensic pathologist to assist our office with the performance of required forensic examinations; including autopsies. Requested by: Karleshia Bentley 404-613-4400	0.00		\$ 0.00	\$ 96,000.00

DEVIATION FROM PRICES STATED IS NOT PERMITTED WITHOUT A SIGNED CORRECTED PURCHASE ORDER
NOTE: NOT VALID ORDER WITHOUT ACCEPTANCE OF TERMS AND CONDITIONS ON LAST PAGE.

Purchasing Agent	Refer Question To:	Purchase Order Total
SIGNATURE	Buyer: Gertis Strozier	
	Packet Page -57-	\$ 96,000.00

FULTON COUNTY
PURCHASING DEPARTMENT
130 Peachtree St. SW Suite 1167
Atlanta, GA 30303-3459
Phone # (404) 612-5800

PURCHASE ORDER

Purchase Order Number:
PO 340 17SC108573C-GS
Purchase Order Date:
06/27/17
Delivery Date:
12/31/17
Vendor No.:
VS0000065428

FULTON COUNTY PURCHASING DEPARTMENT "INSTRUCTIONS AND CONDITIONS"

Vendor shall submit monthly invoices for work performed during the previous calendar month, in a form acceptable to the County and accompanied by all supporting documentation requested by the County, for payment and services that were completed. The County shall review invoices for approval. The County shall have the right not to pay any invoice or part thereof if not properly supported, or if the costs are not in accordance to the accepted quote/Bid/Proposal or as determined by the County, or are in excess of the actual stage of completion.

Submittal of Invoices: Invoices shall be submitted as follows:

Via Mail:

Fulton County Government
141 Pryor Street, SW Suite 7001
Atlanta, Georgia 30303
Attn: Finance Department – Accounts Payable

OR

Via Email:

Email: Accounts.Payable@fultoncountyga.gov

Vendors are allowed to send a copy of the invoice to the requesting department, however, all originals must be mailed or emailed to the Fulton County Finance Department – Accounts Payable division.

At minimum, original invoices must reference all of the following information:

- 1) Vendor Information
 - a. Vendor Name and Address
 - b. Vendor Code
 - c. Vendor Contact Information (i.e. phone, fax , email, contact person name)
 - d. Vendor’s Federal tax identification number
 - e. Remittance Address
- 2) Invoice Details
 - a. Invoice Date
 - b. Invoice Number (uniquely numbered, no duplicates)
 - c. Purchase Order Reference Number (PO number issued by Fulton County)
 - d. Date(s) of Services Performed
 - e. Itemization of Services Provided/Commodity Units
- 3) Fulton County Departmental Information (needed for invoice approval)
 - a. Department Name
 - b. Department Representative Name that placed the order
- 4) Cash discounts must be specified on the invoice

Time of Payment: The County shall make payments within thirty (30) days after receipt of a proper invoice.

This Purchase Order, together with the Vendor’s written Quote/Bid/Proposal, form a binding agreement based upon the agreed terms between the parties.

The Purchasing Department is the only authority for transactions under this order. The Vendor is cautioned not to accept contrary instructions or conditions from any source other than the Purchasing Department's Representative. Should the vendor receive, from any source, contrary instructions or conditions, the Purchasing Department's Representative should be notified immediately.

Any changes or modifications to the underlying transaction shall not become effective or binding unless authorized in writing by the Purchasing Agent.

The County is exempt from Georgia State Tax and Federal Excise Tax (#58-6001729). Exemption Certificates will be issued upon request from the Purchasing Department.

FULTON COUNTY
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 130 Peachtree St. SW Suite 1168
 Atlanta, GA 30303-3459
 Phone # (404) 612-5800

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 79 Milton Avenue

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Purchasing Agent

Refer Question To:

Purchase Order Total

SIGNATURE

Buyer: Gertis Strozier

Packet Page -59-

\$ 96,000.00

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"INSTRUCTIONS AND CONDITIONS"**

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