



Fulton County Board of Commissioners  
**Agenda Item Summary**

#19-1001

**BOC Meeting Date**  
**12/4/19**

**Requesting Agency**  
Commissioners

**Commission Districts Affected**  
All Districts

**Requested Action** *(Identify appropriate Action or Motion, purpose, cost, timeframe, etc.)*  
Presentation of Proclamations and Certificates.

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

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

**Is this a purchasing item?**  
No

<b>Summary &amp; Background</b>	<i>(First sentence includes Agency recommendation. Provide an executive summary of the action that gives an overview of the relevant details for the item.)</i>
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Presentation of Proclamations and Certificates.

Proclamation recognizing "Antonio Johnson Appreciation Day." **(BOC)**

Proclamation recognizing "Nishitha Putreva Appreciation Day." **(BOC)**

Proclamation recognizing "Samuel Washington Appreciation Day." **(BOC)**

<b>Contract &amp; Compliance Information</b>	<i>(Provide Contractor and Subcontractor details.)</i>
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Agency Director Approval		County Manager's Approval
Typed Name and Title	Phone	
Signature	Date	

<b>Agency Director Approval</b>		<b>County Manager's Approval</b>
<b>Typed Name and Title</b>	<b>Phone</b>	
<b>Signature</b>	<b>Date</b>	

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

<b>Solicitation Information</b>	<b>NON-MFBE</b>	<b>MBE</b>	<b>FBE</b>	<b>TOTAL</b>
No. Bid Notices Sent:				
No. Bids Received:				
<b>Total Contract Value</b>	.			
<b>Total M/FBE Values</b>	.			
<b>Total Prime Value</b>	.			
<b>Fiscal Impact / Funding Source</b>	<i>(Include projected cost, approved budget amount and account number, source of funds, and any future funding requirements.)</i>			
.				
<b>Exhibits Attached</b>	<i>(Provide copies of originals, number exhibits consecutively, and label all exhibits in the upper right corner.)</i>			
<b>Source of Additional Information</b>	<i>(Type Name, Title, Agency and Phone)</i>			

<b>Agency Director Approval</b>		<b>County Manager's Approval</b>
<b>Typed Name and Title</b>	<b>Phone</b>	
<b>Signature</b>	<b>Date</b>	

## Procurement

Contract Attached:

.

Previous Contracts:

.

Solicitation Number:

.

Submitting Agency:

.

Staff Contact:

.

Contact Phone:

.

Description:.

### FINANCIAL SUMMARY

Total Contract Value:

Original Approved Amount: .

Previous Adjustments: .

This Request: .

TOTAL: .

MBE/FBE Participation:

Amount: . %: .

Amount: . %: .

Amount: . %: .

Amount: . %: .

Grant Information Summary:

Amount Requested: .

☐

Cash

Match Required: .

☐

In-Kind

Start Date: .

☐

Approval to Award

End Date: .

☐

Apply &amp; Accept

Match Account \$: .

Funding Line 1:

.

Funding Line 2:

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Funding Line 3:

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Funding Line 4:

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### KEY CONTRACT TERMS

Start Date:

.

End Date:

.

Cost Adjustment:

.

Renewal/Extension Terms:

.

### 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: .