



**FULTON
COUNTY**

CONTRACT DOCUMENTS

FOR

REQUEST FOR PROPOSAL 24RFP013124C-MH

2024 CONSOLIDATED COMMUNITY SERVICES PROGRAM

FOR

DEPARTMENT OF COMMUNITY DEVELOPMENT

OF

FULTON COUNTY, GEORGIA

CONTRACT AGREEMENT

THIS AGREEMENT (“Agreement”), entered into this **1st day of January 2024**, by and between **FULTON COUNTY**, Georgia (hereinafter referred to as “Fulton County” or “County”), a political subdivision of the State of Georgia, acting by and through its Community Development Department’s Youth and Community Services Division (“YCS”), and **Erin's Hope for Friends** (hereinafter referred to as “Contractor”), a corporation organized as a nonprofit, tax exempt 501(c)(3) agency, authorized to conduct business within the state of Georgia (hereinafter collectively referred to as the “Parties”).

WITNESSETH

WHEREAS, as part of its official functions, Fulton County is authorized to exercise the power of taxation pursuant to Art. IX, Section IV., Par. I of the Constitution of the State of Georgia of 1983, and to expend such funds raised by the exercise of said powers for public purposes as declared in Art. IX, Section IV., Par. II of the Constitution; and

WHEREAS, Contractor has in its employ personnel, and under its supervision, facilities and resources by which it can render to Fulton County and the citizens thereof certain services authorized by the aforementioned Constitutional provision; and

WHEREAS, Contractor has agreed to render services to the citizens of Fulton County, and the County has appropriated funds for those services; and

WHEREAS, the parties desire to execute a formal agreement for the services to be rendered by Contractor, and said services shall be defined, and consideration to be paid for such services by Fulton County for the successful performance of the services, and shall be enumerated.

The Agreement was approved by the Fulton County Board of Commissioners on **May 17, 2024, BOC#24-0350**.

NOW, THEREFORE, in consideration of the premises, payment of the sum hereinafter set forth and the performance of the services described herein, it is mutually agreed as follows:

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ARTICLE I - PARTIES AND TERM:

(a) Fulton County, through its YCS, retains Contractor, and Contractor accepts retention by Fulton County to render the services as hereinafter defined and required; to perform such services in a manner and to the extent required by the parties herein; and as may be hereafter amended or extended in writing by mutual agreement of the parties.

(b) The Chairperson of the Board of Directors for the Contractor or authorized representative (hereinafter "Board Chair") represents that she/he is authorized to bind and enter into contracts on behalf of Contractor, including this Agreement.

(c) Nothing contained in this Agreement shall be constructed to be a waiver of Fulton County's sovereign immunity or any individual's official or qualified good faith immunity.

(d) This Agreement will remain in effect from **01/01/2024**, until midnight **12/31/2024**.

(e) Fulton County shall have the right to suspend immediately Contractor's performance hereunder on an emergency basis under this Agreement whenever necessary, in the sole opinion of Fulton County, to avert a life threatening situation or other sufficiently serious deficiency.

ARTICLE II - SCOPE OF CONTRACTOR'S DUTIES:

Upon execution of this Agreement, the Contractor will provide the following services for Fulton County:

SCOPE OF WORK:

Consolidated Community Services Program (CCSP)

CCSP Service Category: Children and Youth Services

CCSP Funding Priority(ies):

Children and Youth: In school Afterschool Out of School Programs to help bring up academic...,Programs addressing mental health depression stress trauma and anxiety among youth and teens

Disabilities: Not Applicable

Economic Stability: Not Applicable

Health and Wellness: Not Applicable

Homelessness: Not Applicable

Senior Services: Not Applicable

Veterans Services: Not Applicable

Erin's Hope for Friends, Atypical Atlanta: An Autistic Teen and Young Adult Immersion Project will provide services at the following locations at specified times during the contract period of **01/01/2024** through **12/31/2024**:

Service Delivery Site(s):

| Name of Program Site | Program Location (complete physical address) | Program City | Program State | Program Zip code | Fulton County District of the program (Facility) location | District(s) of Fulton County Residents Served by the program (facility) location |
|-------------------------------|---|---------------------|----------------------|-------------------------|--|---|
| Zoo Atlanta | 800 Cherokee Ave SE | Atlanta | GA | 30315 | 4 | 1,2,3,4,5,6 |
| Wills Park | 11925 Wills Rd | Alpharetta | GA | 30009 | 1 | 1,2,3,4,5,6 |
| Center for Puppetry Arts | 1404 Spring St NW | Atlanta | GA | 30309 | 3 | 1,2,3,4,5,6 |
| College Football Hall of Fame | 250 Marietta St NW | Atlanta | GA | 30313 | 6 | 1,2,3,4,5,6 |
| Museum of Design | 1315 Peachtree St NE | Atlanta | GA | 30309 | 3 | 1,2,3,4,5,6 |

| Name of Program Site | Program Location (complete physical address) | Program City | Program State | Program Zip code | Fulton County District of the program (Facility) location | District(s) of Fulton County Residents Served by the program (facility) location |
|--------------------------------------|---|---------------------|----------------------|-------------------------|--|---|
| Atlanta Symphony Hall | 1280 Peachtree St NE | Atlanta | GA | 30309 | 3 | 1,2,3,4,5,6 |
| SCAD Fash | 1600 Peachtree Rd NW | Atlanta | GA | 30309 | 3 | 1,2,3,4,5,6 |
| National Center for Civil Rights | 100 Ivan Allen Jr Blvd NW | Atlanta | GA | 30313 | 6 | 1,2,3,4,5,6 |
| Alliance Theater | 1280 Peachtree St NE | Atlanta | GA | 30309 | 3 | 1,2,3,4,5,6 |
| Atlanta United Mercedes Benz Stadium | 1 AMB Dr NW | Atlanta | GA | 30313 | 4 | 1,2,3,4,5,6 |
| Georgia Aquarium | 225 Baker St Northwest | Atlanta | GA | 30313 | 5 | 1,2,3,4,5,6 |
| Atlanta Hawks State Farm Arena | 1 State Farm Dr | Atlanta | GA | 30303 | 4 | 1,2,3,4,5,6 |
| High Museum of Art | 1280 Peachtree St NE | Atlanta | GA | 30309 | 3 | 1,2,3,4,5,6 |

| Name of Program Site | Program Location (complete physical address) | Program City | Program State | Program Zip code | Fulton County District of the program (Facility) location | District(s) of Fulton County Residents Served by the program (facility) location |
|----------------------------------|---|---------------------|----------------------|-------------------------|--|---|
| Erin's Hope for Friends e's Club | 1105 PARKSIDE LN STE 1204 and 1206 | Woodstock | GA | 30189 | NA | 1,2,3,4,5,6 |
| Warner Brothers Studios | 3645 Southside Industrial Parkway | Atlanta | GA | 30354 | 4 | 1,2,3,4,5,6 |

Approach and Design:

Erin's Hope for Friends, Atypical Atlanta: An Autistic Teen and Young Adult Immersion Project will provide services to **350** clients that reside in Fulton County, with CCSP funding.

Erin's Hope for Friends, will provide the following activities and services in Fulton County with CCSP funding:

1. Erin's Hope for Friends will provide the following services to 350 teen and young adult Fulton County Residents:

Small group outings for 10-12 members for 2 hours per event, with a minimum of 96 contact hours available for attendees

Sessions will be facilitated by 2 small group staff members with the assistance of volunteers with appropriate clearances

Sign-ups will occur and be tracked using Raklet, our CRM system

Scholarships will be available for those who may not be able to participate due to financial constraints (determined using the Federal free and reduced lunch system)

Sessions will be available in-person, with some accessible virtually

This program will be available at no cost to our members

PLEASE NOTE WE DO NOT TRANSPORT MEMBERS- they are responsible for transport to and from site

Large group outings for 30-32 members for 2 hours per event, with a minimum of 10 contact hours available for attendees

Sessions will be facilitated by 4 staff members with the assistance of volunteers with appropriate clearances

Sign-ups will occur and be tracked using Raklet, our CRM system

Scholarships will be available for those who may not be able to participate due to financial constraints (determined using the Federal free and reduced lunch system)

Sessions will be available in-person, with some accessible virtually

2. Erin's Hope for Friends

Small groups will occur on both weekdays and weekends in-person at 1105 Parkside Lane OR virtually OR at an off-site location in Fulton County as listed previously in the application

Sessions will be 2 hours long

Program outings will be comprised of but not limited to the following:

- Zoo Atlanta
- Wills Park
- Center for Puppetry Arts
- College Football Hall of Fame
- Museum of Design
- SCAD Fash

- National Center for Civil Rights
- Alliance Theater
- Atlanta United Mercedes Benz Stadium
- Georgia Aquarium
- Atlanta Hawks State Farm Arena
- High Museum of Art
- Warner Brothers Studios

See attached schedule

3. Fulton County Health Performance Indicators readily accomplished by EHFF include:

Number of residents who have access to home based and community-based services for seniors and people with disabilities as we offer sessions at home virtually, on site and during outings.

We will seek to increase these numbers based on our rubric, with an overall increase noted in previous sections.

4. Erin's Hope for Friends, with the support of Fulton County CSP funds, will:

Provide an opportunity for those with autism to receive services in-person at our location, off-site during outings, and in-home through our virtual program

Our programs are designed with the goal of reducing isolation, depression, and anxiety associated with autism and bullying

The small and large group outings will increase opportunities for our members to participate in activities specific to their interests and passions outside of school

Participants experience an increase in social and behavioral skills because of the social program and can demonstrate those skills in school and real-life settings

We see a decrease in depression and suicide threats because of our programs

*In 2021, a national retrospective study by K. Kolves from Denmark found individuals with a diagnosed autism spectrum disorder (ASD) have an increased risk for suicide attempt and suicide

death. Among study participants, 35,020 had received a diagnosis of ASD. When adjustments were made for sex, age, and time period, individuals with ASD were over three times more likely to attempt suicide than those without ASD. This difference was more pronounced for females with ASD, who were more than 8 times more likely to attempt suicide than females without ASD, while males with ASD were 1.93 times more likely to attempt suicide than males without ASD. Individuals with ASD were also nearly four times more likely to die by suicide compared to individuals without ASD. Among individuals with ASD, males were over 3 times more likely to die by suicide and females 2.63 times more likely than males and females without ASD.

5. Erins Hope will work with the community by

Engaging with local volunteers of National Charity League and Young Men's Service League, as we have a long-standing relationship with them

Hosting several small groups at Wills Park in Fulton County, allowing members to connect in a beautiful and healthy environment

Inviting local businesses and upstanding citizens to participate in our group sessions, both during outings and at e's Club

Advertising to our membership and constituents the support received by Fulton County CSP via newsletter, social media, website and print materials

Invite Fulton County donors to visit our location and host special appreciation event

Establish a relationship with Fulton County Schools counselors and educators, establishing a path to referrals to our program

Connect with Fulton County Behavioral Health Service Providers, allowing them to share program opportunities with clients

Designation of CSP Funds:

Based on the awarded amount of **\$50,000.00**, the CCSP funds are designated according to the following cost categories: Administrative, Operational, and Direct Services.

Administrative Expenses- CCSP Funds that are spent on executive / management staff and administrative support staff salaries, salary fringe, and benefits; etc.).

Operational Expenditures- CCSP funds used to conduct agency/ organizational functions that are secondary to program service delivery such as office/ warehouse lease or mortgage expenses, office supplies (pens, toner, paper, etc.), utility expenses, transportation expenses (staff travel expenses), marketing/catalogs, etc.

Direct Service Expenditures- CCSP funds utilized to provide services directly to agency/program participants such as payments made on behalf of participants for rent, utilities, food, shelter, transportation (rentals, gas, and parking, bus drivers, public transportation costs, etc.) , scholarships and day care vouchers, salaries and fringe benefits for direct service personnel (Case Managers, Educators, Subcontractors, etc.), program supplies (educational/instructional materials, paper, pencils, markers, etc.) directly consumed by participants. Program materials that may be pertinent to the scope of services of a funded program and that aid in contractor meeting contracted program outcomes are included in this definition (i.e. children's story books, educational games, puzzles, and flash cards).

The maximum amount of CCSP funds allowed for administrative purposes (executive staff salaries and benefits only) is 5% of funds awarded. Throughout the contract period, program expenditures will be monitored (via performance reports) to ensure that funding is utilized as contracted.

| Cost Category | Designation of CCSP Funding Award |
|---|--|
| Administrative (5% Admin max of funds awarded.) | \$2,500.00 |
| Operational | \$10,000.00 |
| Direct Services | \$37,500.00 |
| Total | \$50,000.00 |

Explanation of Funding Details:

\$2500 Executive Director oversight

\$10,000 Program marketing, rent, utilities,

\$37,500 New program staff, program materials, scholarships, curriculum resources, venue admissions, program director

Administrative funds will support the cost of the ED oversight of the program and time spent with program director

Operational will support marketing for program expansion (print and digital), facility expenses including rent, utilities including electric, water and gas, as well as general supplies

Direct service funds will provide members with two new staff members; program director, curriculum; materials including books, crafts, etc.; scholarship funds; venue admission fees

Program Performance Measures:

Erin's Hope for Friends agrees to track and report program performance to the Fulton County Department of Community Development.

County Defined Performance Measure(s):

Children and Youth: Number of school-aged youth engaged in/benefiting from In school/ Afterschool/ Out of School Programs...,Number of youth/teens receiving referrals to behavioral health, evidence based programming/other supportive services

Disabilities: Not Applicable

Economic Stability: Not Applicable

Health and Wellness: Not Applicable

Homelessness: Not Applicable

Senior Services: Not Applicable

Veterans Services: Not Applicable

The following program measures/ Key Performance Indicators (“KPI’s”) will be utilized to track and report program outcomes for the Fulton County residents supported with CSP funding, during the funding period 01/01/2024 through 12/31/2024:

Based on the county defined performance measures, Erin's Hope for Friends can:

1. Identify the number of school-aged youth participating in out-of-school programming directly increasing social behavioral levels via e's Club. We track all membership activity using Raklet.
2. Identify and accept referrals to behavioral health support services including e's Club. Additionally, we often refer members to outside support services to enhance mental health care.

Erin's Hope for Friends relies heavily on a network of behavioral health specialists to refer members to support our program. We receive referrals on a daily basis. We can readily track EHFF participants and those received via referral.

We would like to see a 10% increase of the 350 Fulton County members participating in our group outings (35)

Evaluations to occur quarterly with appropriate adjustments made to align with milestones.

We seek to expand our referral network by developing new relationships with mental health providers.

Assessments will be both anecdotal and based on quantitative data (attendance, attrition, parental feedback, member feedback)

EHFF typically administers surveys via survey monkey.

Member attendance and data to be maintained in Raklet, our CRM.

Finally, quarterly appeals via email will ask for real life experiences. All surveys will be performed on a forced answer basis (i.e. scale 1-4).

Agency Defined Performance Measure(s):

Erin's Hope for Friends will:

Provide large and small group outings totaling a minimum of 106 contact hours available per member

Increase member participation by 10% of 350 total Fulton County participants (35)

Create a diverse set of immersive outings for autistic teens and young adults

Link all outing experiences to on-site curriculum at e's Club (ex. How to plan a trip with friends, purchase tickets, make lunch reservations, arrange parking, etc.; How to maintain conversations;

Dating practices, etc.)

Hire two new staff members to oversee the program

The program will:

Be sustainable and scalable

Provide measurable outcomes

Be reliant on the input of behavioral health specialists

Serve as a source of critical soft skills, including socio-emotional skills

Be the go-to program for teens and young adults on the spectrum seeking relationship building skills

Be well informed and aligned with best practices

Be heavily reliant on the involvement of the Fulton County Community

The program will be assessed for success using the following means:

Anecdotal data from participants, parents and educators
Internet surveys to participants and parents via SurveyMonkey
One-on-one interviews

Focus groups

Community input

Attendance

Longitudinal data gathered by e's Club staff

Pre and post test data

Number of participants

Number of contact hours by participants

Formative and summative participant evaluations

ADDITIONAL REQUIREMENTS

Failure to adhere to the terms of this Agreement, in addition to the requirements listed below, may result in one or all of the following; delayed disbursement or total loss of awarded funds, and / or ineligibility to receive an RFP award during the next funding cycle.

1. Contractor agrees to develop, in conjunction with Fulton County, a process of accepting and serving Fulton County residents referred by the Youth and Community Services Division of Fulton County Government.
2. As consideration for the County providing funding and the non-profit entity accepting same, the non-profit entity shall, upon the County's request, participate in County-sponsored events and activities on County property, when feasible. The non-profit agency shall use its best efforts to comply with the County's request provided that it is given at least one week's notice to do so. Failure to participate will be taken into consideration for future funding requested by the non-profit entity.
3. Contractor agrees to allow staff from the Fulton County Department of Community Development to conduct contract compliance site visits as necessary (announced or unannounced).
4. During the site visit, Contractor will be required to allow staff to monitor programming, as well as review client rosters / sign-in sheets and/ or Registration information that should include complete addresses of Fulton County residents served by this funding.
5. Contractor agrees to comply with the Operational Specifications outlined in **2024 Consolidated Community Services Program 24RFP013124C-MH**.
6. Contractor agrees that advertising, promotions and other publicity in connection with the supported program(s) shall include the following acknowledgment: **"Funding provided in part by the Fulton County Board of Commissioners under the guidance of the Department of Community Development."**

Note: If your agency uses logos versus text, you may substitute the language above with the Fulton County Logo.

Reporting

It is the Contractor's responsibility to ensure accurate reporting of all information contained in the performance reports. Reports and supportive documentation that consistently include erroneous/ inaccurate data may result in a required reimbursement of funding and/or may negatively impact future funding.

7. Contractor will be required to submit completed performance reports (with deadlines of **(July 12, 2024, and January 10, 2025)**) to adhere to the requirements outlined in the Performance Report Instructions, as well as the format provided by the Fulton County Department of Community Development. Future funding will be affected if performance reports are not submitted by stipulated due dates.

8. Contractor will be required to provide demographic information concerning the Fulton County residents served, including, but not limited to age, race/ethnicity and gender.

9. Contractor will be required to report the number of UNDUPLICATED/NEW participants directly served through the Community Services Program funding. **Please note:** Failure to serve the total number of participants contracted to be served with CCSP funding may result in reimbursement of CCSP funding to Fulton County. Failure to reimburse the funding requested will result in the ineligibility to receive future funding.

10. Contractor will be required to submit unduplicated client rosters in a spreadsheet format that includes the complete residential addresses of the Fulton County residents served with CCSP funding, and LEDGERS demonstrating how Community Services Program funds were expended for the specified reporting period.

Expenditure of Funds

11. Contractor is prohibited from utilizing CCSP funds for capital expenditures. (A “capital expenditure” is defined as: any resource not completely consumed during the contract year, i.e. computers, printers, construction, vehicles, cell phones, etc.) Program materials that may be pertinent to the scope of services of a funded program and that aid in contractor meeting contracted program outcomes are excluded from the definition of “capital expenditure” (e.g., children's story books, educational materials, games, puzzles, and flash cards).

12. Community Services Program funds must be expended by December 31st of the contract year. All funds that are not spent by this date must be reimbursed to Fulton County Government within 30 days of written request. A Contractor's failure to adhere to this requirement will result in one or

more of the following: inability to receive future funding from Fulton County, and/or legal action against the agency to recoup funding that are not reimbursed by the deadline.

ARTICLE III - COMPENSATION FOR SERVICES

(a) Fulton County agrees to pay Contractor a maximum sum of **\$50,000.00**.

(b) Upon receipt and approval of Contractor's invoice delineating projected expenditures for the first six months of the contracting period. Upon receipt and approval of said invoice, County shall pay Contractor the first six months of compensation provided for by this Agreement. The Contractor shall provide Fulton County with a second invoice delineating projected expenditures for the remaining six months of the Agreement Term. Upon receipt and approval of said invoice, Fulton County shall pay Contractor the second six months of compensation provided by this Agreement. **A failure by Contractor to submit the invoice for the first and/ or second six months of the contracting period will constitute a breach of this Agreement.**

(c) If through any cause, Contractor shall fail to fulfill its obligation under this Agreement in a timely and proper fashion or in the event that any of the provision or stipulations of this Agreement are violated by Contractor, Fulton County shall thereupon have the right to immediately suspend or terminate this Agreement by serving written notice as defined herein upon Contractor of Fulton County's intent to suspend or terminate this Agreement. If the Agreement is terminated pursuant to this paragraph, Contractor shall be exclusively limited to receiving only the compensation for work performed in a manner satisfactory to Fulton County up to and including the date of the written termination notice.

(d) The Contractor agrees and understands that all expenditures must be consistent with the scope and purpose of this Agreement, and expenditures must be consistent with the guidelines and definitions established in **2024 Consolidated Community Services Program 24RFP013124C-MH**, which is hereby incorporated by reference herein and made a part of this agreement. The County reserves the right to approve and reject payment for expenditures which are not consistent with the scope and purpose of this Agreement, and which the County determines are not consistent with the guidelines and definitions established in the Community Services Program RFP.

(e) The Contractor agrees and understands that Fulton County has the right to recover funds from Contractor for compensation received, pursuant to subsection (b) above if Contractor fails to perform the services outlined in Article II or does not perform such services to the satisfaction of Fulton County.

ARTICLE IV - RECORD KEEPING

(a) Contractor shall maintain accurate records of the expenditure and disposition of funds, and such records must be in accordance with good accounting practices, and made available for inspection and audit by Fulton County at a time mutually agreeable to parties and upon thirty (30) days' notice to contractor.

(b) All reports and communications, with supportive documentation consistent with contract provisions outlined in Article II, must be provided to Fulton County, in accordance with Article IV.

(c) A performance report, with supportive documentation consistent with provisions of the Agreement outlined in Article II, must be provided to Fulton County no later than **July 12, 2024 for the period January 1, 2024-June 30, 2024; and January 10, 2025 for the period July 1, 2024-December 31, 2024.**

(d) Contractor shall be responsible for sending staff representation to mandatory meetings that will be sponsored by the Fulton County Department of Community Development. Contractor will be notified in advance of said meetings.

(e) All notices, program reports and other communications required to be given under this Contract shall be sufficient if in writing and either delivered via e-mail, personally or sent by postage, prepaid, certified or registered United States mail, return receipt requested, or e-mail addressed as follows:

To Fulton County:

**Department of Community Development
c/o: Youth and Community Services Division
hsd.grants@fultoncountyga.gov
137 Peachtree Street, SW
Atlanta, Georgia 30303**

To Contractor:

**Erin's Hope for Friends
PO Box 755
Alpharetta, Georgia 30101**

The Parties may only modify or update the above-referenced addresses during the term of this Agreement by providing formal notice to the other party of such a change pursuant to the terms of this provision.

(f) Contractor understands and agrees that, upon Fulton County's determination that Contractor is not or has not been in substantial compliance with any term of this Agreement with respect to the performance and provision of services at any single delivery site, Fulton County shall thereupon have the right to immediately suspend or terminate this Agreement upon written notice to Contractor. Contractor further understands and agrees that if Fulton County determines that Contractor is not or has not been in substantial compliance with any term of this Agreement with respect to the performance and provision of services at any single delivery site, Fulton County may request, and the Contractor shall provide, any and all additional reports, records or documentation Fulton County deems necessary to evaluate, assess and/or measure Contractor's overall level of performance under this Agreement, including Contractor's performance at other delivery sites.

ARTICLE V - INDEMNIFICATION

Contractor hereby covenants and agrees to indemnify and hold harmless Fulton County, its Commissioners, officers, and employees from all claims, losses, liabilities, damages, deficiencies, demands, judgments, or costs (including without limitation reasonable attorney's fees and legal expenses) suffered or occurred by such party, whether arising in tort, contract, strict liability or otherwise, including without limitation, personal injury, wrongful death or property damage arising in any way from the actions or omissions of Contractor, its directors, officers, employees, agents, successors and assigns in connection with its acceptance, or the performance, or nonperformance of its obligations under this Agreement; provided, however, that nothing herein shall be construed to preclude the Contractor from bringing suit against the County for breach of the terms of this Agreement.

ARTICLE VI – TERMINATION OF AGREEMENT FOR COUNTY'S CONVENIENCE AND FOR CAUSE

(a) This Agreement is effective on **01/01/2024**, and shall terminate on **12/31/2024**, unless earlier terminated in accordance with the provisions of this Agreement. Notwithstanding

termination of the Agreement, Contractor is obligated to fulfill all of its obligations, including its reporting requirements.

(b) Notwithstanding the above provisions, Fulton County may terminate this Agreement for convenience, or Fulton County or the Contractor may terminate this Agreement at any time for any reason by giving written notice of the intent to terminate the Agreement thirty (30) days in advance, by certified mail, return receipt requested, with proper postage prepaid, or by hand delivery, to the other party at the physical address provided herein for notice. The termination shall become effective on the thirtieth (30th) day after the date of such written notice unless the parties otherwise agree in writing. If this Agreement is terminated pursuant to this paragraph, Contractor shall be exclusively limited to receiving compensation for the work satisfactorily performed up to and including the effective date of termination.

(c) Fulton County shall have the right to suspend immediately Contractor's performance hereunder on an emergency basis whenever necessary, in the opinion of Fulton County, to avert a life threatening situation or other sufficiently serious risk.

(d) In the event that this agreement is terminated by Fulton County or Contractor, following the Fulton County's determination that Contractor is not or has not been in substantial compliance with any provision of this agreement, Contractor agrees that Fulton County shall have the right to request repayment in full of all compensation paid to Contractor pursuant to Article III of this agreement. If Fulton County exercises its right under this subsection, Contractor agrees to and shall repay Fulton County all compensation paid to Contractor pursuant to Article III of this Agreement.

(e) In the event that this agreement is terminated by Fulton County or Contractor, following the Fulton County's determination that Contractor is not or has not been in substantial compliance with any provision of this agreement, Contractor agrees that Fulton County shall have the right to terminate this Agreement between Fulton County and Contractor without penalty. Contractor acknowledges and agrees that Fulton County's right to terminate includes, but is not limited to, the right to withhold any and all future compensation due to Contractor pursuant to the terms of any and all other agreements between Fulton County and Contractor.

(f) In the event that this Agreement is terminated by Fulton County or Contractor, following Fulton County's determination that Contractor is not or has not been in substantial compliance with any provision of this Agreement, Contractor agrees that it shall not be eligible to either enter or to apply to enter into future contracts with Fulton County until it has addressed any and all areas of deficiency or non-compliance to Fulton County's satisfaction.

ARTICLE VII - INDEPENDENT CONTRACTOR STATUS

(a) Nothing contained herein shall be deemed to create any relationship other than that of an independent contractor between Fulton County and Contractor. Under no circumstances shall Contractor, its directors, officers, employees, agents, successors or assigns be deemed employees, agents, partners, successors, assigns or legal representatives of Fulton County.

Contractor acknowledges that **Erin's Hope for Friends**, its directors, officers, employees, agents and assigns shall have no right of redress pursuant to the Personnel Rules and Regulations of Fulton County.

(b) The Contractor shall pay all sales, retail, occupational, service, excise, old age benefit and unemployment compensation taxes, consumer, use and other similar taxes, as well as any other taxes or duties on the materials, equipment, and labor for the work provided by the Contractor which are legally enacted by any municipal, county, state or federal authority, department or agency at the time bids are received, whether or not yet effective. The Contractor shall maintain records pertaining to such taxes as well as payment thereof and shall make the same available to Fulton County at all reasonable times for inspection and copying. The Contractor shall apply for any and all tax exemptions which may be applicable and shall timely request from Fulton County such documents and information as may be necessary to obtain such tax exemptions. Fulton County shall have no liability to the Contractor for payment of any tax from which it is exempt.

ARTICLE VIII - INSURANCE

Contractor agrees to obtain, maintain and furnish to Fulton County, a Certificate of Insurance (COI) showing the required coverage during the entire term of this Agreement. All insurance limits are listed in the "Insurance and Risk Management Provisions" document, Attachment "A", with Fulton County, Georgia added as an "Additional Insured". The cancelation 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.

ARTICLE IX – AMENDMENTS AND MODIFICATIONS TO CONTRACT

(a) This Agreement constitutes the entire agreement between Fulton County and Contractor, and there are no further written or oral agreements with respect thereto, no variations, amendments or modifications of this Agreement, and no waiver of its provisions, shall be valid unless in writing and signed by Fulton County's and Contractor's duly authorized representatives.

(b) Modifications or amendments which require a change in compensation level must be approved by the Fulton County Board of Commissioners and Contractor; other modifications, amendments or variations may be agreed to in writing, between the Contractor and the Contract Administrator when the amount of this Agreement and its Term remain unchanged.

ARTICLE X - SUBCONTRACTING

Contractor shall not subcontract any part of the work covered by this Agreement or permit subcontracted work to be further subcontracted without prior written approval of Fulton County.

ARTICLE XI - ASSIGNABILITY

Contractor shall not assign or subcontract this Agreement or any portion thereof without the prior expressed written consent of Fulton County. Any attempted assignment or subcontracting by Contractor without the prior expressed written consent of Fulton County shall at the County's sole option terminate this Agreement without any notice to Contractor of such termination. Contractor binds itself, its successors, assigns, and legal representatives of such other party in respect to all covenants, agreements and obligations contained herein.

ARTICLE XII - SEVERABILITY OF TERMS

If any part or provision of this Agreement is held invalid the remainder of this Agreement shall not be affected thereby and shall continue in full and effect.

ARTICLE XIII – PRECEDENCE OF AGREEMENT

In the event that any language in the Department of Community Development's Community Services Program RFP is in conflict with the language in this Agreement, this Agreement shall take precedence.

ARTICLE XIV - EQUAL EMPLOYMENT OPPORTUNITY

In accordance with Fulton County Code Sections 102-391 (Equal Opportunity Clause) and 154-3 (Policy of Equal Opportunity): (a): During the performance of this Agreement, the Contractor agrees as follows:

(1) The Contractor shall not discriminate against any employee or applicant for employment because of race, religion, color, sex, sexual orientation, national origin, or disability. As used herein, the words “shall not discriminate” shall mean and include without limitations the following:

Recruited, whether by advertising or other means; compensated, whether in the form of rates of pay, or other forms of compensation; selected for training, including apprenticeship; promoted; upgraded; demoted, downgraded; transferred; laid off; and terminated.

The Contractor agrees to and shall post in conspicuous places, available to employees and applicants for employment, notices to be provided by the contracting officer setting forth the provisions of the nondiscrimination clause.

(2) The Contractor shall in solicitation or advertisement for employees, placed by or on behalf of the Contractor; state that all qualified applicants will receive consideration for employment without regard to race, religion, color, sex, sexual orientation, national origin, or disability.

(3) The Contractor shall send to each labor union or representative of workers with which the Contractor has a collective bargaining agreement or other contract or understanding, a notice advising the labor union or workers’ representative of the Contractor’s commitments under the Equal Opportunity Program of Fulton County and under this Article, and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

(4) The Contractor and its subcontractors, if any, shall file Compliance Reports at reasonable times and intervals with Fulton County in the form and to the extent prescribed by the director. Compliance Reports filed at such times as directed shall contain information as to the employment practices, policies, programs and statistics of the Contractor and its subcontractors.

(5) The Contractor shall include the provisions of paragraphs (1) through of this equal employment opportunity clause and every subcontractor purchase order so that such provision shall be binding upon each subcontractor.

ARTICLE XV - CAPTIONS

The captions are inserted herein only as a matter of convenience and for reference and in no way define, limit, or describe the scope of this Agreement or the intent of the provisions thereof.

ARTICLE XVI - GOVERNING LAW

This Agreement shall be governed in all respects, as to validity, construction, capacity, and performance or otherwise, by the laws of the State of Georgia.

ARTICLE XVII - JURISDICTION

This Agreement will be executed and implemented in Fulton County. Further, this Agreement shall be administered and interpreted under the laws of the State of Georgia. Jurisdiction of litigation arising from this Agreement shall be in the Fulton County Superior Courts. If any part of this Agreement is found to be in conflict with applicable laws, such part shall be inoperative, null and void insofar as it is in conflict with said laws, but the remainder of this Agreement shall be in full force and effect.

Whenever reference is made in the Agreement to standards or codes in accordance with which work is to be performed, the edition or revision of the standards or codes current on the effective date of this Agreement shall apply, unless otherwise expressly stated.

STATE OF GEORGIA

COUNTY OF FULTON

FORM F: GEORGIA SECURITY AND IMMIGRATION CONTRACTOR AFFIDAVIT AND AGREEMENT

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services¹ under a contract with **[insert name of prime contractor (Agency)]** Erin's Hope for Friends on behalf of **Fulton County Government** has registered with and is participating in a federal work authorization program*,² in accordance with the applicability provisions and deadlines established in O.C.G.A. 13-10-91.

The undersigned further agrees that, should it employ or contract with any subcontractor(s) in connection with the physical performance of services to this contract with **Fulton County Government**, contractor will secure from such subcontractor(s) similar verification of compliance with O.C.G.A. 13-10-91 on the Subcontractor Affidavit provided in Rule 300-10-01-.08 or a substantially similar form. Contractor further agrees to maintain records of such compliance and provide a copy of each such verification to the **Fulton County Government** at the time the subcontractor(s) is retained to perform such service.

1461855

EEV/Basic Pilot Program* User Identification Number

Erin's Hope for Friends

Name of Contractor (Agency)

Nicole Longevin Burroughs

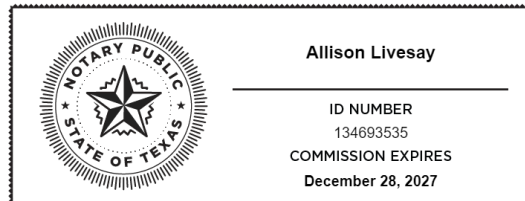
BY: Authorized Signature of Officer or Agent of Contractor

Executive Director

Title of Authorized Officer or Agent of Contractor of Contractor

Nicole L. Burroughs

Printed Name of Authorized Officer or Agent of Contractor

Sworn to and subscribed before me this 26th day of February, 2024.Notary Public: *Allison Livesay*County: Bexar State of TexasCommission Expires: 12/28/2027

Electronically signed and notarized online using the Proof platform.

¹O.C.G.A. § 13-10-90(4), as amended by Senate Bill 160, provides that "physical performance of services" means any performance of labor or services for a public employer (e.g., Fulton County) using a bidding process (e.g., ITB, RFQ, RFP, etc.) or contract wherein the labor or services exceed \$2,499.99, except for those individuals licensed pursuant to title 26 or Title 43 or by the State Bar of Georgia and is in good standing when such contract is for service to be rendered by such individual.

²*[Any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603].

STATE OF GEORGIA

COUNTY OF FULTON

FORM G: GEORGIA SECURITY AND IMMIGRATION SUBCONTRACTOR AFFIDAVIT

By executing this affidavit, the undersigned subcontractor verifies its compliance with O.C.G.A. 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services³ under a contract with **[insert name of prime contractor (Agency)]** Entryway Incorporated on behalf of **Fulton County Government** has registered with and is participating in a federal work authorization program*,⁴ in accordance with the applicability provisions and deadlines established in O.C.G.A. 13-10-91.

N/A

EEV/Basic Pilot Program* User Identification Number of Subcontractor

N/A

Name of Subcontractor (Individual/Agency)

N/A

BY: Authorized Signature Officer or Agent of Subcontractor

N/A

Title of Authorized Officer or Agent of Subcontractor

N/A

Printed Name of Authorized Officer or Agent of Subcontractor

Sworn to and subscribed before me this _____ day of _____, 20_____.

Notary Public: _____

County: _____

Commission Expires: _____

³O.C.G.A. § 13-10-90(4), as amended by Senate Bill 160, provides that “physical performance of services” means any performance of labor or services for a public employer (e.g., Fulton County) using a bidding process (e.g., ITB, RFQ, RFP, etc.) or contract wherein the labor or services exceed \$2,499.99, except for those individuals licensed pursuant to title 26 or Title 43 or by the State Bar of Georgia and is in good standing when such contract is for service to be rendered by such individual.

⁴*[Any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603].



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

07/22/2024

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 CC Services 1711 General Electric Rd Bloomington IL 61704 | CONTACT NAME: CC Services, Inc. PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 80%;">INSURER(S) AFFORDING COVERAGE</th> <th style="width: 20%;">NAIC #</th> </tr> <tr> <td>INSURER A: United States Liability Insurance Group</td> <td></td> </tr> <tr> <td>INSURER B: Markel Insurance Company</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table> | INSURER(S) AFFORDING COVERAGE | NAIC # | INSURER A: United States Liability Insurance Group | | INSURER B: Markel Insurance Company | | INSURER C: | | INSURER D: | | INSURER E: | | INSURER F: | |
|---|---|-------------------------------|--------|---|--|--|--|-------------------|--|-------------------|--|-------------------|--|-------------------|--|
| INSURER(S) AFFORDING COVERAGE | NAIC # | | | | | | | | | | | | | | |
| INSURER A: United States Liability Insurance Group | | | | | | | | | | | | | | | |
| INSURER B: Markel Insurance Company | | | | | | | | | | | | | | | |
| INSURER C: | | | | | | | | | | | | | | | |
| INSURER D: | | | | | | | | | | | | | | | |
| INSURER E: | | | | | | | | | | | | | | | |
| INSURER F: | | | | | | | | | | | | | | | |
| INSURED Erin's Hope For Friends, Inc PO Box 755 Acworth GA 30101-0755 | | | | | | | | | | | | | | | |

COVERAGES**CERTIFICATE NUMBER:** 24-25**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 | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | Y | | NPP1634306 | 07/17/2024 | 07/17/2025 | EACH OCCURRENCE \$ 1,000,000 |
| | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 | | | | | | |
| | MED EXP (Any one person) \$ 5,000 | | | | | | |
| | PERSONAL & ADV INJURY \$ 1,000,000 | | | | | | |
| | | | | | | | GENERAL AGGREGATE \$ 2,000,000 |
| | | | | | | | PRODUCTS - COMP/OP AGG \$ Included |
| | | | | | | | |
| | AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY | | | | | | COMBINED SINGLE LIMIT (Ea accident) \$ |
| | | | | | | | BODILY INJURY (Per person) \$ |
| | | | | | | | BODILY INJURY (Per accident) \$ |
| | | | | | | | PROPERTY DAMAGE (Per accident) \$ |
| | | | | | | | |
| A | <input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$ | Y | | CUP2553435 | 07/17/2024 | 07/17/2025 | EACH OCCURRENCE \$ 1,000,000 |
| | <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE | | | | | | AGGREGATE \$ 1,000,000 |
| | | | | | | | |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | Y / N | | MWC0159280-05 | 11/11/2023 | 11/11/2024 | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000 |
| | Abuse and Molestation | | | NPP1634306 | 07/17/2024 | 07/17/2025 | Each Claim \$100,000 Aggregate \$200,000 |

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

Blanket additional applies per written contract in regards to General Liability. Excess follows underlying forms.

Those usual to the Insured's Operations- social gatherings for autistic teens and young adults.

CERTIFICATE HOLDER**CANCELLATION**

| | |
|--|--|
| Fulton County Government 141 Pryor St SW Atlanta GA 30303-3408 | <p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <p>AUTHORIZED REPRESENTATIVE</p> <p style="text-align: center;"><i>Angela Murphy</i></p> |
|--|--|

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Nicole Longevin-Burroughs <nicoleb@erinshopeforfriends.org>

Fwd: Waiver Request- Erin's Hopes for Friends- Auto waiver Approved; Missing additional Coverage

Everhart, Tawanda <Tawanda.Everhart@fultoncountyga.gov>

Mon, Jul 22, 2024 at 4:17 PM

To: Nicole Burroughs <nicoleb@erinshopeforfriends.org>

Get [Outlook for iOS](#)

From: Williams, Cherie <Cherie.Williams@fultoncountyga.gov>

Sent: Monday, July 22, 2024 2:01 PM

To: Everhart, Tawanda <Tawanda.Everhart@fultoncountyga.gov>

Subject: FW: Waiver Request- Erin's Hopes for Friends- Auto waiver Approved; Missing additional Coverage

Good afternoon Tawanda,

I am in receipt of the auto liability waiver (copy of the letter content below). The request for auto liability is **approved**. Please note that if the Erin's Hopes for Friends staff use their own vehicles for service delivery of the 2024 CCSP funded program, Fulton County Risk Management requires proof of each staff member's personal auto liability coverage.

Additionally, the Workmen's Compensation coverage is missing from the attached ACORD document is will need to be included.

Letter Excerpt for Auto Waiver Request

To Whom It May Concern:

Erin's Hope for Friends would like to request a waiver for automobile coverage as required per our CSP agreement. We do not transport members or staff to or from any event and a waiver has been granted in the past.

Thank you,

Nicole Burroughs

Thank you!

Cherie Williams

Program Manager

Youth and Community Services Division | Department of Community Development

404-612-5348 (office) | 404-612-1109 (efax)

Connect with Fulton County:

[Website](#) | [Facebook](#) | [Twitter](#) | [Instagram](#) | [FGTV](#) | [#OneFulton E-News](#)

From: Nicole Longevin-Burroughs <nicoleb@erinshopeforfriends.org>

Sent: Monday, July 22, 2024 12:43 PM

To: Everhart, Tawanda <Tawanda.Everhart@fultoncountyga.gov>

Cc: Williams, Cherie <Cherie.Williams@fultoncountyga.gov>

Subject: Re: Waiver Request- Erin's Hopes for Friends

Please find the attached documents required for our contract.

Many thanks,

Nicole

On Wed, Jul 3, 2024 at 8:52 PM Nicole Longevin-Burroughs <nicoleb@erinshopeforfriends.org> wrote:

Thank you! Our insurance company has passed us to multiple agents. I am awaiting our COI- it is taking an embarrassingly long time. I followed up with them a 6th time this morning. The auto waiver request will come with the COI or I can send it ahead of you prefer.

Many thanks,

Nicole

Nicole Burroughs, MA, MAA

Executive Director | Erin's Hope for Friends

423.506.6530 | nicoleb@erinshopeforfriends.org

Creating lasting relationships through joyful interactions for teens and young adults on the autism spectrum.

[Visit our website today.](#)



On Wed, Jul 3, 2024 at 8:12 PM Everhart, Tawanda <Tawanda.Everhart@fultoncountyga.gov> wrote:

Ms. Burroughs:

Please submit your waiver request via email to be submitted to leadership for review for the auto policy coverage. Attach your Certificate of Insurance with this email.

Thanks



Tawanda Everhart, CPM®
Grant Administrator
Youth and Community Services
Division | Department of Community
Development

[137 Peachtree Street, SW, Atlanta | Georgia 30303](#)
404-406-4003 (office) | 404-612-3581 (efax)
Connect with Fulton County:
[Website](#) | [Facebook](#) | [Twitter](#) | [Instagram](#) | [FGTV](#) | [#OneFulton E-News](#)

2 attachments



ACORD Form 20240722-103201.pdf
19K



EHFF Auto Waiver Request.pdf
220K


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


OWNER:

CONTRACTOR:

FULTON COUNTY, GEORGIA


VENDOR NAME **Erin's Hope for Friends**


DocuSigned by:

BA715B1A26544E7
Robert L. Pitts, Chairman
Fulton County Board of Commissioners

DocuSigned by: Name of Signatory: Nicole Burroughs

8633C5F67D8248F...
Executive Director
Authorized Signature

ATTEST:

ATTEST:

DocuSigned by:

EEC476C4837648D...
Tonya R. Grier
Clerk to the Commission

Signed by: Name of 2nd Signatory: **Rebecca Matthews**

595E7E7735FC4A7...
Program Director
Second Authorized Signature

(Affix County Seal)



Signed by:

(Affix Corporate Seal, if applicable)




Signed by:

APPROVED AS TO FORM:

Signed by:

0EC92EDADEFB4B8...
Office of the County Attorney

APPROVED AS TO CONTENT:

DocuSigned by:

5E4D76DFB4A0450...
Stanley Wilson, Director
Fulton County Department of
Community Development

Please select RM or 2ND RM from the checkbox

RM

X 2ND RM

| | |
|------------------------|------------------------------------|
| ITEM#: _____ RM: _____ | ITEM#: 2024-0350 2ND RM: 5/15/2024 |
| REGULAR MEETING | SECOND REGULAR MEETING |

Certificate Of Completion

Envelope Id: 30CE73E3FF324226BF334505662B1BEB

Status: Completed

Subject: Please DocuSign: 2024 CCSP Contract-Erin's Hope for Friends-BOC Agenda#24-0350

Parcel ID:

Employee Name:

Source Envelope:

Document Pages: 31

Signatures: 6

Envelope Originator:

Certificate Pages: 7

Initials: 0

Cherie Williams

AutoNav: Enabled

Stamps: 2

141 Pryor Street

Envelopeld Stamping: Enabled

Purchasing & Contract Compliance, Suite 1168

Time Zone: (UTC-05:00) Eastern Time (US & Canada)

Atlanta, GA 30303

Cherie.Williams@fultoncountyga.gov

IP Address: 136.55.230.223

Record Tracking

Status: Original

Holder: Cherie Williams

Location: DocuSign

7/24/2024 5:01:25 PM

Cherie.Williams@fultoncountyga.gov

Security Appliance Status: Connected

Pool: StateLocal

Storage Appliance Status: Connected

Pool: Fulton County Government

Location: DocuSign


Signer Events**Signature****Timestamp**

Nicole Burroughs

nicoleb@erinshopeforfriends.org

Security Level: Email, Account Authentication (None)

DocuSigned by:


8633C5F67D8248F...

Sent: 8/1/2024 9:29:09 AM

Viewed: 8/6/2024 7:31:03 AM

Signed: 8/6/2024 7:31:41 AM

Signature Adoption: Pre-selected Style

Using IP Address: 99.67.246.226

Electronic Record and Signature Disclosure:

Accepted: 8/6/2024 7:31:03 AM

ID: e80b8f0b-1905-42f4-8e80-0f9bf6345a12

Rebecca Matthews

beckym@erinshopeforfriends.org

Security Level: Email, Account Authentication (None)

Signed by:


595E7E7735FC4A7...

Sent: 8/6/2024 7:31:44 AM

Viewed: 8/6/2024 7:51:54 AM

Signed: 8/6/2024 8:07:45 AM



Signature Adoption: Drawn on Device

Using IP Address: 162.235.194.50

Electronic Record and Signature Disclosure:

Accepted: 8/6/2024 7:51:54 AM

ID: d2b9ebe5-49a9-42c0-b749-2893e0980b87

Mark Hawks2

mark.hawks@fultoncountyga.gov

Chief Assistant Purchasing Agent

Purchasing and Contract Compliance

Security Level: Email, Account Authentication (None)

Completed

Sent: 8/6/2024 8:07:49 AM

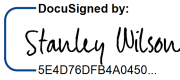
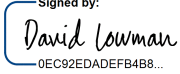
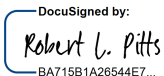
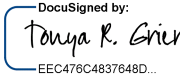

Viewed: 8/6/2024 3:21:43 PM

Signed: 8/6/2024 3:21:59 PM

Using IP Address: 74.174.59.4

Electronic Record and Signature Disclosure:

Not Offered via DocuSign

| Signer Events | Signature | Timestamp |
|---|--|---|
| Stanley Wilson Stanley.Wilson@fultoncountyga.gov Director Stanley Wilson Security Level: Email, Account Authentication (None) | DocuSigned by:  5E4D76DFB4A0450... Signature Adoption: Pre-selected Style Using IP Address: 76.209.103.30 | Sent: 8/6/2024 3:22:03 PM Viewed: 8/6/2024 4:23:55 PM Signed: 8/6/2024 4:24:07 PM |
| Electronic Record and Signature Disclosure: Not Offered via DocuSign | | |
| Lauren Hansford lauren.hansford@fultoncountyga.gov Security Level: Email, Account Authentication (None) | Completed Using IP Address: 74.174.59.4 | Sent: 8/6/2024 4:24:10 PM Viewed: 8/7/2024 9:34:17 AM Signed: 8/7/2024 9:35:49 AM |
| Electronic Record and Signature Disclosure: Accepted: 8/7/2024 9:34:17 AM ID: 7d70fc54-05d2-4299-9e45-f7c14140047d | | |
| David Lowman David.Lowman@fultoncountyga.gov Security Level: Email, Account Authentication (None) | Signed by:  0EC92EDADEFB4B8... Signature Adoption: Pre-selected Style Using IP Address: 74.174.59.4 | Sent: 8/7/2024 9:35:53 AM Viewed: 8/7/2024 9:37:54 AM Signed: 8/7/2024 9:40:09 AM |
| Electronic Record and Signature Disclosure: Accepted: 8/7/2024 9:37:54 AM ID: 2dac7475-5d7e-4784-8265-8afc5301a8b9 | | |
| 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: 68.208.197.4 | Sent: 8/7/2024 9:40:13 AM Viewed: 8/8/2024 1:51:13 PM Signed: 8/8/2024 1:51:35 PM |
| Electronic Record and Signature Disclosure: Accepted: 11/27/2017 1:39:37 PM ID: b7ce88ee-0c66-4f3a-bfee-705e0af602d8 | | |
| Robert L. Pitts michael.oconnor@fultoncountyga.gov Security Level: Email, Account Authentication (None) | DocuSigned by:  BA715B1A26544E7... Signature Adoption: Pre-selected Style Using IP Address: 68.208.197.4 | Sent: 8/8/2024 1:51:40 PM Viewed: 8/8/2024 3:12:50 PM Signed: 8/8/2024 3:12:58 PM |
| Electronic Record and Signature Disclosure: Not Offered via DocuSign | | |
| Tonya R. Grier tonya.grier@fultoncountyga.gov Clerk to the Commission Fulton County Security Level: Email, Account Authentication (None) | DocuSigned by:  EEC476C4837648D...  Signature Adoption: Pre-selected Style Using IP Address: 99.96.24.191 | Sent: 8/8/2024 3:13:02 PM Viewed: 8/8/2024 5:42:32 PM Signed: 8/8/2024 5:42:43 PM |
| Electronic Record and Signature Disclosure: | | |

| Signer Events | Signature | Timestamp |
|---|---|---|
| Accepted: 3/16/2018 10:54:59 AM ID: f3f241e8-3027-4447-9476-6cf20ae25dd4 Mark Hawks3 mark.hawks@fultoncountyga.gov Chief Assistant Purchasing Agent Purchasing and Contract Compliance Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign | Completed Using IP Address: 45.20.200.178 | Sent: 8/8/2024 5:42:48 PM Viewed: 8/9/2024 10:29:35 AM Signed: 8/9/2024 10:29:42 AM |
| 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 |
| Atif Henderson Atif.Henderson@fultoncountyga.gov Fulton County Government Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign | COPIED | Sent: 8/1/2024 9:29:07 AM |
| Cherie Williams cherie.williams@fultoncountyga.gov Fulton County Government Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign | COPIED | Sent: 8/1/2024 9:29:07 AM Resent: 8/9/2024 10:29:53 AM |
| Carlos Thomas carlos.thomas@fultoncountyga.gov Division Manager Fulton County Government Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign | COPIED | Sent: 8/1/2024 9:29:08 AM |
| Dian DeVaughn dian.devaughn@fultoncountyga.gov Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign | COPIED | Sent: 8/9/2024 10:29:48 AM Viewed: 8/9/2024 12:35:18 PM |
| Witness Events | Signature | Timestamp |
| Notary Events | Signature | Timestamp |

| Envelope Summary Events | Status | Timestamps |
|-------------------------|------------------|----------------------|
| Envelope Sent | Hashed/Encrypted | 8/1/2024 9:29:07 AM |
| Certified Delivered | Security Checked | 8/9/2024 10:29:35 AM |
| Signing Complete | Security Checked | 8/9/2024 10:29:42 AM |
| Completed | Security Checked | 8/9/2024 10:29:48 AM |

| Payment Events | Status | Timestamps |
|----------------|--------|------------|
|----------------|--------|------------|

Electronic Record and Signature Disclosure

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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 |

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