



**DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE**

**CONTRACT RENEWAL AGREEMENT**

**DEPARTMENT:** Library

**BID/RFP#** 24ITB1288009B-PS

**BID/RFP# TITLE:** Newspapers, Magazine and Serial Subscriptions

**ORIGINAL APPROVAL DATE:** August 21, 2024

**RENEWAL EFFECTIVE DATES:** January 1, 2026 - December 31, 2026

**RENEWAL OPTION #:** 1 OF 2

**NUMBER OF RENEWAL OPTIONS:** 2

**RENEWAL AMOUNT:** \$75,000.00

**COMPANY'S NAME:** EBSCO Information Services, LLC

**ADDRESS:** P.O. Box 2543

**CITY:** Birmingham

**STATE:** AL

**ZIP:** 35202

This Renewal Agreement No. 2 was approved by the Fulton County Board of Commissioners on **BOC** 25-0914 **BOC NUMBER:** 12-3-2025.

**RENEWAL OF CERTIFICATE OF INSURANCE:** The Contractor is required to maintain insurance during the entire term of this Agreement, including contract renewal options. The Contractor must furnish the County a renewal Certificate of Insurance showing the required coverage as specified in the Contract Agreement. A current COI must be provided before the commencement of work on this project. 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**

## SIGNATURES:

Contractor/Vendor 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

EBSCO INFORMATION SERVICES,  
LLC

Robert L. Pitts

Robert L. Pitts, Chairman  
Fulton County Board of Commissioners

Bowen Thagard

Bowen Thagard  
Senior Vice President



## ATTEST:

Tonya R. Grier

Tonya R. Grier  
Clerk to the Commission

(Affix County Seal)

## AUTHORIZATION OF RENEWAL:

Gayle Holloman

Gayle Holloman, Director of Libraries  
Library

|                       |                       |
|-----------------------|-----------------------|
| ITEM#: <u>25-0914</u> | RM: <u>12/03/2025</u> |
| REGULAR MEETING       |                       |

|                                  |   |
|----------------------------------|---|
| ITEM#: <u>                  </u> | 2 <sup>ND</sup> RM: <u>                  </u> |
| SECOND REGULAR MEETING           |   |

# **CERTIFICATE OF INSURANCE**



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/15/2025

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   |  | <b>CONTACT</b><br>NAME: Adrienne Lamon<br><b>PHONE</b> (A/C, No. Ext): (205) 262-2700 <b>FAX</b> (A/C, No): (205) 262-2701<br><b>E-MAIL</b> alamon@valentgroup.com<br><b>ADDRESS</b> |  |
| 3500 Blue Lake Drive<br>Suite 120<br>Birmingham  |  | AL 35243   |  |
|  |  | <b>INSURER(S) AFFORDING COVERAGE</b>   |  |
|  |  | NAIC #   |  |
|  |  | INSURER A: Travelers Property & Casualty Co of America   |  |
|  |  | 25674  |  |
| INSURED  |  | INSURER B: The Charter Oak Fire Insurance Company  |  |
| EBSCO Industries, Inc.<br>EBSCO Information Services, LLC (See Description of Operations)<br>P.O. Box 1943<br>Birmingham |  | 25615  |  |
| AL 35201   |  | INSURER C: Travelers Casualty and Surety Company   |  |
|  |  | 19038  |  |
|  |  | INSURER D: Endurance American Specialty Insurance Company  |  |
|  |  | 41718  |  |
| INSURER E:   |  |  |  |
| INSURER F:   |  |  |  |

**COVERAGES**      **CERTIFICATE NUMBER:** \* 25/26 EIS      **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<br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><input checked="" type="checkbox"/> GL Ded: \$250,000<br><input checked="" type="checkbox"/> Printers E&O Ded: \$250,000<br><br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-<br>JECT <input type="checkbox"/> LOC<br><br>OTHER: | Y              |          | TC2JGLSA-9D909462-TIL-25 | 10/15/2025              | 10/15/2026              | EACH OCCURRENCE   | \$ 1,000,000    |
|          | DAMAGE TO RENTED<br>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  |                |          |                          |                         |                         | \$ 2,000,000  |                 |
| A        | <input checked="" type="checkbox"/> AUTOMOBILE LIABILITY<br><input checked="" type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY   | Y              |          | TJBAP-9X495788-TIL-25    | 10/15/2025              | 10/15/2026              | COMBINED SINGLE LIMIT<br>(Ea accident)  | \$ 1,000,000    |
|          | BODILY INJURY (Per person)  |                |          |                          |                         |                         | \$  |                 |
|          | BODILY INJURY (Per accident)  |                |          |                          |                         |                         | \$  |                 |
|          | PROPERTY DAMAGE<br>(Per accident)   |                |          |                          |                         |                         | \$  |                 |
|          | Liability Deductible  |                |          |                          |                         |                         | \$ 500,000  |                 |
| A        | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR<br><input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE<br><br>DED <input checked="" type="checkbox"/> RETENTION \$ 10,000  |                |          | CUP-7S137226-25-NF       | 10/15/2025              | 10/15/2026              | EACH OCCURRENCE   | \$ 15,000,000   |
|          | AGGREGATE   |                |          |                          |                         |                         | \$ 15,000,000   |                 |
|          |   |                |          |                          |                         |                         | \$  |                 |
| A        | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY<br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> N<br>(Mandatory in NH)<br>If yes, describe under<br>DESCRIPTION OF OPERATIONS below   | Y / N<br>N / A |          | TWXJUB-9D911955-TIL-25   | 10/15/2025              | 10/15/2026              | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-<br>ER | SIR - \$500,000 |
|          | E.L. EACH ACCIDENT  |                |          |                          |                         |                         | \$ 1,000,000  |                 |
|          | E.L. DISEASE - EA EMPLOYEE  |                |          |                          |                         |                         | \$ 1,000,000  |                 |
|          | E.L. DISEASE - POLICY LIMIT   |                |          |                          |                         |                         | \$ 1,000,000  |                 |
| B        | Workers Comp - Per Statute & Employer Liability (AOS) SIR \$500,000   |                |          | UB-1L339839-25-51-K      | 10/15/2025              | 10/15/2026              | E.L. Each Accident  | \$ 1,000,000    |
|          |   |                |          |                          |                         |                         | E.L. Disease - Each EE  | \$ 1,000,000    |
|          |   |                |          |                          |                         |                         | E.L. Disease - Policy Lmt   | \$ 1,000,000    |

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

Named Insured Includes EBSCO Information Services  
In reference to: Atlanta-Fulton Public Library in Atlanta, GA

Bid# 24ITB1288009B-PS

Certificate holder is included as Additional Insured with respect to the General Liability and Auto Liability when required by written contract.

## CERTIFICATE HOLDER

## CANCELLATION

|   |   |
|---|---|
| Fulton County Government Dept. of Purchasing & Contract Compliance<br>130 Peachtree Street, SW<br>Suite 1168<br>Atlanta | <b>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</b><br><br><b>AUTHORIZED REPRESENTATIVE</b><br> |
| GA 30303-3459   |   |

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## ADDITIONAL COVERAGES



# Fulton County

## Legislation Details

**File #:** 25-0914      **Version:** 1      **Name:**  
**Type:** Consent - Arts and Libraries      **Status:** Agenda Ready  
**File created:** 9/22/2025      **In control:** Board of Commissioners  
**On agenda:** 12/3/2025      **Final action:**  
**Title:** Request approval to renew an existing contract - Fulton County Library System, 24ITB1288009B-PS, Newspapers, Magazine and Serial Subscriptions in the amount not to exceed, \$75,000.00 with EBSCO Information Services, LLC. (Birmingham, AL) to provide Newspapers, Magazine and Serial Subscriptions. This action exercises the first of two renewal options. One renewal option remains. Effective dates: January 1, 2026 through December 31, 2026.

**Sponsors:**

**Indexes:**

**Code sections:**

**Attachments:** 1. Exhibit 1: Contract Renewal Agreement, 2. Exhibit 2 Contract Renewal Evaluation Form, 3. Exhibit 3: Performance Evaluation, 4. Corrected CA for 24ITB1288009B-PS - Signed, 5. Legislation Details, 6. PO 24ITB1288009B-PS-C, Ebsco, \$75,000.00

| Date | Ver. | Action By | Action | Result |
|------|------|-----------|--------|--------|
|      |      |           |        |        |

## Certificate Of Completion

Envelope Id: 1E4BD8CC-3F78-4429-892F-55AE08486B58  
 Subject: CA 24ITB1288009B-PS Newspapers Magazines, Ebsco (R1)  
 Parcel ID:  
 Employee Name:  
 Source Envelope:  
 Document Pages: 6  
 Certificate Pages: 6  
 AutoNav: Enabled  
 Envelope Stamping: Enabled  
 Time Zone: (UTC-05:00) Eastern Time (US & Canada)

Status: Completed

Envelope Originator:  
 Phyllis Stewart  
 141 Pryor Street  
 Purchasing & Contract Compliance, Suite 1168  
 Atlanta, GA 30303  
 Phyllis.Stewart@fultoncountyga.gov  
 IP Address: 134.231.232.249

## Record Tracking

|  |   |                    |
|--|---|--------------------|
| Status: Original<br>12/3/2025 4:12:37 PM | Holder: Phyllis Stewart<br>Phyllis.Stewart@fultoncountyga.gov | Location: DocuSign |
| Security Appliance Status: Connected     | Pool: StateLocal  |                    |
| Storage Appliance Status: Connected      | Pool: Fulton County Government                                | Location: Docusign |

## Signer Events

|  |   |  |
|--|---|--|
| Bowen Thagard<br>bthagard@ebsco.com<br>EVP Operations and Finance<br>EBSCO Information Services LLC<br>Security Level: Email, Account Authentication<br>(None) | <br>Signature Adoption: Pre-selected Style<br>Using IP Address: 71.45.161.98 |  |
|--|---|--|

## Timestamp

Sent: 12/7/2025 12:14:37 PM  
 Resent: 12/8/2025 9:58:19 AM  
 Viewed: 12/8/2025 2:52:32 PM  
 Signed: 12/8/2025 4:39:22 PM

## Electronic Record and Signature Disclosure:

Accepted: 12/8/2025 2:52:32 PM  
ID: 45e5729d-039c-461e-854e-09b8324d91b2

**Completed**

Using IP Address: 134.231.232.249

Sent: 12/8/2025 4:39:23 PM  
 Viewed: 12/8/2025 7:43:47 PM  
 Signed: 12/8/2025 7:47:31 PM

## Electronic Record and Signature Disclosure:

Not Offered via Docusign

|  |   |  |
|--|---|--|
| Gayle Holloman<br>Gayle.Holloman@fultoncountyga.gov<br>Executive Director<br>Fulton County Government<br>Security Level: Email, Account Authentication<br>(None) | <br>Signature Adoption: Pre-selected Style<br>Using IP Address: 2600:387:f:21a::4<br>Signed using mobile |  |
|--|---|--|

Sent: 12/8/2025 7:47:33 PM  
 Viewed: 12/8/2025 8:31:01 PM  
 Signed: 12/8/2025 8:31:22 PM

## Electronic Record and Signature Disclosure:

Not Offered via Docusign

**Completed**

Using IP Address: 74.174.59.10

Sent: 12/8/2025 8:31:24 PM  
 Resent: 12/10/2025 9:56:02 AM  
 Resent: 12/12/2025 11:30:52 AM  
 Resent: 12/12/2025 4:51:57 PM  
 Resent: 12/15/2025 8:04:20 AM  
 Viewed: 12/15/2025 9:51:42 AM  
 Signed: 12/15/2025 9:52:32 AM

## Electronic Record and Signature Disclosure:

| Signer Events  | Signature  | Timestamp  |
|--|--|--|
| Accepted: 11/27/2017 1:39:37 PM<br>ID: b7ce88ee-0c66-4f3a-bfee-705e0af602d8  |  |  |
| Robert L. Pitts<br>Robb.Pitts@fultoncountyga.gov<br>Chairman<br>Security Level: Email, Account Authentication (None)   | <i>Robert L. Pitts</i>   | Sent: 12/15/2025 9:52:33 AM<br>Resent: 12/16/2025 9:00:51 AM<br>Viewed: 12/17/2025 3:52:09 AM<br>Signed: 12/17/2025 3:52:20 AM |
| <b>Electronic Record and Signature Disclosure:</b><br>Accepted: 12/17/2025 3:52:09 AM<br>ID: 43d0ab39-d151-458d-bb55-4f9bcb202dbf                            | Signature Adoption: Pre-selected Style<br>Using IP Address: 2600:387:2:824::f<br>Signed using mobile |  |
| Tonya Grier<br>Tonya.Grier@fultoncountyga.gov<br>Clerk to the Commission<br>Fulton County Government<br>Security Level: Email, Account Authentication (None) | <i>Tonya Grier</i>   | Sent: 12/17/2025 3:52:22 AM<br>Viewed: 12/17/2025 5:46:36 AM<br>Signed: 12/17/2025 5:46:49 AM                                  |
| <b>Electronic Record and Signature Disclosure:</b><br>Accepted: 10/27/2025 11:21:47 AM<br>ID: 4889b84d-8ea3-4ba9-bf87-bf4c309e21ab                           | Signature Adoption: Uploaded Signature Image<br>Using IP Address: 134.231.232.249                    |  |
| In Person Signer Events  | Signature  | Timestamp  |
| <b>Editor Delivery Events</b>  | Status   | Timestamp  |
| <b>Agent Delivery Events</b>   | Status   | Timestamp  |
| <b>Intermediary Delivery Events</b>  | Status   | Timestamp  |
| <b>Certified Delivery Events</b>   | Status   | Timestamp  |
| <b>Carbon Copy Events</b>  | Status   | Timestamp  |
| Bowen Thagard<br>ebsconorthamerica@ebsco.com<br>Sr. Vice President<br>Security Level: Email, Account Authentication (None)                                   | <b>COPIED</b>  | Sent: 12/7/2025 12:14:39 PM<br>Viewed: 12/8/2025 2:45:09 PM  |
| <b>Electronic Record and Signature Disclosure:</b><br>Accepted: 12/7/2025 12:12:38 PM<br>ID: 35088801-1343-49b7-b8e4-e0217e4f856c                            |  |  |
| Dian DeVaughn<br>Dian.DeVaughn@fultoncountyga.gov<br>Security Level: Email, Account Authentication (None)  | <b>COPIED</b>  | Sent: 12/17/2025 5:46:50 AM<br>Viewed: 12/18/2025 9:53:54 AM   |
| <b>Electronic Record and Signature Disclosure:</b><br>Not Offered via Docusign   |  |  |
| Alma Alphonse<br>alma.alphonse@fultoncountyga.gov<br>Security Level: Email, Account Authentication (None)  | <b>COPIED</b>  | Sent: 12/17/2025 5:46:51 AM  |
| <b>Electronic Record and Signature Disclosure:</b><br>Not Offered via Docusign   |  |  |

| Carbon Copy Events  | Status           | Timestamp                   |
|---|------------------|-----------------------------|
| Jamar Parker<br>Jamar.Parker@fultoncountyga.gov<br>Financial Systems Manager<br>Fulton County Government<br>Security Level: Email, Account Authentication<br>(None) | <b>COPIED</b>    | Sent: 12/17/2025 5:46:52 AM |
| Witness Events  | Signature        | Timestamp                   |
| Notary Events   | Signature        | Timestamp                   |
| Envelope Summary Events   | Status           | Timestamps                  |
| Envelope Sent   | Hashed/Encrypted | 12/4/2025 10:11:49 AM       |
| Envelope Updated  | Security Checked | 12/8/2025 7:45:36 PM        |
| Envelope Updated  | Security Checked | 12/8/2025 7:47:02 PM        |
| Certified Delivered   | Security Checked | 12/17/2025 5:46:36 AM       |
| Signing Complete  | Security Checked | 12/17/2025 5:46:49 AM       |
| Completed   | Security Checked | 12/17/2025 5:46:52 AM       |
| Payment Events  | Status           | Timestamps                  |
| Electronic Record and Signature Disclosure  |                  |                             |

## **CONSUMER DISCLOSURE**

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### **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](mailto: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](mailto: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.

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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](mailto: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.

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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](mailto: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.