CONTRACT ACTION SUMMARY FORM

CONTRACT NUMBER:

Contract Information:

|  |  |  |  |
| --- | --- | --- | --- |
| State Entity |       | Date |       |
| Supplier Name |       | Supplier ID |       |
| Contract Number |       | Award Date |       |
| Contract Title |       | NIGP Code(s) |       |
| Contract Type: | [ ]  Open [ ]  Fixed [ ]  Statewide |

Contact Information:

|  |  |
| --- | --- |
| State Entity | Supplier |
| ContractAdministrator |       | Contact Name |       |
| Street |       | Street  |       |
| City  |       | State: |       | City  |       | State |       |
| Zip  |       | Zip  |       |
| Phone  |       | Phone |       |
| Email |       | Email |       |
| Business Owner |       | Small Business | [ ]  Yes [ ]  No | **Georgia Small****Resident** | [ ]  Yes [ ]  No |
| Phone  |       | Georgia Resident | [ ]  Yes [ ]  No | **Georgia****Manufactured** | [ ]  Yes [ ]  No |
| Email |       |

Performance Period:

|  |
| --- |
| **Initial Term:** |
| Effective Date: |       | Expiration Date: |       |

|  |
| --- |
| **Renewal Options (if any):** |
| Exercised 1st Renewal? | [ ]  Yes [ ]  No | Renewal Period: |       through       |
| Exercised 2nd Renewal? | [ ]  Yes [ ]  No | Renewal Period: |       through       |
| Exercised 3rd Renewal? | [ ]  Yes [ ]  No | Renewal Period: |       through       |
| Exercised 4th Renewal? | [ ]  Yes [ ]  No | Renewal Period: |       through       |

|  |  |  |  |
| --- | --- | --- | --- |
| CONTRACT NAME: |       | NUMBER: |       |
| **Bonds (if any):** | **Department of Revenue****Tax Compliance** |
| **Initial Value** |  | **Renewal Period:** | **Initial Clearance** |
| **$**      |  |  | Date:      |
| Confirmed 1st Renewal? | [ ]  Yes [ ]  No |       through       | 1st Renewal [ ]  Yes [ ]  No  |
| $      |  |  | Date:      |
| Confirmed 2nd Renewal? | [ ]  Yes [ ]  No |       through       | 2nd Renewal [ ]  Yes [ ]  No |
| $      |  |  | Date:      |
| Confirmed 3rd Renewal? | [ ]  Yes [ ]  No |       through       | 3rd Renewal [ ]  Yes [ ]  No |
| $      |  |  | Date:      |
| Confirmed 4th Renewal? | [ ]  Yes [ ]  No |       through       | 4th Renewal [ ]  Yes [ ]  No |
| $      |  |  | Date:      |
| **Insurance (if any):** | **eVerify/ Immigration Form** |
| **Initial Value** |  | **Renewal Period:** | **Initial Clearance** |
| **$**      |  |  | Date:      |
| Confirmed 1st Renewal? | [ ]  Yes [ ]  No |       through       | 1st Renewal [ ]  Yes [ ]  No |
| $      |  |  | Date:      |
| Confirmed 2nd Renewal? | [ ]  Yes [ ]  No |       through       | 2nd Renewal [ ]  Yes [ ]  No |
| $      |  |  | Date:      |
| Confirmed 3rd Renewal? | [ ]  Yes [ ]  No |       through       | 3rd Renewal [ ]  Yes [ ]  No |
| $      |  |  | Date:      |
| Confirmed 4th Renewal? | [ ]  Yes [ ]  No |       through       | 4th Renewal [ ]  Yes [ ]  No |
| $      |  |  | Date:      |

Amendment(s)\*:

|  |  |  |  |
| --- | --- | --- | --- |
| Amendment Number: |        | Effective Date: |       |
| Brief Description:       |
| Amendment Number: |       | Effective Date: |       |
| Brief Description:       |
| Amendment Number: |       | Effective Date: |       |
| Brief Description:       |

*\*Amendments continue on subsequent pages*

Contract Close Out:

|  |  |  |  |
| --- | --- | --- | --- |
| CONTRACT NAME: |       | NUMBER: |       |
| Effective Date: |       |
| Reason for Contract Close Out: | [ ]  Supplier Completed Performance [ ]  Terminated for Convenience [ ]  Contract Expired [ ]  Terminated for Cause[ ]  Terminated for Lack of Funding |

Special Notes

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| Notes: |
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| --- | --- | --- | --- |
| CONTRACT: |       | NUMBER: |       |
| Amendment Number: |        | Effective Date: |       |
| Brief Description:       |
| Amendment Number: |       | Effective Date: |       |
| Brief Description:       |
| Amendment Number: |       | Effective Date: |       |
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| Brief Description:       |