

CONTRACT, LEASE, AGREEMENT CONTROL FORM

Date: 06/22/2023

Contract/Lease Control #: C22-3212-RM

Procurement#: RFP RM 31-22

Contract/Lease Type: AGREEMENT

Award To/Lessee: MINNESOTA LIFE INSURANCE COMPANY

Owner/Lessor: OKALOOSA COUNTY

Effective Date: 10/01/2022

Expiration Date: 09/30/2024 W/3 1 YR RENEWALS

Description of: GROUP LIFE INSURANCE FOR OKALOOSA COUNTY

Department: RM

Department Monitor: BIRD

Monitor's Telephone #: 850-689-5978

Monitor's FAX # or E-mail: KBIRD@MYOKALOOSA.COM

Closed:

Cc: BCC RECORDS



CONTRACT/LEASE RENEWAL FORM

Date: 04/27/2023

Minnesota Life Insurance Company
Attn: Susan Munson-Regala
400 Robert Street North
St. Paul, MN. 55101
RE: Adm. of Group Life Insurance

CONTRACT: C22-3212-RM
Madison National Life Insurance Company, Inc.
Group Long Term Disability Insurance
EXPIRES: 09/30/2024 w/3 1 yr renewals

Dear Mrs. Munson-Regala

The Okaloosa County Board of County Commissioners agrees to renew the subject contract/lease, # C22-3212-RM for an additional term. The contract renewal period will be 10/01/2023 to 09/30/2024. The annual budgeted amount for this contract is \$ 310,000-320,000. All other terms and conditions of the original agreement shall remain in full force and effect through the duration of this renewal.

If you are in agreement, please sign below and return this form along with a current Certificate of Insurance listing Okaloosa County as co-insured (if applicable).

COUNTY REPRESENTATIVES

AUTHORIZED COMPANY REPRESENTATIVE

Dept. Director Kelly Bird
Signature: _____
Digitally signed by Kelly Bird
Date: 2023.05.25
11:12:48 -05'00'

Contractor: Kyle Strese
Digitally signed by Kyle Strese
Date: 2023.05.03 07:52:53
-05'00'

Date: _____

Approved By: [Signature]
(John Hofstad, County Administrator)
DCA

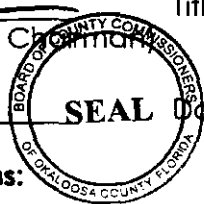
Approved By: Kyle Strese

Date: _____

Approved By: [Signature]
(Robert A. "Trey" Goodwin, III., Chairman)

Title: 2nd Vice President and Act

Date: 6/20/2023



Date: 5/1/23

County Department Instructions:

- 1) Obtain signatures from Department Director, authorized Company Representative and then Purchasing Manager <\$25K and less, OMB Director \$25K to \$50K, County Administrator <\$100K and less or Board >\$100K, as necessary. If Board approval is required, the Chairman and County Administrator's signatures are required. Make sure the company provides a current Certificate of Insurance. (If applicable).
- 2) Keep a copy of this form for your records.
- 3) Send original to Contracts and Lease Coordinator at Purchasing Department.
If you have any questions please contact the Purchasing Manager at 850-689-5960, Fax: 850-689-5970