## CONTRACT, LEASE, AGREEMENT CONTROL FORM

Date:	11/29/2022
Contract/Lease Control #: <u>C20-2945-RM</u> _	
Procurement#:	<u>RFP RM 29-20</u>
Contract/Lease Type:	AGREEMENT
Award To/Lessee:	SOLSTICE BENEFITS, INC.
Owner/Lessor:	<u>OKALOOSA COUNTY</u>
Effective Date:	10/01/2020
Expiration Date:	09/30/2023 W/2 1 YR RENEWALS
Description of:	EMPLOYEE DENTAL INSURANCE
Department:	<u>RM</u>
Department Monitor:	BIRD
Monitor's Telephone #:	<u>850-6889-5978</u>
Monitor's FAX # or E-mail:	<u>KBIRD@MYOKALOOSA.COM</u>
Closed:	11/29/2022

Cc: BCC RECORDS