



COUNTY COMMISSION

BALDWIN COUNTY
312 Courthouse Square, Suite 12
Bay Minette, Alabama 36507
(251) 580-2564
(251) 580-2500 Fax
agary@baldwincountyal.gov
www.baldwincountyal.gov

ANU GARY
Records Manager
MONICA E. TAYLOR
Assistant Records Manager

December 7, 2017

Mr. Michael Molyneux
Manager
Symbol Health Solutions, LLC
3765-A Government Boulevard
Mobile, Alabama 36693

RE: Symbol Clinics - Bay Minette Location - Usage by City of Bay Minette

Dear Mr. Molyneux:

Enclosed is a **fully executed copy** of the *Clinic Usage Agreement* approved during the November 21, 2017, Baldwin County Commission meeting between the Commission and Symbol Health Solutions, LLC, to grant permission to the City of Bay Minette the usage of the Baldwin County Clinic in Bay Minette.

If you have any questions or need further assistance, please do not hesitate to contact Andrea Roberson, Personnel Director, at (251) 580-1635.

Sincerely,

ANU GARY, Administration/Records Manager
Baldwin County Commission

AG/vk Item BH10

cc: Andrea Roberson

ENCLOSURE

REVOCABLE LICENSE IN CONNECTION WITH
Symbol® CareClinic™ SERVICES AGREEMENT
WITH BALDWIN COUNTY

RECEIVED
DEC 04 2017
BY: MEI

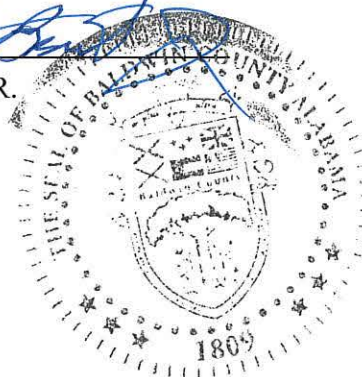
Baldwin County, Alabama, a political subdivision of the State of Alabama, by and through the Baldwin County Commission ("County"), and Symbol Health Solutions®, L.L.C. ("Symbol"), an Alabama limited liability company, subject to that certain Services Agreement between the County and Symbol ("the County Services Agreement") dated on or about Dec, 2017, agree as follows:

- (1) In response to Symbol's request that the County allow Symbol to provide services to the City of Bay Minette, at County-owned Facilities where Symbol provides similar services to the County, the County hereby grants Symbol a revocable license to provide such services at such Facilities for the benefit of City of Bay Minette.
- (2) Symbol hereby agrees to indemnify, defend, and hold harmless the County, its officials, representatives, agents, servants, and employees, from and against any and all claims, losses, damages, expenses, attorney fees, demands, suits and causes of action of every kind and character and all other liabilities (collectively, "claims") arising out of or in any way incident to, related to or in connection with (i) breach of any representation, warranty, covenant or agreements set forth in the County Services Agreement and this License, (ii) the provision of services contemplated by the County Services Agreement and this License, (iii) any claim of wrongdoing or action or inaction by a Physician or Medical Staff members or (iv) anything related to the activities at the Clinic except to the extent such Claim arises from the negligent actions or inactions of County which are not within Symbol's reasonable control.
- (3) County may revoke the said license, with or without cause or reason, by giving thirty (30) days written notice to Symbol. The County may, in its discretion, revoke this license without terminating the County Services Agreement between the County and Symbol. The County shall have the right to terminate the County Services Agreement. In the event the County elects to terminate the County Services Agreement, this License shall be deemed revoked upon such termination.

Effective this 5th day of December, 2017.

Baldwin County, Alabama

By: Frank Burt, Jr.
FRANK BURT, JR.
As Its: Chairman



Symbol Health Solutions, LLC

By: Michael G. Molyneux
MICHAEL G. MOLYNEUX, Manager

Attest:

By: Ronald J. Cink
RONALD J. CINK
As Its: County Administrator

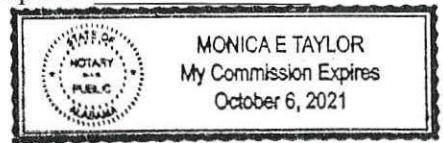
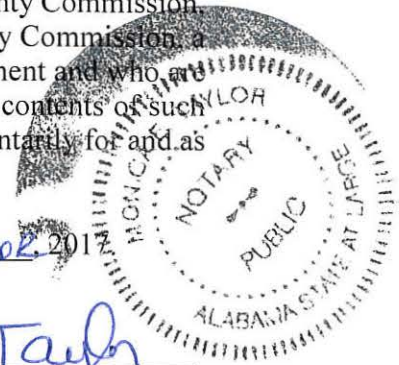
STATE OF ALABAMA

COUNTY OF BALDWIN

I, Monica E. Taylor, a notary public in and for said county in said state, hereby certify that Frank Burt, Jr., whose name as Chairman of the Baldwin County Commission and Ronald J. Cink, whose name as County Administrator of the Baldwin County Commission, a political subdivision of the State of Alabama, are signed to the foregoing instrument and who are known to me, acknowledged before me on this day that, being informed of the contents of such instrument, they, as such officers and with full authority, executed the same voluntarily for and as the act of said commission on the day the same bears date.

Given under my hand and official seal this 5th day of December, 2017

Monica E. Taylor
Notary Public, Baldwin County, Alabama
My Commission Expires:



STATE OF ALABAMA

COUNTY OF MOBILE

I, JERRI ROBBINS, a notary public in and for said county in said state, hereby certify that Michael G. Molyneux, whose name as Manager of Symbol Health Solutions, LLC, an Alabama limited liability company, is signed to the foregoing instrument and who is known to me, acknowledged before me on this day that, being informed of the contents of such instrument, he, as such officer and with full authority, executed the same voluntarily for and as the act of said limited liability company on the day the same bears date.

Given under my hand and official seal this 29 day of NOVEMBER, 2017.

Jerr Robbins
Notary Public, Mobile County, Al

My Commission Expires: October 12, 2021

