



**Cuyahoga County Board of Control Agenda  
Monday, February 12, 2024 - 11:00 A.M.  
County Headquarters  
2079 East Ninth Street  
4<sup>th</sup> Floor, Committee Room B**

**This meeting is open to the public and may also be accessed via livestream using the following link:**  
<https://www.YouTube.com/CuyahogaCounty>

**I – CALL TO ORDER**

**II. – REVIEW MINUTES – 2/5/2024**

**III. – PUBLIC COMMENT**

**IV. – CONTRACTS AND AWARDS**

**A. – Tabled Items**

**B. – New Items for Review**

**BC2024-96**

Department of Public Works,

- a) Submitting an RFP exemption, which will result in an award recommendation to Softeware, Inc. in the amount not-to-exceed \$5,861.10 for renewal of DonorPerfect Online subscription software and support to be used by the County Animal Shelter for the period 2/10/2024 – 2/9/2025.
- b) Recommending an award on Purchase Order No. 24000334 to Softeware, Inc. in the amount not-to-exceed \$5,861.10 for renewal of DonorPerfect Online subscription software and support to be used by the County Animal Shelter for the period 2/10/2024 – 2/9/2025.

Funding Source: Kennel Operating Funds

**BC2024-97**

Department of Public Works submitting an amendment to Contract No. 1126 with Union Industrial Contractors, Inc. for rehabilitation of Cedar Point Bridge No. 00.49 over the Rocky River located in the Cleveland Metropolitan Park District in the City of North Olmsted for additional funds in the amount not-to-exceed \$208,161.43.

Funding Source: Cuyahoga County Road & Bridge

**BC2024-98**

Department of Public Works, submitting an amendment to a Master Contract with various providers for purchase of various materials and supplies on an as needed basis, for road and bridge related maintenance and repairs, including special projects for use by the Road & Bridge Division for the period 3/14/2023 – 3/13/2025 to change the terms applicable only to the (6) new providers being added, effective last date of signature of the parties and for additional funds in the total amount not-to-exceed \$400,000.00.

Current providers, no additional funds

- a) Contract No. 3192 Crown Cleaning Systems and Supply, Inc. dba Crown Cleaning Systems
- b) Contract No. 3195 LumberOne Supply, LLC
- c) Contract No. 3196 PPG Architectural Finishes, Inc.
- d) Contract No. 3197 SiteOne Landscape Supply
- e) Contract No. 3198 The Chas E. Phipps Company

New providers

- f) Contract No. 3963 Carr Brothers, Inc. in the anticipated amount of \$280,000.00
- g) Contract No. 3964 W. W. Grainger, Inc. in the anticipated amount of \$20,000.00.
- h) Contract No. 3965 Hilti, Inc. in the anticipated amount of \$15,000.00.
- i) Contract No. 3967 Industrial Safety Products, Inc. in the anticipated amount of \$15,000.00.
- j) Contract No. 3968 The Sherwin Williams Company in the anticipated amount of \$25,000.00.
- k) Contract No. 3969 Stoneco, Inc. dba Allied Corporation in the anticipated amount of \$45,000.00.

Funding Source: Road and Bridge Fund

**BC2024-99**

Department of Public Works, submitting an amendment to Contract No. 4126 (fka Contract No. 840 and Purchase Order No. 20003188) with MRI Software LLC for the purchase of Prolease Real Estate lease management software, maintenance and training services for the period 11/1/2020 – 10/31/2023 to extend the time period to 10/31/2024, to change the terms, effective 11/1/2023, and for additional funds in the amount not-to-exceed \$9,978.52.

Funding Source: General Fund

**BC2024-100**

Department of Public Works, recommending an award on RQ13204 and enter into Contract No. 4035 with Lakeland Electric Inc. (3-2) in the amount of \$124,235.00 for replacement of streetlights at the Cuyahoga County Airport.

Funding Source: Airport Operations Fund

**BC2024-101**

Department of Workforce Development,

- a) Submitting an RFP Exemption, which will result in an award recommendation to CT Strategies, LLC in the amount not-to-exceed \$88,000.00 for grant supportive services in connection with the 5G and Broadband technology workforce grant for the period 11/17/2023 - 9/30/2024.
- b) Recommending an award and enter into Contract No. 4041 with CT Strategies, LLC in the amount not-to-exceed \$88,000.00 for grant supportive services in connection with the 5G and Broadband technology workforce grant for the period 11/17/2023 - 9/30/2024.

Funding Source: Workforce Innovation Opportunity Act

**BC2024-102**

Medical Examiner’s Office,

- a) Submitting an RFP exemption, which will result in an award recommendation to Cerilliant Corporation in the amount not-to-exceed \$8,213.22 for the purchase of various drugs and chemicals for analytical and research and development applications for the Toxicology Lab.
- b) Recommending an award on Purchase Order No. 24000477 to Cerilliant Corporation in the amount not-to-exceed \$8,213.22 for the purchase of various drugs and chemicals for analytical and research and development applications for the Toxicology Lab.

Funding Source: General Fund

**BC2024-103**

Department of Human Resources,

- a) Submitting an RFP exemption, which will result in an award recommendation to Health and Fitness Equipment Centers in the amount not-to-exceed \$47,607.34 for the purchase and installation of various wellness equipment to be used by staff at the County Administrative Headquarters.
- b) Recommending an award on Purchase Order No. 24000428 to Health and Fitness Equipment Centers in the amount not-to-exceed \$47,607.34 for the purchase and installation of various wellness equipment to be used by staff at the County Administrative Headquarters.

Funding Source: Wellness Fund

**BC2024-104**

Department of Information Technology, recommending an award on Purchase Order No. 24000497 to Ohio State University dba OARnet in the amount not-to-exceed \$66,697.58 for or upgrades, support and maintenance on VmWare software subscriptions for various start and end dates between 2/13/2024 – 2/12/2025.

Funding Source: General Fund

**BC2024-105**

Department of Information Technology on behalf of Court of Common Pleas/Juvenile Court Division,

- a) Submitting an RFP exemption, which will result in an award recommendation to MNJ Technologies Direct, Inc. in the amount not-to-exceed \$6,357.00 for a state contract purchase of (3) Microsoft Surface Pro 9 Tablets each to include a keyboard, case and stylus pen.
  
- b) Recommending an award on Purchase Order No. 24000498 to MNJ Technologies Direct, Inc. in the amount not-to-exceed \$6,357.00 for a state contract purchase of (3) Microsoft Surface Pro 9 Tablets each to include a keyboard, case and stylus pen.

Funding Source: General Fund

**BC2024-106**

Department of Information Technology, submitting various amendments to Contract No. 4144 (fka Contract Nos. 674 and CE1600276) for software licenses, maintenance and support for the Enterprise Resource Planning software for the period 10/27/2016 – 10/26/2026 to modify the scope of services and for additional funds in the total amount not-to-exceed \$261,338.52 .

- a) Infor Public Sector, Inc. for the purchase of various Software as a Service (SaaS) licenses in the amount-not-to-exceed \$200,963.52 for the period 1/1/2023 – 12/31/2024.
  
- b) Infor (US) LLC For system upgrades to MyTime Workforce Management platform in the amount-not-to-exceed \$60,375.00, effective upon signature of all parties.

Funding Source: General Fund

**BC2024-107**

Department of Information Technology,

- a) Submitting an RFP exemption, which will result in an award recommendation to Strategic Government Solutions, Inc. in the amount not-to-exceed \$18,400.00 for Identity as a Service, provided by Auth0, for the period 2/1/2024 – 12/31/2024.
  
- b) Recommending an award and enter into Contract No. 4127 with Strategic Government Solutions, Inc. in the amount not-to-exceed \$18,400.00 for Identity as a Service, provided by Auth0, for the period 2/1/2024 – 12/31/2024.

Funding Source: General Fund

**BC2024-108**

County Prosecutor,

- a) Submitting an RFP exemption, which will result in a payment to Todd Jordan Consulting LLC dba Jordan Detection K9 in the amount not-to-exceed \$15,000.00 for the purchase of (1) multi-purpose electronic storage detection K9.
- b) Recommending a payment on Purchase Order No. 24000415 to Todd Jordan Consulting LLC dba Jordan Detection K9 in the amount not-to-exceed \$15,000.00 for the purchase of (1) multi-purpose electronic storage detection K9.

Funding Source: FY20 Internet Crimes Against Children Ohio Task Force Grant award

**BC2024-109**

Sheriff's Department, recommending an award on Purchase Order No. 24000280 to Geauga County Sheriff's Department in the amount not-to-exceed \$450,000.00 for outsourcing prisoner board and care services to reduce the daily population in the Cuyahoga County Jail for the period 1/1/2024 – 12/31/2024.

Funding Source: General Fund

**BC2024-110**

Sheriff's Department,

- a) Submitting an RFP exemption, which will result in an award recommendation to Pro-Tech Sales in the amount not-to-exceed \$10,676.00 for the purchase of (1) ballistic shield and various surveillance equipment and accessories for use by the Northeast Ohio Human Trafficking Task Force.
- b) Recommending an award on Purchase Order No. 24000481 to Pro-Tech Sales in the amount not-to-exceed \$10,676.00 for the purchase of (1) ballistic shield and various surveillance equipment and accessories for use by the Northeast Ohio Human Trafficking Task Force.

Funding Source: FY23 Senator Brown's Congressionally Directed Spending (CDS) Request for FY 2023 (Human Trafficking)

**BC2024-111**

Sheriff's Department,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Excel K-9 Services, Inc. in the amount not-to-exceed \$47,200.00 for the purchase of (4) imported narcotic detection, police service dogs and related training services for the period 2/15/2024 –2/14/2025.
- b) Recommending an award and enter into Contract No. 4134 with Excel K-9 Services, Inc. in the amount not-to-exceed \$47,200.00 for the purchase of (4) imported narcotic detection, police service dogs and related training services for the period 2/15/2024 –2/14/2025.

Funding Source: General Fund

**BC2024-112**

Department of Public Safety and Justice Services on behalf of the Medical Examiner’s Office, recommending an award and enter into Purchase Order No. 24000294 with Mettler-Toledo, LLC in the amount not-to-exceed \$48,669.00 for a sole source purchase of (1) LabX Balance Server Software Solution, various LabX licenses, maintenance and support for the Drug Chemistry Lab.

Funding Source: American Rescue Plan Act Crime Lab Backlog Grant

**BC2024-113**

Department of Health and Human Services/Cuyahoga Job and Family Services,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Biometric Information Management in the amount not-to-exceed \$7,000.00 for a state contract purchase of (1) mobile fingerprinting unit, related accessories, system configuration and training.
- b) Recommending an award on Purchase Order No. 24000476 to Biometric Information Management in the amount not-to-exceed \$7,000.00 for a state contract purchase of (1) mobile fingerprinting unit, related accessories, system configuration and training.

Funding Source: 50% Health and Human Services Levy and 50% State and Federal Reimbursement.

**C. – Exemptions**

**BC2024-114**

Department of Public Works, requesting an alternative procurement process, which will result in award recommendations to a maximum of (3) county-eligible vendors in the total amount not-to-exceed \$1,500,000.00 for on-call sanitary pump station repair and construction services, on a task order basis for a period of three (3) years.

Funding Source: Sanitary funds

**D. – Consent Agenda**

**BC2024-115**

Department of Public Works, recommending to declare approximately 296 UPS (Uninterruptible Power Supply) batteries that have no value as surplus County-owned property no longer needed for public use; recommending to discard or recycle surplus property through A1 Battery Shop in accordance with E02012-0001.

Funding Source: Revenue Generating

**BC2024-116**

Department of Purchasing on behalf of the Department of Public Works, declaring as surplus County property no longer needed for public use by the Road and Bridge Division, (1) 2020 International Truck and (1) 2020 Landoll trailer and recommending the sale of said property to the Board of Park Commissioners of the Cleveland Metropolitan Park District in the amount not-to-exceed \$170,000.00, in accordance with Ohio Revised Code Section 307.12(E).

Funding Source: Revenue Generating

**BC2024-117**

Department of Purchasing, declaring various property as surplus County property no longer needed for public use; recommending selling said property via internet auction, in accordance with Ohio Revised Code Section 307.12(E).

Funding Source: Revenue Generating

**BC2024-118**

Department of Information Technology, recommending to declare excess County computers and IT Equipment as surplus County-owned property, no longer needed for public use; requesting authority to sell surplus property to Info@Ret3.org. for a fee in the amount of \$1.00 for the month of January 2024 in accordance with E02012-0001.

Funding Source: Revenue Generating

**BC2024-119**

Department of Purchasing, presenting proposed purchases for the week of 2/12/2024:

**Direct Open Market Purchases**  
**(Purchases between \$5,000 - \$49,999.99 unless requiring assistance from**  
**the Department of Purchasing – See Below):**

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
24000587	(12) Subscription licenses to TestRail Cloud	Department of Information Technology	MNJ Technologies Direct, Inc.	\$14,280.00	General Fund
24000583	(180) Buckets of Aquaphalt Cold Mix	Department of Public Works	SPC Specialty Products	\$8,875.80	General Fund
24000610	Various sizes of steel materials for use by Road and Bridge	Department of Public Works	Cumberland Industries Inc.	Not-to-exceed \$10,000.00	Road and Bridge Fund
24000595	Annual order of (20) cases of identification wristbands with stainless steel fasteners for inmates	Sheriff's Department	CLD dba Centerline Dynamics LLC	\$6,432.80	General Fund

**Items/Services Received and Invoiced but not Paid:**

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
24000544	Concrete for various county projects*	Department of Public Works	Contractors Choice Ready Mix	Not-to-exceed \$20,000.00	Road and Bridge Fund

\*Approval No. BC2023-751, dated 11/20/2023, which amended various Board approvals on various dates authorizing an alternative procurement process and resulted in various award recommendations in the total amount not-to-exceed \$320,000.00 for the purchase of concrete materials on an as-needed basis for repair and maintenance projects throughout Cuyahoga County for the time period 12/19/2022 – 12/18/2024 for additional funds in the amount not-to-exceed \$200,000.00.

**V- OTHER BUSINESS**

**Item of Note (non-voted)**

**Item No. 1**

Department of Public Safety and Justice Services/Office of Emergency Management, requesting authority to apply for grant funds with Ohio State Emergency Response Commission in the amount of \$172,281.19 for the Chemical Emergency Planning and Community Right-to-Know Fund in connection with the Ohio Environmental Protection Agency Right-to-Know Program for the period 7/1/2024 – 6/30/2025.

Funding Source: Ohio State Emergency Response Commission

**Item No. 2**

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services,

a) Requesting authority to apply for grant funds from Ohio Department of Development in the amount of \$533,700.00 for rapid re-housing to homeless males, females and households with children in Cuyahoga County in connection with PY2023 Homeless Crisis Response Program for the period 1/1/2024 – 2/28/2026.

b) Submitting a grant agreement from Ohio Department of Development in the amount of \$533,700.00 for rapid re-housing to homeless males, females and households with children in Cuyahoga County in connection with PY2023 Homeless Crisis Response Program for the period 1/1/2024 – 2/28/2026.

Funding Source: Ohio Department of Development



**Item No. 3**

Cuyahoga County Law Library, requesting authority to apply for grant funds from Statewide Consortium of County Law Library Resources Boards in the amount of \$3,128.92 for improvement projects in several categories, staff training and career development, programming for patrons, technology and collaboration for the period 2/28/2024-12/31/2024.

Funding Source: Statewide Consortium of County Law Library Resources Board

**VI – PUBLIC COMMENT**

**VII – ADJOURNMENT**

Minutes

Cuyahoga County Board of Control  
Monday, February 5, 2024 - 11:00 A.M.  
County Headquarters  
2079 East Ninth Street  
Committee Room B

**I – CALL TO ORDER**

The meeting was called to order at 11:03 a.m.

Attending:

Katherine A. Gallagher, Chief of Operations & Community Innovation County Executive Administration  
(Alternate for Chris Ronayne, County Executive)  
Michael Chambers, Fiscal Officer, serving as Chairman  
Mellany Seay, Finance and Operations Administrator, Department of Public Works  
(Alternate for Michael Dever)  
Paul Porter, Director, Department of Purchasing  
Levine Ross, County Council (Alternate for Meredith Turner)  
Trevor McAleer, County Council (Alternate for Pernel Jones, Jr.)  
Councilmember Dale Miller

**II. – REVIEW MINUTES – 1/29/2024**

Michael Chambers motioned to approve the minutes from the January 29, 2024, meeting; Dale Miller seconded. The minutes were approved by unanimous vote, as written.

**III. – PUBLIC COMMENT**

There was no public comment.

**IV. – CONTRACTS AND AWARDS**

**A. – Tabled Items**

**B. – New Items for Review**

**BC2024-82**

Department of Public Works, submitting an amendment to Contract No. 3909 (fka Contract No. 3251 and 2584) with AVI Foodsystems, Inc. for food service operations at the Cuyahoga County Justice Center Cafeteria for the period 7/1/2012 – 6/30/2024 to add \$15,000.00 to the contract for anticipated loss of revenue payment to AVI Foodsystems, Inc. effective upon contract signatures of all parties.

Funding Source: Property Management Funds

Matthew Rymer, Department of Public Works, presented and Mellany Seay supplemented. Dale Miller asked how long the contract with AVI is; asked whether covering losses is temporary or is it expected to continue in the next contract. Michael Chambers motioned to approve the item; Paul Porter seconded. Item BC2024-82 was approved by unanimous vote.

**BC2024-83**

Court of Common Pleas/Juvenile Court Division,

- a) Submitting an RFP Exemption, which will result in an award recommendation to C.H.E.S.S., LLC in the amount not-to-exceed \$12,000.00 for positive youth development services for court referred males ages 8 through 18 with high risk for recidivism for the period 7/1/2023- 6/30/2024.
- b) Recommending an award and enter into Contract No. 4094 with C.H.E.S.S., LLC in the amount not-to-exceed \$12,000.00 for positive youth development services for court referred males ages 8 through 18 with high risk for recidivism for the period 7/1/2023- 6/30/2024.

Funding Source: RECLAIM Grant

LaTerra Brown, Court of Common Pleas/Juvenile Court Division, presented. There were no questions. Michael Chambers motioned to approve the item; Levine Ross seconded. Item BC2024-83 was approved by unanimous vote.

**BC2024-84**

Sheriff's Department,

- a) Submitting an RFP exemption, which will result in an award recommendation to West Publishing Corporation aka Thomson Reuters in the amount not-to-exceed \$16,000.00 for the purchase of Clear Proflex software subscription services for Law Enforcement Division for the period 2/1/2024 – 12/31/2024.
- b) Recommending an award on Purchase Order No. 24000245 to West Publishing Corporation aka Thomson Reuters in the amount not-to-exceed \$16,000.00 for the purchase of Clear Proflex software subscription services for Law Enforcement Division for the period 2/1/2024 – 12/31/2024.

Funding Source: Federal Equitable Sharing Account

Karen DiCarlo, Sheriff's Department, presented. There were no questions. Michael Chambers motioned to approve the item; Trevor McAleer seconded. Item BC2024-84 was approved by unanimous vote.

**BC2024-85**

Medical Examiner's Office,

- a) Submitting an RFP exemption, which will result in an award recommendation to Fisher Scientific Company LLC in the amount not-to-exceed \$49,320.21 for a joint cooperative purchase of various laboratory equipment, general supplies and chemicals for the Toxicology Department.

- b) Recommending an award on Purchase Order No. 24000419 to Fisher Scientific Company LLC in the amount not-to-exceed \$49,320.21 for a joint cooperative purchase of various laboratory equipment, general supplies and chemicals for the Toxicology Department.

Funding Source: General Fund

Hugh Shannon, Medical Examiner's Office, presented. There were no questions. Michael Chambers motioned to approve the item; Trevor McAleer seconded. Item BC2024-85 was approved by unanimous vote.

**BC2024-86**

Department of Public Safety and Justice Services,

- a) Submitting an RFP exemption which will result in an award recommendation to TAC Computer, Inc. in the amount not-to-exceed \$10,800.00 for Ohio Law Enforcement Network subscription services and software support for use by the Northeast Ohio Regional Fusion Center for the period 1/1/2024 – 12/31/2026.
- b) Recommending an award and enter into Contract No. 3860 with TAC Computer, Inc. in the amount not-to-exceed \$10,800.00 for Ohio Law Enforcement Network subscription services and software support for use by the Northeast Ohio Regional Fusion Center for the period 1/1/2024 – 12/31/2026.

Funding Source: General Fund

Mary Beth Vaughn, Department of Public Safety and Justice Services, presented. Trevor McAleer asked in relation to the funding source whether there is a grant available to fund this. Michael Chambers motioned to approve the item; Levine Ross seconded. Item BC2024-86 was approved by unanimous vote.

**BC2024-87**

Department of Health and Human Services/Cuyahoga Job and Family Services,

- a) Submitting an RFP exemption, which will result in a payment to Lutheran Metropolitan Ministries in the amount-not-to-exceed \$11,754.53 as final payment for the period 7/1/2023 – 7/31/2023 for services rendered under the SNAP (Supplemental Nutrition Assistance Program) to Skills Employment and Training services contract for the period of 10/1/2020 – 9/30/2023.
- b) Recommending an award on Purchase Order No. 23005227 to Lutheran Metropolitan Ministries in the amount-not-to-exceed \$11,754.53 as final payment for the period 7/1/2023 – 7/31/2023 for services rendered under the SNAP (Supplemental Nutrition Assistance Program) to Skills Employment and Training services contract for the period of 10/1/2020 – 9/30/2023.

Funding Source: Federal Food Assistance Employment and Training

Marcos Cortes, Department of Health and Human Services, presented. Michael Chambers motioned to approve the item; Dale Miller seconded. Item BC2024-87 was approved by unanimous vote.

**BC2024-88**

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, submitting an amendment to Contract No. 3046 with Mental Health Services For Homeless Persons dba Frontline Service for Diversion Prevention services in connection with the Continuum of Care program for the period 9/1/2022 – 8/31/2023 to extend the time period to 8/31/2024 to change the terms of insurance and Attachment II Budget, effective 9/1/2023 and for additional funds in the amount not-to-exceed \$180,464.00.

Funding Source: Emergency Solutions Grant

Erin Rearden, Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, presented. Levine Ross asked why the increase over last year's funding. Michael Chambers motioned to approve the item; Levine Ross seconded. Item BC2024-88 was approved by unanimous vote.

**BC2024-89**

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, submitting an amendment to Contract No. 3047 with West Side Catholic Center for emergency shelter services for families in connection with the Continuum of Care program for the period 9/1/2022 – 8/31/2023 to extend the time period to 8/31/2024 to amend the terms of Exhibit II Budget, effective 9/1/2023 and for additional funds in the amount not-to-exceed \$63,730.00.

Funding Source: Emergency Solutions Grant

Erin Rearden, Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, presented. There were no questions. Michael Chambers motioned to approve the item; Trevor McAleer seconded. Item BC2024-89 was approved by unanimous vote.

**BC2024-90**

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, submitting an amendment to Contract No. 3178 with Family Promise of Greater Cleveland for emergency shelter services for families in connection with the Continuum of Care program for the period 9/1/2022 – 8/31/2023 to extend the time period to 8/31/2024 to amend the terms of Exhibit II Budget, effective 9/1/2023 and for additional funds in the amount not-to-exceed \$68,800.00.

Funding Source: Emergency Solutions Grant

Erin Rearden, Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, presented. There were no questions. Michael Chambers motioned to approve the item; Mellany Seay seconded. Item BC2024-90 was approved by unanimous vote.

## **BC2024-91**

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services,

- a) Submitting an RFP Exemption, which will result in an award of a Master Contract with various providers in the total amount not-to-exceed \$469,229.00 for Coordinated Entry expansion services in connection with the Continuum of Care program for the period 11/1/2023-1/31/2025.
- b) Recommending an award and enter into a Master Contract with various providers in the total amount not-to-exceed \$469,229.00 for Coordinated Entry expansion services in connection with the Continuum of Care program for the period 11/1/2023-1/31/2025.
  - 1) Contract No. 3984 with Mental Health Services for Homeless Persons dba Frontline Service in the anticipated amount not-to-exceed \$245,250.00.
  - 2) Contract No. 3985 with United Way of Greater Cleveland in the anticipated amount not-to-exceed \$223,979.00.

Funding Source: US Department of Housing and Urban Development Coordinated Entry grant

Erin Rearden, Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, presented. There were no questions. Michael Chambers motioned to approve the item; Levine Ross seconded. Item BC2024-91 was approved by unanimous vote.

## **C. – Exemptions**

### **BC2024-92**

Department of Public Works, recommending an alternative procurement process, which will result in various award recommendations to P&P Valley View Holdings dba Boyas Excavating in the total amount not-to-exceed \$200,000.00 for disposal of clean fill for the period 2/5/2024– 2/4/2026.

Funding Source: 65% Sanitary Operating Fund and 35% Road and Bridge Fund

Thomas Pavich, Department of Public Works, presented. There were no questions. Michael Chambers motioned to approve the item; Paul Porter seconded. Item BC2024-92 was approved by unanimous vote.

## **D. – Consent Agenda**

There were no questions or comments on the Consent Agenda items. Michael Chambers motioned to approve Consent Agenda Item No. BC2024-93 through BC2024-95; Dale Miller seconded. The Consent Agenda Items were approved by unanimous vote.

### **BC2024-93**

Sheriff's Department, recommending to terminate Contract No. 348 with City of Bedford Heights for lease of the Bedford Heights Jail, located at 5661 Perkins Road, Bedford Heights for the operation of County jail facilities, transportation, housing, maintenance and general upkeep of the jail for the period 10/1/2017 – 9/30/2027, effective 1/1/2024.

Funding Source: General Fund

**BC2024-94**

Fiscal Department, presenting proposed travel/membership requests for the week of 2/5/2024:

Dept:	Department of Health and Human Services: Office of Homeless Services							
Event:	NHSDC Spring 2024 Conference – Moving Upstream: Data Alliances for Housing Stability							
Source:	National Human Data Services Consortium							
Location:	Kansas City, MO							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Nicholas Butina	4/9/2024 – 4/12/2024	\$531.00	\$138.00	\$966.38	\$40.00	\$383.70	\$2,059.08	HUD Planning Grant

\*Paid to host

\*\*Staff reimbursement

\*\*\* Airfare will be covered by a contract with the County’s Travel Vendor

Purpose:

2024 Spring National Human Data Services Consortium (NHSDC) Conference - National conference on human service data specific to homeless data collection, analysis, and administration. Each conference has slightly different agendas and courses available. Last Spring's conference had sessions on Coordinated Entry, program monitoring, reporting tools, outreach, and unsheltered data collection, and HMIS fundamentals. HMIS System Administrator was asked to co-present a session on outreach data and unsheltered data collection and the importance of implementing encampment assessments to inform that work.

Dept:	Department of Development							
Event:	2024 REMADE Circular Economy Technology Summit & Conference							
Source:	REMADE Institute							
Location:	Washington, DC							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source

Paul Herdeg	4/10/2024 – 4/11/2024	\$849.00	\$76.00	\$296.57	\$32.70	\$332.21	\$1,586.48	General Fund
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\*Paid to host

\*\*Staff reimbursement

\*\*\* Airfare will be covered by a contract with the County’s Travel Vendor

Purpose:

The REMADE Institute annual conference provides extensive learning from, and direct interaction with key Federal and Private sector leaders active in developing sustainable manufacturing practices. Participating in this conference will advance Cuyahoga County's sustainable economic development work.

**BC2024-95**

Department of Purchasing, presenting proposed purchases for the week of 2/5/2024:

**Direct Open Market Purchases**  
**(Purchases between \$5,000 - \$49,999.99 unless requiring assistance from the Department of Purchasing – See Below):**

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
24000379	(32) Auto stops for toilet fixtures in Jail I	Sheriff’s Department	Lakeside Supply Company	\$49,984.00	General Fund
24000401	(1) Chest compression system and accessories for use by the Corrections Center	Sheriff’s Department	HMS Industries, LLC	\$20,698.32	General Fund
24000407	(60) Cases for vacuum seal bags	Sheriff’s Department	Clearwater Packaging	\$12,609.58	General Fund

**Items/Services Received and Invoiced but not Paid:**

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
24000147	Emergency veterinary services for the Animal Shelter for October and November, 2023*	Department of Public Works	IDEXX Laboratories, Inc.	\$5,356.00	100% Dick Goddard Best Friends Fund
24000355	Out-of-home emergency placement services for the period 10/1/2023 – 10/31/2023**	Division of Children and Family Services	Advantage Family Outreach & Foster Care	\$12,927.00	66% Health and Human Services Levy Fund and 34% Title IV-E Reimbursement Fund



\*Approval No. BC2023-453 dated 7/17/2023, which approved an alternative procurement process, which will result in purchase orders to various providers in the total amount not-to-exceed \$400,000.00 for medical, surgical and animal care services for the period 7/1/2023 – 6/30/2024.

\*\*Approval No. BC2023-561, dated 9/5/2023, which amended Approval No. BC2022-767, dated 12/12/2022, which approved an alternative procurement process and exemption from aggregation on various purchase orders, which will result in various award recommendations to various licensed providers in the total amount not-to-exceed \$250,000.00 for reimbursement for out-of-home care placement services for the period 12/1/2022 – 12/31/2024, by changing the amount not-to-exceed amount from \$250,000.00 to \$500,000.00.

## **V- OTHER BUSINESS**

### **Item of Note (non-voted)**

#### **Item No. 1**

Department of Workforce Development, submitting an amendment to a Memorandum of Understanding with Local Workforce Area 3 partners to define the terms, roles responsibilities, and funding commitments the parties have negotiated and mutually agreed upon for the operation and funding of the local area Workforce Development System and the OhioMeansJobs Centers in Local Area 3 for the period 7/1/2023-6/30/2025; to add a required partner, and to change the terms of Attachment A and Budget Allocation, effective 7/1/2023.

Funding Source: N/A

#### **Item No. 2**

Department of Health and Human Services/Division of Senior and Adult Services, submitting a grant agreement with Western Reserve Area Agency on Aging in the amount not-to-exceed \$21,367.90 for the HOME Energy Assistance Program for the period 9/1/2023 - 8/31/2024.

Funding Source: SFY 2024 HOME Energy Assistance Program (HEAP) Outreach Grant

#### **Item No. 3**

Department of Health and Human Services/Division of Senior and Adult Services, submitting a grant award from Ohio Department of Aging in the amount of \$3,896,263.00 in connection with the Healthy Aging Grant Program for the period 10/1/2023 – 9/30/2024.

Funding Source: Ohio Department of Aging

#### **Item No. 4**

Cuyahoga County Law Library, requesting authority to submit a grant application to the Statewide Consortium of County Law Library Resources Boards to receive a 25% credit off of the 2% dues, which are due to the Consortium for FY2024 dues.

Funding Source: Statewide Consortium of County Law Library Resources Board

**VI – PUBLIC COMMENT**

There was no public comment.

**VII – ADJOURNMENT**

Michael Chambers motioned to adjourn; Paul Porter seconded. The motion to adjourn was unanimously approved at 11:21 a.m.

**Item Details as Submitted by Requesting Departments**

**IV. Contracts and Awards**

**A. – Tabled Items**

**B. – New Items for Review**

**BC2024-96**

Title	Public Works/ Softerware, Inc./Purchase Order/RQ 13882/DonorPerfect Subscription Renewal for the County Animal Shelter
Department or Agency Name	Department of Public Works
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council’s Journal Date	Approval No.
O	24000334	Softerware Inc.	2-10-2024 – 2-09-2025	\$5861.10	Pending	Pending

<p>Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase.          Public Works is requesting approval of a purchase order, per the chart above, to secure the renewal of DonorPerfect Subscription Renewal for the County Animal Shelter.</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement          Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3):          The goal is to secure the renewal of the DonorPerfect Software Subscription, which is on IT’s Standards, for the Animal Shelter which helps manage donations, contacts, receipting, reporting, email and fund-raising initiatives from a single system.</p>
<p>If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No</p>

<p>In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)</p>	
<p>Vendor Name and address:          Softerware, Inc.          601 Office Center Drive, Suite 200          Fort Washington, PA 19034</p>	<p>Owner, executive director, other (specify):          Dr. Nathan Relles, President</p>

Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process.  The DonorPerfect Software from Softerware, Inc. is an existing software system that's been in place for several years. This is a renewal of the subscription through a purchase order to ensure there are no gaps in service.
	*See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase  <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment ( <i>list original procurement</i> )  <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input checked="" type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source.

100% Kennel Operating Funds (PW280100)

Is funding for this included in the approved budget?  Yes  No (if "no" please explain):

Payment Schedule:  Invoiced  Monthly  Quarterly  One-time  Other (please explain):

Provide status of project.

New Service or purchase  Recurring service or purchase

Is contract late  No  Yes, In the fields below provide reason for late and timeline of late submission

Reason: There were delays in getting required documents aligned and ready for submission on time.

Timeline: Project/Procurement Start Date (date your team started working on this item):	1.9.24 RQ released from department
Date documents were requested from vendor:	All required documents were in department files
Date of insurance approval from risk manager:	n/a
Date Department of Law approved Contract:	n/a
Date item was entered and released in Infor:	1.28 submitted to DoP for approval; 1.31 OnBase was entered

Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: Slight delay receiving signed justification and Purchasing Analyst was absent for two days.

If late, have services begun?  No  Yes (if yes, please explain) Vendor will allow the use of the program and will wait for this purchase order

Have payments be made?  No  Yes (if yes, please explain)

HISTORY (see instructions):						
Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	23000478 EXMT	Softerware Inc.	2-10-2023 – 2-09-2024	\$5,679.36	2/27/2023	BC2023-106

**BC2024-97**

Title	Cedar Pt. Rd. Bridge AMD #3
Department or Agency Name	Public Works
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue <input type="checkbox"/> Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	1126	Union Industrial Contractors, Inc.	N/A	\$3,055,480.60	May 11 <sup>th</sup> , 2021	R2021-0114
A-1	1126	Union Industrial Contractors, Inc.		\$2,026.85	June 21 <sup>st</sup> , 2022	Item No. 4
A-2	1126	Union Industrial Contractors, Inc.		\$2,274,161.73	May 23 <sup>rd</sup> , 2023	R2023-0134
A-3	1126	Union Industrial Contractors, Inc.		\$208,161.43	PENDING	

Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input checked="" type="checkbox"/> Existing service or purchase.
“The project consisted of rehabilitation of the existing structure over the Rocky River by replacing the bridge deck, sidewalks, railings and exterior beams, patching the interior beams and substructures, replacing the approach slabs and realigning the adjacent roadway.”
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of?
Project Goals, Outcomes or Purpose (list 3): See above
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
Union Industrial Contractors, Inc. 1800 East 21 <sup>st</sup> Street Ashtabula, OH 44004	Ryan Cochran
Vendor Council District: N/A	Project Council District: 11

If applicable provide the full address or list the municipality(ies) impacted by the project.	
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COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input checked="" type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal      Closing Date:	Provide a short summary for not using competitive bid process.  *See Justification for additional information.
The total value of the solicitation: \$3,055,480.60	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) 8 / 5	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): (10% ) DBE ( ) SBE ( 17% ) MBE ( 10% ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting (   ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, <i>please explain</i> : We accepted the lowest bid.	<input type="checkbox"/> Government Purchase  <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?  We accepted the lowest bid.	<input checked="" type="checkbox"/> Contract Amendment ( <i>list original procurement</i> )  <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant ( <i>No acronyms i.e. HHS Levy, CDBG, etc.</i> ). Include % if more than one source. <ul style="list-style-type: none"> <li>The additional costs added in this amendment are 100% Cuyahoga County Road &amp; Bridge</li> </ul>
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: N/A	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions): See chart above

The majority of the increased and new items are associated with the one-year delay experienced while the project was redesigned. The Home and Field Overhead are contractually required to be paid for the delay. Much of the costs on this amendment were associated with remobilization, clean up and repairs to the site, especially the causeway in the river, after the project resumed.

**BC2024-98**

Title	Public Works-Master Contract Amendment- Road & Bridge Parts and Supplies
Department or Agency Name	Public Works-Road & Bridge
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
(O)		Various Vendors-see below		\$400,000.00	03/13/2023 (original vendor approval)	BC2023-160 (original vendor approval)
	3192	Crown Cleaning Systems & Supply, Inc. dba Crown Cleaning Systems		\$50,000.00		
	3195	LumberOne Supply, LLC		\$50,000.00		



	3196	PPG Architectural Finishes, Inc.	\$50,000.00			
	3197	SiteOne Landscape Supply	\$50,000.00			
	3198	The Chas E. Phipps Company	\$200,000.00			
(A-1)		Amending various contracts as listed-no additional funds	Execution through 3/13/25	\$400,000.00	Pending	Pending
	3963	Carr Brothers, Inc .	\$280,000.00			
	3964	W.W. Grainger	\$20,000.00			
	3965	Hilti, Inc.	\$15,000.00			
	3967	Industrial Safety Products, Inc.	\$15,000.00			
	3968	The Sherwin Williams Company	\$25,000.00			
	3969	Stoneco, Inc. dba Allied Corporation	\$45,000.00			

Service/Item Description (include quantity if applicable). Indicate whether  New or  Existing service or purchase.  
This amendment will add (6) additional vendors totaling \$400,000.00 to an already existing master contract for the Public Works Road & Bridge Division. The contract provides as-needed materials and equipment used in the maintenance of County roads and bridges.

For purchases of furniture, computers, vehicles:  Additional  Replacement  
Age of items being replaced: \_\_\_\_\_ How will replaced items be disposed of? \_\_\_\_\_

Project Goals, Outcomes or Purpose (list 3):  
-qualify additional vendors to be added to current Master Contract that can provide required materials on an as-needed basis.

If a County Council item, are you requesting passage of the item without 3 readings.  Yes  No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address:	Owner, executive director, other (specify):
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input checked="" type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: 08/07/2023	Provide a short summary for not using competitive bid process. <p style="text-align: center;">NA</p> *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) 34/9	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .  NA	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :  NA	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?  NA	<input checked="" type="checkbox"/> Contract Amendment ( <i>list original procurement</i> ) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant ( <i>No acronyms i.e. HHS Levy, CDBG, etc.</i> ). Include % if more than one source.  Road & Bridge Funds
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: NA	
Timeline: Project/Procurement Start Date (date your team started working on this item):	5.16.23
Date documents were requested from vendor:	9.1.23
Date of insurance approval from risk manager:	6.9.23
Date Department of Law approved Contract:	11.1.23
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions): see chart above

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
Carr Brothers, Inc. 7177 Northfield Rd. Bedford, Ohio 44146	Michael Carr, President
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
WW Grainger, Inc. 1035 Valley Belt Rd. Brooklyn Heights, Ohio 44131	Jeremy Loder, Account Manager
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
Hilti Inc. 5350 Transportation Blvd., Ste.3 Garfield, Ohio 44125	Kristen Cappelli, Account Manager
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
Industrial Safety Products, Inc. 6091 Carey Drive #1 Cleveland, Ohio 44125	Joseph Miller, Account Manager
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
The Sherwin Williams Company 2402 E. 24 <sup>th</sup> Street Cleveland, Ohio 44114	Brian Conroy, Account Manager
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
Stoneco Inc., dba Allied Inc. 8920 Canyon Falls Blvd., Suite 120 Twinsburg, Ohio 44087	Ryan Antrom, Account Manager

Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
Crown Cleaning Systems & Supply, Inc. 7720 Harvard Avenue Cleveland, Ohio	James W. Crowe, Sales Representative
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
LumberOne Supply 4800 Van Epps Brooklyn, Ohio 44131	Heather Husak, Managing Member
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
PPG Architectural Finishes 7580 Northcliffe Ave., Suite 900 Brooklyn, Ohio 44144	Ken Cassel, Account Development Manager
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
SiteOne Landscape Supply 1354 Lear Industrial Parkway Avon, Ohio 44011	Matthew Rudnik, Branch Manager #492
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
The Chas E. Phipps Company 4560 Willow Parkway Cleveland, Ohio 44125	Ben Brown, President
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

**BC2024-99**

Title	Public Works: MRI Software LLC, Contract Amendment (fka)CM840 – CM4126 Prolease Real Estate Software
Department or Agency Name	Public Works
Requested Action	<input type="checkbox"/> Contract <input checked="" type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	(fka) 840	MRI	11/1/2020-10/31/2023	\$22,000.00	10/5/2020	BC2020/554
A-1	4126	MRI Software LLC,	11/1/2023-10/31/2024	\$9,978.52	Pending	Pending

Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input checked="" type="checkbox"/> Existing service or purchase. Requesting approval of an Amendment to extend the contract from 11/1/2023 – 10/31/2024
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of?
Project Goals, Outcomes or Purpose (list 3): Primary goal is to effectively manage and maintain over 50 building leases. Prolease will allow the Public Works to track leases, owned properties and tenants as well as provide document management, critical date email alarms and run standard and custom reports.
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
MRI Software LLC (“MRI”) 28925 Fountain Parkway Solon, OH 44139	Kaitlyn Naivar / Acct Manager
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input checked="" type="checkbox"/> Informal <input type="checkbox"/> Formal      Closing Date: _____	Provide a short summary for not using competitive bid process.  *See Justification for additional information.
The total value of the solicitation: _____	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received)    /    _____	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting (    ).
	<input type="checkbox"/> Government Purchase

Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input checked="" type="checkbox"/> Contract Amendment ( <i>list original procurement</i> )
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant ( <i>No acronyms i.e. HHS Levy, CDBG, etc.</i> ). Include % if more than one source.	
General Fund	
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):	
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):	

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: Back and forth with our law department and the vendor's law working on terms and conditions.	
Timeline: Project/Procurement Start Date (date your team started working on this item):	8/30/2023 - started conversations with vendor
Date documents were requested from vendor:	9/6/2023 – acknowledged creating Amendment
Date of insurance approval from risk manager:	12/15/2023 emailed law-law responded 1/2/24
Date Department of Law approved Contract:	12/13/2023
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: 10/10/2023-12/13/2023-vendor's law and the County's law back & forth working on terms & conditions. Waiting on COI from vendor 1/2/24	



If late, have services begun? <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes (if yes, please explain)
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)

HISTORY (see instructions):

**BC2024-100**

Title	Cuyahoga County Airport Street Lighting Replacement
Department or Agency Name	Public Works
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
Original	4035	Lakeland Electric Inc.	N/A	\$124,235.00		

Service/Item Description (include quantity if applicable). Indicate whether  New or  Existing service or purchase. Along, Curtiss Wright Parkway in Richmond Hts, Ohio. fix/ replace Poles /luminaires and pole base where required.

For purchases of furniture, computers, vehicles:  Additional  Replacement  
 Age of items being replaced: \_\_\_\_\_ How will replaced items be disposed of? N/A

Project Goals, Outcomes or Purpose (list 3): SEE ABOVE DESCRIPTION

If a County Council item, are you requesting passage of the item without 3 readings.  Yes  No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address:	Owner, executive director, other (specify):
Lakeland Electric Inc. 5350 Grant Ave, Cleveland, Ohio 44125	Owner Greg Vittardi
Vendor Council District:	Project Council District:
District 7 and 8	District 11

If applicable provide the full address or list the municipality(ies) impacted by the project.	City of Richmond Heights
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COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ #13204 <i>if applicable</i> <input checked="" type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process.  *See Justification for additional information.
The total value of the solicitation: \$124,235.00	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) 2/ 2	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE (5%) SBE ( 16% ) MBE (9%) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, <i>please explain. Please see attached paper work from Law Department.</i>	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain:</i>	<input type="checkbox"/> Government Purchase  <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?  Equal	<input type="checkbox"/> Contract Amendment ( <i>list original procurement</i> )  <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain. N/A	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain. N/A	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant ( <i>No acronyms i.e. HHS Levy, CDBG, etc.</i> ). Include % if more than one source. Airport Operations Fund
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if “no” please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	7/24/23
Date documents were requested from vendor:	12/11/23
Date of insurance approval from risk manager:	12/12/23
Date Department of Law approved Contract:	12/13/23
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

**BC2024-101**

Title	2024 – Workforce Development/CT Strategies – Contract # 4041 for Consulting Services
Department or Agency Name	Workforce Development
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council’s Journal Date	Approval No.
O	CM# 4041	CT Strategies	11/17/23 – 9/30/2024	88,000	Pending	Pending

Service/Item Description (include quantity if applicable). Indicate whether <input checked="" type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase.
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of? N/A
Project Goals, Outcomes or Purpose (list 3):

- Collect and understand the 5G and Broadband Technology Workforce Grant requirements.
- Identify any existing challenges with grant.
- Work with the Workforce Development Board on processes for marketing, referrals and enrolling in the trainings funded by grant.

If a County Council item, are you requesting passage of the item without 3 readings.  Yes  No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address:	Owner, executive director, other (specify):
CT Strategies LLC 16701 Larchwood Ave Cleveland, OH 44135	Catherine Tkachyk
Vendor Council District:	Project Council District:
Cleveland, OH	
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process.  *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, <i>please explain.</i>	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain:</i>  N/A	<input type="checkbox"/> Government Purchase  <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment ( <i>list original procurement</i> )

	<input type="checkbox"/> Other Procurement Method, please describe:
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Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant <i>(No acronyms i.e. HHS Levy, CDBG, etc.)</i> . Include % if more than one source. 100% Workforce Innovation Opportunity Act
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: Because the grant was awarded several months ago, time was of the essence to bring someone on board to fulfill CCWDB's commitments to the grant partners. We needed Catherine to start working as soon as possible.	
Timeline: Project/Procurement Start Date (date your team started working on this item):	11/28/23
Date documents were requested from vendor:	11/27/23
Date of insurance approval from risk manager:	11/27/23
Date Department of Law approved Contract:	11/27/23
Date item was entered and released in Infor:	12/19/23
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (if yes, please explain)      The consultant has begun to set the groundwork for how the grant will implemented.	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):
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**BC2024-102**

Title	Medical Examiner’s Office requests approval of Purchase Order No. 24000477-EXMT in the amount of \$8,213.22 to Cerilliant Corporation for order of various standard drug chemicals for use in the ME’s Toxicology Labs.
Department or Agency Name	Medical Examiner’s Office
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council’s Journal Date	Approval No.
O	24000477 -EXMT	Cerilliant Corporation		\$8,213.22		

Service/Item Description (include quantity if applicable). Indicate whether <input checked="" type="checkbox"/> New or <input type="checkbox"/> Existing service or purchase. Order for standard drug chemicals for use in the Medical Examiner’s Toxicology Labs.
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of? _____
Project Goals, Outcomes or Purpose (list 3): 1. Research & development 2. Analysis
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
Cerilliant Corporation 811 Paloma Dr. Suite A Round Rock, TX 78665	Sherri Pogue, President & CEO
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. <ul style="list-style-type: none"> <li>Requesting an exemption to ensure the labs are stocked with certified reference standard supplies and materials for day to day operations.</li> </ul> *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain.</i>	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain:</i>	<input type="checkbox"/> Government Purchase  <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment ( <i>list original procurement</i> )
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

<b>FUNDING SOURCE:</b> i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant ( <i>No acronyms i.e. HHS Levy, CDBG, etc.</i> ). Include % if more than one source. 100% General Fund
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: NA	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

**BC2024-103**

Title	Human Resources; 2024 RFP Exemption resulting in a Purchase Order with Health & Fitness Equipment Centers for the purchase of fitness equipment for the Administration Building Wellness Fitness Center in the amount of \$47,607.34
Department or Agency Name	Human Resources
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	24000428 EXMT	Health & Fitness Equipment Centers		\$47,607.34		PENDING

Service/Item Description (include quantity if applicable). Indicate whether  New or  Existing service or purchase.  
 This is an RFP Exemption that will result in a Purchase Order with Health & Fitness Equipment Centers for the purchase of fitness equipment for the Administration Building Wellness Fitness Center in the amount of



<p>\$47,607.34. This equipment will be used for a Wellness Center located at the County Administrative Headquarters Building, a location that has not had a Wellness Fitness Center in the past while other County locations have facilities for employee use. This equipment matches that in use in the other fitness centers within the County buildings.</p>	
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement          Age of items being replaced: _____ How will replaced items be disposed of? _____</p>	
<p>Project Goals, Outcomes or Purpose (list 3):          The goals of this project are to create a safe, convenient space for employees to improve or maintain their fitness, work towards Wellness Program Goals, and improve overall physical and mental health through exercise.</p>	
<p>If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	

<p>In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)</p>	
Vendor Name and address:	Owner, executive director, other (specify):
Health & Fitness Equipment Centers 35665 Curtis Blvd. Eastlake, Ohio 44095	Steve Sova, Owner
Vendor Council District:	Project Council District:
N/A	07
If applicable provide the full address or list the municipality(ies) impacted by the project.	2079 East 9 <sup>th</sup> Street, Cleveland, Ohio 44115

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
<p>RQ # <i>if applicable</i>  <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ  <input type="checkbox"/> Informal  <input type="checkbox"/> Formal Closing Date: _____</p>	<p>Provide a short summary for not using competitive bid process.            This is an RFP Exemption request. A bid was conducted in fall 2023 with three bids received. The lowest bid was evaluated extensively but determined that the equipment was unproven in a commercial environment, not available locally for a demo, and raised concerns about reliability, maintenance, and repairs. The next lowest bid was for equipment and brands already in use at the other locations. The County negotiated lower costs for the equipment than bid and expanded the scope of the Fitness Center.             *See Justification for additional information.</p>
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date

Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment ( <i>list original procurement</i> )
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant ( <i>No acronyms i.e. HHS Levy, CDBG, etc.</i> ). Include % if more than one source.  100% Wellness Fund
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project. The physical location is currently being planned and constructed by the Department of Public Works and building owner, GEIS. Once ready, the equipment will be needed to complete the project. This is expected in early spring.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	

Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):
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**BC2024-104**

Title	Renewal of Production Support Subscriptions for VMWare
Department or Agency Name	Department of Information Technology
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
	24000497 GOVP	The Ohio State University dba OARnet	02/13/2024 – 02/12/2025	\$66,697.58	PENDING	PENDING

<p>Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase.</p> <p>The Department of Information Technology plans to contract with The Ohio State University (OARnet), for February 13, 2024 – February 12, 2025 for the Renewal of Production Support Subscriptions for VMWare in the amount of \$66,697.58.</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement  Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p> <p>The Department of Information Technology requesting to renew production support subscriptions for VMWare using The Ohio State University's VMWare Virtualization Program, OARnet. By means of a partnership between the Ohio Department of Higher Education and the State of Ohio Department of Administrative Services, members of the Department of Administrative Services Cooperative Purchasing Program may purchase VMWare software licenses and support, at significantly reduced rates, under the Ohio State University and VMWare Enterprise License Agreement, administered by OARnet. The State of Ohio is utilizing an existing Ohio</p>

Revised Code as their purchase authority for VMware: ORC127.16 (D)(23). End users may reference OARnet contract #343496475.

If a County Council item, are you requesting passage of the item without 3 readings.  Yes  No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address:	Owner, executive director, other (specify):
The Ohio State University dba OARnet 1224 Kinnear Road Columbus, Ohio 43212	Kim Ferguson Account Representative
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. These subscriptions were originally purchased and maintained using this agreement. Anyone renewing software maintenance for subscriptions purchased under the Ohio State University VMware contract can only be purchased through OARnet. Over 350 Servers running critical Business functions currently run using VMware, making the support of these subscriptions vital. *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain.</i>	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain:</i>	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process

How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment ( <i>list original procurement</i> )
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input checked="" type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant ( <i>No acronyms i.e. HHS Levy, CDBG, etc.</i> ). Include % if more than one source. 100% General Fund IT100140 54020
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline:	
Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):
PO23000296 GOVP Approved BC2023-56, 1/30/2023 PO to Ohio State University dba OARNet in the amount NTE \$65,793.65 for upgrades, support and maintenance on VMWare software subscriptions for the period 2/13/2023-2/12/2024

**BC2024-105**

Title	Juvenile Courts Surface Pros
Department or Agency Name	Department of Information Technology
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
	HP STS 534354	MNJ Technologies	1.26.2024	\$6,357.00	PENDING	PENDING

Service/Item Description (include quantity if applicable). Indicate whether  New or  Existing service or purchase.

The Department of Information Technology plans to contract with MNJ Technologies Direct, for 3 Microsoft Surface Pro 8 Tablets with slim surface pro pens & keyboards in the amount of \$6,357.00.

This request is for the procurement of 3 Microsoft Surface Pro 8 Tablets with slim surface pro pens & keyboards.

For purchases of furniture, computers, vehicles:  Additional  Replacement

Age of items being replaced: \_\_\_\_\_ How will replaced items be disposed of? \_\_\_\_\_

Project Goals, Outcomes or Purpose (list 3):

The Department of Information Technology plans to contract with MNJ Technologies Direct, for 3 Microsoft Surface Pro 8 Tablets with slim surface pro pens & keyboards in the amount of \$6,357.00. For juvenile Courts.

If a County Council item, are you requesting passage of the item without 3 readings.  Yes  No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address: MNJ Technologies Direct Inc.	Owner, Executive director, other (specify): Jimmy Lochner, Account Manager
	1025 Busch Parkway Buffalo Grove, IL 60089
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal      Closing Date:	Provide a short summary for not using competitive bid process.  MNJ Technologies, Inc. is able to provide Cuyahoga County the requested hardware equipment using Ohio State Term Schedule pricing. All vendors awarded an Ohio state contract have gone through formal bidding processes and have been vetted by the State of Ohio prior to award. OH STS contract # STS 534354 expires on 12/19/2026.  All vendors awarded Ohio state term schedule contracts have completed a formal bid process and have been vetted, selected and awarded contracts by the State of Ohio. The State of Ohio has negotiated pricing for the State Term Schedule and has determined that these are fair and reasonable prices. STS # 033, Contract# 534354 effective through 12/19/2026.  *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input checked="" type="checkbox"/> State Contract, list STS number and expiration date STS # 033, Contract# 534354 effective through 12/19/2026.

	<input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment ( <i>list original procurement</i> )
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input checked="" type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development ( <i>No acronyms i.e. HHS Levy, CDBG, etc.</i> ). Include % if more than one source. 100% General Fund
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):



Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase As Needed by Department Request/Project	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
HISTORY (see instructions):	

**BC2024-106**

Title	True-Up of Infor SaaS ST Licenses and Infor WFM Platform Upgrade
Department or Agency Name	Department of Information Technology
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
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Original	674	Infor US, Inc.	10/01/2016 – 09/30/2026	23,849,601.00	10/11/2016	R2016-0141
1 <sup>st</sup> Amendment	674	Infor US, Inc.	10/01/2016 – 10/26/2026	\$0.00	02/25/2019	BC2019-150
2 <sup>nd</sup> Amendment	674	Infor US, Inc.	10/26/2026	\$426,430.62	02/10/2020	BC2020-113
3 <sup>rd</sup> Amendment	674	Infor US, Inc.	10/26/2026	\$12,000.00	06/13/2022	BC2022-359
4 <sup>th</sup> Amendment	4144	Infor US, Inc.	01/01/2023 – 12/31/2024	\$200,963.52	PENDING	PENDING
5 <sup>th</sup> Amendment	4144	Infor US, Inc.	Upon Approval – 10/26/2026	\$60,375.00	PENDING	PENDING

Service/Item Description (include quantity if applicable). Indicate whether  New or  Existing service or purchase.

4<sup>th</sup> Amendment: The Department of Information Technology plans to amend the contract with Infor to allow for additional software licenses for the ERP system from 1/1/2023 to 12/31/2024 in the amount of \$200,963.52.

5<sup>th</sup> Amendment: The Department of Information Technology plans to amend Contract No. with Infor US for MyTime WFM Platform Upgrade in the amount of \$60,375.00.

For purchases of furniture, computers, vehicles:  Additional  Replacement  
 Age of items being replaced: \_\_\_\_\_ How will replaced items be disposed of? \_\_\_\_\_

Project Goals, Outcomes or Purpose (list 3):

4<sup>th</sup> Amendment : The Department of Information Technology was working together with Infor to complete a true-up and co-terming of Infor GHR licensing in addition to updating the WFM platform. It was determined there are 939 GHR licenses and 820 BSI licenses in use.

5<sup>th</sup> Amendment: The Department of IT plans to amend contract with Infor to allow for support with the MyTime (WFM) upgrade to ensure a stable and upgradable platform going forward. This amendment will allow for professional support and assistance during the upgrade process. Infor is our current vendor for the MyTime (WFM) module and offers support per our existing contract, they are the experts in how we can upgrade our software. The MyTime software cannot be upgraded without a large time and money investment as it was implemented with multiple customizations that are not easily upgradable. Using the software vendor (Infor) to upgrade the system will allow for the County to complete the upgrade in a timely manner and make the adjustments to allow for future upgrades.

If a County Council item, are you requesting passage of the item without 3 readings.  Yes  No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address:	Owner, executive director, other (specify):
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Infor US, Inc. Lee Palmer 13560 Morris Road, Suite 4100 Alpharetta, GA 30004	President
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process.  This request is for the 4 <sup>th</sup> amendment to an already approved and current contract with Infor US, Inc.  *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase  <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input checked="" type="checkbox"/> Contract Amendment ( <i>list original procurement</i> ) Formal RFP <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input checked="" type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

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FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source. 100% General Fund IT100145 54020
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase 4 <sup>th</sup> Amendment <input checked="" type="checkbox"/> 5 <sup>th</sup> Amendment Recurring service or purchase - Licensing has been in use since January 1, 2023	Is contract late <input checked="" type="checkbox"/> No 5 <sup>th</sup> Amendment <input checked="" type="checkbox"/> Yes 4 <sup>th</sup> Amendment. In the fields below provide reason for late and timeline of late submission
Reason: 4th Amendment/ Additional Software Licenses: The Department of Information Technology was working together with Infor to complete a true-up and co-terming of Infor GHR licensing.	
Timeline: Project/Procurement Start Date (date your team started working on this item):	November 15, 2023.
Date documents were requested from vendor:	N/A – already had needed docs.
Date of insurance approval from risk manager:	Approved on January 11, 2024
Date Department of Law approved Contract:	Approved on January 11, 2024
Date item was entered and released in Infor:	January 24, 2024
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (if yes, please explain) Licensing has been in use since January 1, 2023	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions): see chart above
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**BC2024-107**

Title	Identity as a Service Software by AuthO	
Department or Agency Name	Department of Information Technology	
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):	

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.

Original	4127	Strategic Government Solutions, Inc.	02/01/2024 – 12/31/2024	\$18,400.00	PENDING	PENDING

Service/Item Description (include quantity if applicable). Indicate whether  New or  Existing service or purchase.

Department of Information Technology requesting approval of a contract with Strategic Government Solutions, Inc. for the anticipated cost of \$18,400.00.

Identity as a Service by AuthO will secure applications, protect user information and authenticate users using the highest available security will help make Cuyahoga County more resilient to threats of cyber-attack. This will be a one-year contract, 02/01/2024 – 01/31/2025.

For purchases of furniture, computers, vehicles:  Additional  Replacement  
 Age of items being replaced: \_\_\_\_\_ How will replaced items be disposed of? \_\_\_\_\_

Project Goals, Outcomes or Purpose (list 3): The primary goals of the project are to create a standards-based solution to secure applications, protect user information and authenticate users using the highest available security will help make Cuyahoga County more resilient to threats of cyber-attack. : Implementing a third-party identity management solution and enabling powerful features will help Cuyahoga County manage how its applications authenticate in a secure, seamless, and consolidated manner. Valuable development hours can go back to writing business logic instead of being spent building authentication. The time dedicated to testing and security for authentication can also be returned to core app work. Integrating and mapping identity providers is time-consuming and can be painful. With an third-party identity management solution, these integrations are already built and provided. By leveraging SDKs during application development, additional coding needed to integrate the authentication system will not be necessary. Cuyahoga County’s application development, security and engineering teams can focus on configuration rather than coding and customizing. Because third-party identity management solutions adhere to security compliance policies and certifications, storing data with a third-party identity management solution strengthens security. The solution takes on the responsibilities of keeping user data stored and transported securely. In addition, third-party identity management solutions provide federated identity so that users don’t engage in bad practices like reusing the same password to avoid having to remember multiple login credentials.

If a County Council item, are you requesting passage of the item without 3 readings.  Yes  No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address: Strategic Government Solutions, Inc.	Owner, executive director, other (specify):
475 Metro Place South, #450 Dublin, Ohio 43017	Sankar Mangapuram, CEO
Vendor Council District:	Project Council District:

If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process.  For the original contract, an informal request for bids was conducted twice per purchasing policies and procedures, under event #3482, with only one vendor response received by Strategic Government Solutions, Inc. The vendor entered erroneous pricing and could not be awarded. Therefore, the Department of Information Technology conducted another informal request for bid under event #3567. Again, only one vendor response was received from Strategic Government Solutions. Due to system errors while converting the event to contract in Infor, DoIT submitted the original contract as an exemption. For continuity of services, this new contract is being submitted as an exemption.  *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase  <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment ( <i>list original procurement</i> )  <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval: CTO Approval

Is the item ERP related?  No  Yes, answer the below questions.

Are services covered under the original ERP Budget or Project?  Yes  No, please explain.

Are the purchases compatible with the new ERP system?  Yes  No, please explain.

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source.  
100% General Fund

Is funding for this included in the approved budget?  Yes  No (if "no" please explain):

Payment Schedule:  Invoiced  Monthly  Quarterly  One-time  Other (please explain):

Provide status of project.

<input type="checkbox"/> New Service or purchase	<input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: Waiting on required forms and signed contract from vendor for legal approval. County Legal and Okta negotiated terms and conditions between October 2023 and January 2024.		
Timeline: Project/Procurement Start Date (date your team started working on this item):	October 3, 2023	
Date documents were requested from vendor:	October 3, 2023	
Date of insurance approval from risk manager:	October 31, 2023	
Date Department of Law approved Contract:	January 22, 2024	
Date item was entered and released in Infor:	January 22, 2024	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:		
If late, have services begun? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)      Services will begin on February 1, 2024.		
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)		

HISTORY (see instructions):

Previous CM2891  
12/01/2022 – 12/31/2023  
\$28,545.00

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
Original	2891	Strategic Government Solutions, Inc.	Effective upon signatures for a period of 1 year	\$28,545.00	11/21/2022	BC2022-710

**BC2024-108**

Title	Requesting approval of a purchase order for ICAC K9 for \$15,000 from Jordan Detection K9
Department or Agency Name	Cuyahoga County Prosecutor's Office
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
0	24000415	Jordan Detection K9	2024	\$15,000.00	pending	pending

Service/Item Description (include quantity if applicable). Indicate whether  New or  Existing service or purchase.  
 Requesting approval of PO #24000415 EXMT as indicated in the chart above for the purchase of (1) electronic storage detection dog. This K9 is used by the Prosecutor's ICAC department for locating electronic equipment during the execution of a search warrant.

For purchases of furniture, computers, vehicles:  Additional  Replacement  
 Age of items being replaced: \_\_\_\_\_ How will replaced items be disposed of? \_\_\_\_\_

Project Goals, Outcomes or Purpose (list 3):  
 This dog has been trained for our specific needs and for a specific handler. The dog locates hidden electronic devices that contain information and/or images of internet crimes against children.

If a County Council item, are you requesting passage of the item without 3 readings.  Yes  No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address:	Owner, executive director, other (specify):
Todd Jordan Consulting LLC, dba Jordan Detection 1048 N Buck Creek Rd., Greenfield, IN 46140	Todd Jordan
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
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RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. Continuity of service is desired  *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain.</i>	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain:</i>	<input type="checkbox"/> Government Purchase  <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment ( <i>list original procurement</i> )  <input checked="" type="checkbox"/> Other Procurement Method, please describe: Requesting Exemption

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant ( <i>No acronyms i.e. HHS Levy, CDBG, etc.</i> ). <i>Include % if more than one source.</i>  Funded 100% by FY20 ICAC Ohio Task Force Grant award #2020-AK-BX-0038
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.
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<input type="checkbox"/> New Service or purchase	<input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:		
Timeline: Project/Procurement Start Date (date your team started working on this item):		
Date documents were requested from vendor:		
Date of insurance approval from risk manager:		
Date Department of Law approved Contract:		
Date item was entered and released in Infor:		
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:		
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)		
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)		

HISTORY (see instructions):
The ICAC Unit first obtained an investigative K9 in 2017 as a donation. The dog is now retired. We wish to purchase a new K9 for the unit but keep the continuity of service with the original trainer that has worked with our K9 handler for the last 7 years.

**BC2024-109**

Title	2024 GEAUGA COUNTY; EXEMPTION FOR NOT-TO-EXCEED PURCHASE ORDER FOR PRISONER BOARD AND CARE SERVICES
Department or Agency Name	SHERIFF'S- CORRECTIONS
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	24000280	GEAUGA COUNTY	1/1/24 – 12/31/24	\$450,000.00		

Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase. The Cuyahoga County Sheriff's Department (CCSD) is requesting approval for a Not-To-Exceed (NTE) purchase order (PO) exemption to Geauga County Sheriff's Department through December 31, 2024. The NTE PO will be for prisoner board and care (PB&C) services provided to the Cuyahoga County inmates on an as needed basis
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when the Cuyahoga County jail's Average Daily Population (ADP) needs to be reduced. The amount will not exceed a total of \$450,000.00.
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of?
Project Goals, Outcomes or Purpose (list 3): The primary goal of the project is to continue offsite prisoner board and care services provided by Geauga County Sheriff's Department pursuant to Ohio Revised Code (ORC) 341.12 through December 31, 2024. The daily rate per inmate shall not exceed rates established by ORC 341.12.
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
Geauga County Sheriff's Department 12450 Merritt Drive Chardon, Ohio 44024	Kathy Rose, Jail Administrator
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process.  *See Justification for additional information.
The total value of the solicitation: _____	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) / _____	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase  <input type="checkbox"/> Alternative Procurement Process

How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment ( <i>list original procurement</i> )
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant ( <i>No acronyms i.e. HHS Levy, CDBG, etc.</i> ). Include % if more than one source. 100% General Fund
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: This will cover changes for January-December, but we have not been billed as of today. The item was also returned due to the expired law wavier and there was some research done by law regarding the insurance requirements but that has since been resolved.	
Timeline: Project/Procurement Start Date (date your team started working on this item):	1/12/24
Date documents were requested from vendor:	N/A
Date of insurance approval from risk manager:	N/A
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	1/12/24
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: N/A	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):
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Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	22000721	Geauga County	1/31/2022- 12/31/2023	\$275,000	1/31/2022	
A	23001624	Geauga County	3/29/2023- 12/31/2023	\$90,000	3/29/2023	
A	23002472	Geauga County	5/17/2023- 12/31/2023	\$175,000	5/17/2023	
A	23004222	Geauga County	9/18/2023- 12/31/2023	\$125,000	9/18/2023	

**BC2024-110**

Title	Surveillance Equipment for Human Trafficking Unit	
Department or Agency Name	Sheriff	
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue <input checked="" type="checkbox"/> Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):	

Original (O)/ Amend ment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
	24000481 EXMT	Pro-Tech Security Sales		\$10,676.00		

<p>Service/Item Description (include quantity if applicable). Indicate whether <input checked="" type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase.          The Sheriff's Department is requesting to purchase surveillance equipment for the Human Trafficking Division</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement          Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3):          The recording/surveillance equipment requested will allow the Northeast Ohio Human Trafficking Task Force (NOHTTF) to gather evidence on suspected Criminal Targets which will ultimately assist the prosecution phase of the investigation. Inherent to human trafficking investigations, the NOHTTF routinely encounters armed and violent individuals during the course of our duties. We routinely conduct knock and talks with suspects and execute consent/search warrants. The ballistic shield will provide the NOHTTF Investigators with an added layer of safety that can be easily transported and deployed as needed.</p>
<p>If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No</p>

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address: Pro-Tech Security Sales 1313 West Bagley Rd Berea, OH 44017	Owner, executive director, other (specify): Eric Drellishak, President
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process.  *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment ( <i>list original procurement</i> ) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval: 1/25/2024
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	

Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source.
FY23 Senator Brown’s Congressionally Directed Spending (CDS) Request for FY 2023 (Human Trafficking)
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if “no” please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):
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**BC2024-111**

Title	CORRECTIONS TRAINED SERVICE CANINES 1-4
Department or Agency Name	SHERIFF’S
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	4134	EXCEL K9 SERVICES	2/15/24 – 2/15/25	47,200		

Service/Item Description (include quantity if applicable). Indicate whether  New or  Existing service or purchase.  
 This is a request to purchase the first 4 trained canines for the Corrections Department.

For purchases of furniture, computers, vehicles:  Additional  Replacement  
 Age of items being replaced: \_\_\_\_\_ How will replaced items be disposed of? \_\_\_\_\_

Project Goals, Outcomes or Purpose (list 3):  
 Purchase the first four trained canines that will be used within the Corrections Department.

If a County Council item, are you requesting passage of the item without 3 readings.  Yes  No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address:	Owner, executive director, other (specify):
EXCEL K9 SERVICES 6465 WINCHELL RD. HIRAM, OH 44234	Laura Way, Sales Rep
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. Excel K9 has been the k9 vendor for the Sheriff's Office for approximately 3 years.  *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date



Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment ( <i>list original procurement</i> )
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant ( <i>No acronyms i.e. HHS Levy, CDBG, etc.</i> ). Include % if more than one source. General Fund	
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):	
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):	

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: n/a	
Timeline: Project/Procurement Start Date (date your team started working on this item):	12/21/23
Date documents were requested from vendor:	12/22/23
Date of insurance approval from risk manager:	1/16/24
Date Department of Law approved Contract:	1/16/24
Date item was entered and released in Infor:	1/23/24
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: n/a	

If late, have services begun? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)

HISTORY (see instructions):						
Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	1652	EXCEL K9 SERVICES	9/13/21- 3/31/22	13,800	7/26/21	BC2021-385

**BC2024-112**

Title	Mettler Toledo, LLC LabX Software Licenses and Service
Department or Agency Name	Public Safety & Justice Services on behalf of the Medical Examiner's Office
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	24000294	Mettler Toledo, LLC	N/A	\$48,669.00	Pending	Pending

<p>Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase.</p> <p>Requesting approval of a purchase order with Mettler-Toledo, LLC for LabX Product Software Licenses and Software Service Plan in the amount of \$48,669.00.</p> <p>The LabX Product Software Licenses and Software Service Plan (Complete Package) is being purchased to process drug chemistry casework to increase throughput capacity and decrease casework backlog through the use of precise measuring software instrumentation used to determine the mass and weights of small forensic samples with a high degree of accuracy and precision required for the Cuyahoga County Regional Forensic Science Laboratory – Drug Chemistry Unit. The LabX Product Software Licenses and Software Service Plan are only provided by and can only be purchased from Mettler-Toledo, LLC, and there are no resellers.</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p> <p>Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p> <ol style="list-style-type: none"> <li>1. Increase the throughput capacity of the CCRFSL Drug Chemistry Laboratory;</li> </ol>

<p>2. Increase the efficiency and compatibility with the existing CCRFSL LabX laboratory software to automate multi-parameter workflows;</p> <p>3. Provides validation to perform high-level automated processing and analyses of drug chemistry samples that meet ISO certification requirements.</p>
<p>If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>

<p>In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)</p>	
Vendor Name and address:	Owner, executive director, other (specify):
Mettler-Toledo, LLC 1900 Polaris Parkway Columbus, OH 43240-4035	Patrick Kaltenbach, Chief Executive Officer
Vendor Council District:	Project Council District:
All	All
If applicable provide the full address or list the municipality(ies) impacted by the project.	All municipalities of Cuyahoga County.

<p><b>COMPETITIVE PROCUREMENT</b></p> <p>RQ # <i>if applicable</i></p> <p><input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ</p> <p><input type="checkbox"/> Informal</p> <p><input type="checkbox"/> Formal Closing Date:</p>	<p><b>NON-COMPETITIVE PROCUREMENT</b></p> <p>Provide a short summary for not using competitive bid process.</p> <p>CCRFSL currently utilizes the Mettler-Toledo balance equipment and related systems. This purchase is the only platform that is compatible with other related software platforms used by the CCRFSL and expands the system capacity for the Drug Chemistry Laboratory. The Mettler-Toledo LabX Product Software Licenses and Software Service Plan (Complete Package) are only provided by and can only be purchased from Mettler-Toledo, LLC, and there are no resellers.</p> <p>*See Justification for additional information.</p>
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .  Procurement is Sole Sourced.	<input checked="" type="checkbox"/> Sole Source <input checked="" type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting 0.

Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :  Procurement is Sole Sourced.	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?  No other comparable pricing has been received because this is a sole-source procurement.	<input type="checkbox"/> Contract Amendment ( <i>list original procurement</i> )
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant ( <i>No acronyms i.e. HHS Levy, CDBG, etc.</i> ). Include % if more than one source. ARPA Crime Lab Backlog Grant 100%.	
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):	
Payment Schedule: <input type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):	

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline:	
Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

**BC2024-113**

Title	Department of Health and Human Services/Cuyahoga Job and Family Services; CJFS 2024: Biometric Information Management Mobile Fingerprinting	
Department or Agency Name	Department of Health and Human Services/Cuyahoga Job and Family Services	
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):	

Original (O)/Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name:	Time Period	Amount:	Date BOC Approved/Council's Journal Date	Approval No.
O	24000476	Biometric Information Management		\$7,000.00	Pending	pending

Service/Item Description (include quantity if applicable). Indicate whether  New or  Existing service or purchase. Complete National WebCheck system including hardware and software to submit flat fingerprint images electronically to both FBI and BCI. Includes mag-stripe reader for Ohio Drivers' license or Ohio ID Card. Also, included weatherproof rolling case.

For purchases of furniture, computers, vehicles:  Additional  Replacement  
 Age of items being replaced: \_\_\_\_\_ How will replaced items be disposed of? This is a replacement for an outdated machine that will no longer hold a charge. The agency plans to retain the existing machine until the new one is fully operational. Following that, the old machine must be held for a period of one year from the last print for record retention purposes.

Project Goals, Outcomes or Purpose (list 3):  
 The primary goal for the new fingerprinting machine is to significantly improve efficiency and reliability in processing. This means faster scanning times, higher accuracy in capturing fingerprints, and reduced downtime due to technical issues. This goal will ensure that the high volume of fingerprinting required by various departments, especially during peak hiring periods, is managed smoothly and effectively.  
 Extended Functionality for Diverse Requirements: The machine will cater to the diverse needs of different departments within the county. This includes the ability to integrate with HR for new hires, compatibility with legal and regulatory requirements for OCSS Notaries and CJFS Child Care Day Care License processing, and adaptability for use in different locations, such as off-site HR events. The goal is to have a versatile machine that can be utilized across multiple scenarios and applications.

If a County Council item, are you requesting passage of the item without 3 readings.  Yes  No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address: Biometric Information Management LLC 6059 Frantz Road, Suite 102 Dublin, OH 43017	Owner, executive director, other (specify): The seller administrator for the contractor/vendor is Brianna Smith
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process.  *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input checked="" type="checkbox"/> State Contract, list STS number and expiration date 534422 expiring 06/30/2025 <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment ( <i>list original procurement</i> ) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input checked="" type="checkbox"/> Check if item on IT Standard List of approved purchase. Page 29	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	

Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, please explain. This is separate item
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, please explain. This is a separate item

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source. 50% Health and Human Services Levy and 50% State and Federal Reimbursement.
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):
-----------------------------

**C.- Exemptions**

**BC2024-114**

Scope of Work Summary:

Department of Public Works is requesting approval to utilize alternative procurement methods for future RFP #13923 for On-Call Sanitary Pump Station Repair & Constructions Services. The anticipated start-completion dates will be from the date of contract execution for a period of three years for a maximum of three contractors for a total of \$1,500,000.

The primary goal of this contract will be to conduct a competitive RFP process to select a maximum of three contractors that are County eligible for On-Call Sanitary Pump Station Repair & Construction

Services. Projects will be on a task-order basis for less than \$300,000 in estimated value. DPW would like to conduct a mini-bid process for each task with the contractors selected for this RFP and to then select the contractor with the lowest and best bid using County bid line items.

The location is various Sanitary Pump Stations within Cuyahoga County. The projects can be located in various Council Districts.

**Procurement**

The procurement method for this project will be RFP #13923. The total value of the RFP is not to exceed \$1,500,000.

There is a TBD% SBE goal with this Agreement.

**Project Status & Planning**

Alternative Procurement has been approved for similar On-Call DPW contracts. (BC2022-536)

**Funding**

The project is funded by 100% Sanitary funds. (PW715200-55130)

The schedule of payments would be by monthly invoice.

**D. - Consent Agenda**

**BC2024-115**

Department of Public Works, recommends to declare approximately 296 UPS (Uninterruptible Power Supply) batteries as valueless and as surplus County-owned property, no longer needed for public use. The department is requesting authority to discard/recycle stated materials through a vendor (A1 Battery Shop) that will pay the County a minimal value for the used batteries, in accordance with Ohio Revised Code Section 307.12(l).

Funding Source: Not Applicable / Revenue Generating

Department of Public Works – Marked for Disposal – January 2023

Description	Quantity	Condition	Approximate Age
Battery (Duracell 225 WPC – Lead Acid – Unit weight approximately 41.18 lbs. x 6 = 247.08 total lbs.)	6	Used	13 years
Battery (CSB HRL 12200W FR – Lead Acid – Unit weight approximately 38.1 lbs. x 116 = 4,419.6 total lbs.)	116	Used	13 years
Battery (CSB GP1240 – Lead Acid – Unit weight approximately 28.48 lbs. x 174 = 4,955.52 total lbs.)	174	Used	13 years

**BC2024-116**

**Scope of Work Summary**

Department of Purchasing, declaring various property as surplus County property no longer needed for public use; recommending selling *a large international brand truck with trailer* to the Board of Park



Commissioners of the Cleveland Metropolitan Park District. The anticipated start-completion dates will be fifteen days after BOC approval.

The primary goal of the project is to sell said property for \$170,000.00 via direct negotiation with the Board of Park Commissioners of the Cleveland Metropolitan Park District. Representatives from Cleveland Metro Parks came and inspected the property before the sales price was agreed. The Department of Public Works estimated the current market price assessment for the property. The property was purchased in 2020 with non-Grant funds and the revenue will be deposited back to the County's Road & Bridge fund. The surplus list (Exhibit "A") is attached.

The project is mandated by the Ohio Revised Code, Section 307.12(E).

#### Procurement

There is no procurement method for this project. This is a revenue generating project.

The items (Exhibit A) will be sold directly to the Board of Park Commissioners of the Cleveland Metropolitan Park District. 100% of the revenue will be deposited to the County's Road & Bridge fund.

#### Project Status and Planning

The Ohio Revised Code permits the sale of surplus property to other government entities.

The project planning has four (4) phases. Request approval to declare the item as surplus. Sell to Cleveland Metro Parks; Collect payment from Board of Park Commissioners of the Cleveland Metropolitan Park District, transfer assets to Buyer upon confirmation of payment; Deposit the funds into the appropriate County agency fund.

#### Funding

There is no cost for this process. The project is a revenue generating project.

### **BC2024-117**

#### Scope of Work Summary

Department of Purchasing, declaring various property as surplus County property no longer needed for public use; recommending selling said property via internet auction, in accordance with Ohio Revised Code Section 307.12(E). via GovDeals Inc. The anticipated start-completion dates will be fifteen days after BOC approval.

The primary goal of the project is to sell said property via internet auction, to the highest bidder through GovDeals. The auction surplus list (Exhibit "A") is attached.

The project is mandated by the Ohio Revised Code, Section 307.12(E).

#### Procurement

There is no procurement method for this project. This is a revenue generating project.

The items listed below will be sold to the highest bidder; 12.5% of the total purchase price will be paid to GovDeals as a Buyer Premium by the Buyer and the department will realize 100% profit of the item sold, in accordance with the GovDeals contract.

Item	Item Description
Ansul System	Model T-1000A; good condition
ADB Safegate	Model PAPI/REIL lights; Serial/Vin #GST 0058; good condition

**Project Status and Planning**

The project reoccurs when County departments have surplus property or seized vehicles no longer needed and recommends selling the property via the internet.

The project planning has four (4) phases. Request Executive's approval to list the item on GovDeals; List & Sell to the highest bidder nationwide; Collect payment from GovDeals and transfer asset to Buyer upon confirmation of payment; Deposit the funds into the appropriate County agency fund.

**Funding**

There is no cost for this process. The project is a revenue generating project.

**BC2024-118**

Department of Information Technology, recommending to declare excess County computers and IT Equipment as surplus County-owned property, no longer needed for public use; requesting authority to sell surplus property to Info@Ret3.org. for a fee in the amount of \$1.00 in accordance with EA02012-0001.

Funding Source: Revenue Generating

Agency: Department of IT

Sale of property to:

Info@Ret3.org

1814 E. 40th Street

Cleveland, Ohio 44103

Kenny Kovach-Director

R.E.T.3 Marked for Disposal - 1/17/2024 - From IT Workroom

<u>Asset Tag</u>	<u>Serial Number</u>	<u>Manufacturer</u>	<u>Model/Device</u>
77474	2UA2501KJV	HP	Z220 SFF Workstation
79711	2UA4351M9C	HP	Z230 SFF Workstation
79641	2UA4351N7X	HP	Z230 SFF Workstation
80647	2UA4291FFR	HP	Z230 SFF Workstation
84099	2UA5471L5S	HP	Z230 SFF Workstation
78887	2UA3020799	HP	Z220 SFF Workstation
71555	2UA0380GJF	HP	Compaq 6005 Pro Microtower
64913	CNC841PD2Y	HP	L1750 Monitor
78471	5CB3200V33	HP	EliteBook 8570P Laptop
78824	5CB3200NJX	HP	EliteBook 8570P Laptop
80563	CNU305B895	HP	EliteBook 8470W Laptop

80568	CNU305B88C	HP	EliteBook 8470W Laptop
80564	CNU305B889	HP	EliteBook 8470W Laptop
80552	CNU305B89H	HP	EliteBook 8470W Laptop
80567	CNU305B86N	HP	EliteBook 8470W Laptop
80571	CNU305B88M	HP	EliteBook 8470W Laptop
80558	CNU305B864	HP	EliteBook 8470W Laptop
80549	CNU305B88Q	HP	EliteBook 8470W Laptop
80560	CNU305B86X	HP	EliteBook 8470W Laptop
80570	CNU305B86B	HP	EliteBook 8470W Laptop
90971	5CG843WH26	HP	UltraSlim Docking Station
92887	5CG043261R	HP	EliteBook 850 G6 Laptop
79736	3CQ44212FT	HP	ProDisplay P221 Monitor
77335	CN425003M7	HP	ZR2240w Monitor
No Tag	No Serial Number	HP	Laptop Bag
No Tag	2TK020X4ZJ	HP	UltraSlim Docking Station
No Tag	2TK024WZ5T	HP	UltraSlim Docking Station
No Tag	No Serial Number	HP	Laptop Bag

**BC2024-119**

(See related items for proposed purchases for the week of 2/12/2024 in Section D above).

**V – OTHER BUSINESS**

**Item of Note (non-voted)**

**Item No. 1**

Scope of Work Summary

The Department of Public Safety & Justice Services - Office of Emergency Management on behalf of the Local Emergency Planning Commission (LEPC) is requesting authority to submit a grant application in the amount of \$172,281.19, to the Ohio State Emergency Response Commission (SERC) for the Chemical Emergency Planning and Community Right-to-Know Fund in connection with the Ohio EPA Right to Know Program. The award dates will be 07/01/2024 - 06/30/2025.

This grant application does not include any county match funds or, any obligations that the county contract with specific external service providers or vendors.

Procurement Grant Award

Contractor and Project Information

State Emergency Response Commission  
Ohio EPA Right-To-Know Program  
50 West Town Street Suite #700  
Columbus, Ohio 43216-1049

Project Status and Planning

The project reoccurs annually to the County. The SERC grant provide emergency planning, compliance, and administrative funds for the Local Emergency Planning Committee through the Office of Emergency Management. These funds assist the Office of Emergency Management in the maintenance and review of approximately 920 Tier II reports for hazardous materials facilities in Cuyahoga County, updates to the Hazmat Emergency Response Plan, which includes Hazard Profiles of 141 Extremely Hazardous Substances (EHS) facilities and provides training funds to the Cuyahoga County Fire Chiefs' Association for hazardous materials training for emergency responders.

#### Funding

The project is funded by Ohio EPA, State Emergency Response Commission (SERC) in the anticipated amount of \$172,281.19. The amount awarded by the State is dependent upon a grant formula and the amount of revenue received annually by the SERC from regulated facilities. This program is mandated by Ohio Revised Code 3750.

This is a continuation grant, previous awards listed below:

SFY 2007 - \$113,206.00	
SFY 2008 - \$111,596.00	
SFY 2009 - \$114,617.00	
SFY 2010 - \$124,085.00	
SFY 2011 - \$121,418.00	
SFY 2012 - \$117,361.00	
SFY 2013 - \$117,361.00	
SFY 2014 - \$114,423.00	
SFY 2015 - \$115,922.00	Apply & Accept: CD2014-73
SFY 2016 - \$123,245.00	Apply & Accept: DC2015-66
SFY 2017 - \$120,074.00	Accept: CON2016-76
SFY 2018 - \$124,710.00	Apply & Accept: DC2017-02
SFY 2019 - \$135,481.00	Apply & Accept: CON2018-27
SFY 2020 - \$136,058.00	Apply: BC2019-204 Accept: CON2019-82
SFY 2021 - \$133,721.00	Apply & Accept: BC2020-0154
SFY 2022 - \$127,952.00	Apply: CON2021-11 Accept: CON2021-82
SFY 2023 - \$138,384.00	Apply: CON2022-17 Accept: CON2022-66
SFY 2024 - \$147,856.00	Apply: CON2023-15 Accept: CON2023-96

#### Item No. 2

Requesting authority to submit a grant application to the State of Ohio's Homeless Crisis Response Program. This application is for State of Ohio Housing Trust Fund funding in the amount of \$533,700.00 for rapid re-housing for homeless singles and families in Cuyahoga County for the period of 1/1/24 – 2/28/26.

Submitting grant agreement S-L-23-1DD-2 with the State of Ohio's Homeless Crisis Response Program Ohio Housing Trust Fund in the amount of \$533,700 for rapid re-housing for homeless singles and families in Cuyahoga County for the period of 1/1/24 – 2/28/26. This grant was awarded through the PY2023 Homeless Crisis Response Program application.

#### Scope of Work Summary

This award maintains rapid re-housing for homeless singles and families in Cuyahoga County. EDEN, Inc. is identified as the subrecipient in the grant agreement and will provide the services.

The primary goals identified of HCRP are to:

Prevent individuals and families from experiencing homelessness.

Rapidly move persons from emergency shelter into permanent housing when homelessness does occur

Better meet national objectives and the needs of Ohio's homeless persons

Procurement

OHS was awarded funding through the PY2023 Homeless Crisis Response Program application.

Grantor information:

Ohio Department of Development

Office of Community Development

77 South High Street, P.O. Box 1001

Columbus, Ohio 43216-1001

Subrecipient information:

Emerald Development & Economic Network, (EDEN) Inc.

7812 Madison Ave.

Cleveland, OH 44102

### **Item No. 3**

Scope of Work Summary

The Cuyahoga County Law Library ("Law Library") is seeking permission to apply for and accept a grant from the Consortium of Ohio County Law Library Resources Boards ("Consortium") in the amount of \$3,128.92 as and for the following items:

- Five (5) New Cisco 8851 Phones, including one (1) wi-fi enabled phone with 2 accessories
- Two (2) Professional Memberships in the American Association of Law Libraries (AALL):  
1 for the Law Library's Librarian & Chief Administrator, Kathleen M. Dugan; and  
1 for the Law Library's Reference Librarian, Kayla Fertig.
- Two (2) Full HD webcams;
- One (1) PaintShop Pro 2023 Ultimate software;
- One (1) PowerDirector video-editing software;
- One(1) CSS HTML Validator software;
- One (1) six-pack of headphones; and
- One (1) ONYX Postage and shipping Scale for weighing packages.

This is a new grant, but prior grants from the Consortium include: Item 7 under Items of Note (non-voted) on the 1/9/2023 BOC Agenda; Consent Item Approval No. 2023-14; Consent Item Approval No. 2023-07; Consent Item Approval No. CON2022-35; Consent Item Approval No. CON2022-02; Consent Item Approval No. CON2021-04; Consent Item Approval No. CON2021-02, BC2019-83, and Item 2 under Items of Note (non-voted) on the 1/16/2018 BOC Agenda.

The Statewide Consortium has also awarded the CLLRB other grants for other purposes such as CON2017-37, BC2018-409, Item 1 under Items of Note (non-voted) on the 6/3/2019 BOC Agenda, BC2019-102, and BC2016-384.

Proposals will be accepted through February 28, 2024.

The primary goals of the project are to:

Replace 9-year old phones that serve as a major medium of communication between staff and law library patrons.

Provide educational and networking opportunities for 2 professional librarians.

Provide enhanced communications with patrons through the Internet.

Provide new software to enhance the ability of the Law Library's Network Librarian to design marketing materials, edit videos (such as from CLE programs and book discussions), and keep the Law Library's website links up-to-date.

Provide headphones for patrons to use when they review and listen to evidence at the Law Library.

Provide a shipping scale to weigh books and other items that the Law Library needs to send through the mail.

The project is not mandated.

This project includes technology items.

#### Procurement

The procurement method for this project is a grant proposal pursuant to an RFP from the Statewide Consortium of County Law Library Resources Boards. The total value of the proposed grant is \$3,128.92.

Proposals will be accepted through February 28, 2024.

This is a grant proposal: it was not bid; it was not a sole source; and no exemption is requested.

#### Contractor and Project Information

Statewide Consortium of County Law Library Resources Boards  
369 S. High Street  
Columbus, Ohio 43215

The Executive Director for the vendor is Laura Novelo, [lnovelo@co.lucas.oh.us](mailto:lnovelo@co.lucas.oh.us)

The address or location of the project is:

Cuyahoga County Law Library  
Cuyahoga County Courthouse  
1 West Lakeside Ave., Floor 4  
Cleveland, OH 44113

The project is located in Council District 7.

#### Project Status and Planning

The project is a new grant opportunity for the CLLRB, but the Statewide Consortium has awarded optional grants in the past. See history above.

The grant has a single phase.  
This project is not on a critical action path.  
The project's term has not already begun or ended.  
Proposals will be accepted through February 28, 2024.

#### Funding

The grant is funded 100% by Statewide Consortium of County Law Library Resources Boards.

The schedule of payments is a one-time payment.

The project is not an amendment to a contract, loan, lease, grant, amendment, agreement, or other document.

#### **VI – PUBLIC COMMENT**

#### **VII – ADJOURNMENT**