Cuyahoga County Board of Control Agenda
Monday, August 3, 2026 - 11:00 A.M.
County Headquarters
2079 East Ninth Street
4th 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 – 7/27/2026

III. – PUBLIC COMMENT

IV. – CONTRACTS AND AWARDS

A. – Tabled Items

B. – New Items for Review

BC2026-389

Department of Public Works, requesting authority to apply for and accept a grant from the U.S. Department of Transportation Federal Aviation Administration in the total amount not-to-exceed $5,387,005.00 for the Taxiways Shifting Phase 2 (Construction) project at the Cuyahoga County Airport, located at 26300 Curtiss Wright Parkway, Richmond Heights in connection with the FY2026 Airport Improvement Program (AIP) Grant.

Funding Source: $5,387,005.00 in U.S. Department of Transportation Federal Aviation Administration Funds. $283,526.63 in Ohio Department of Transportation, Office of Aviation Funds. The overall project also includes $282,207.58 in Airport Operations Funds for a total project cost of $5,952,739.21

BC2026-390

Department of Public Works,

a) Submitting an RFP exemption, which will result in an award recommendation to Runway Safe Inc. in the amount not-to-exceed $125,895.00 for EMAS installations, services and repairs at the Cuyahoga County Airport located at 26300 Curtiss Wright Parkway, City of Richmond Heights.

b) Recommending an award on Purchase Order No. 26002571 to Runway Safe Inc. in the amount not-to-exceed $125,895.00 for EMAS installations, services and repairs at the Cuyahoga County Airport located at 26300 Curtiss Wright Parkway, City of Richmond Heights.

Funding Source: Airport Operating Fund

BC2026-391

Department of Public Works, submitting an amendment to Contract No. 4051 with CTL Engineering, Inc. for geotechnical services for the Central Services Campus Project on a task order basis for the period 1/3/2024 through project completion, for additional funds in the amount not-to-exceed $50,000.00, effective upon signatures of all parties.

Funding Source: General Fund

BC2026-392

Department of Public Works, submitting a Revenue Generating Agreement (via Contract No. 6337) with City of Cleveland in the amount not-to-exceed $120,000.00 for storm and sanitary sewer repair services for the period 8/14/2026 – 8/13/2028.

Funding Source: Revenue Generating

BC2026-393

Department of Information Technology, recommending an award on Purchase Order No. 26002615 to Logicalis, Inc. in the amount not-to-exceed $282,019.97 for a joint cooperative purchase for renewal of NetApp support licenses and maintenance services with various start dates between 10/1/2025 and 7/1/2026 through 7/31/2027.

Funding Source: General Fund

BC2026-394

Department of Information Technology, recommending an award and enter into a cybersecurity purchase pursuant to R.C. 9.64 via Purchase Order No. 26002668 in the amount not-to-exceed $117,420.00 through a joint cooperative contract for the period 9/25/2026 - 9/24/2027.

Funding Source: General Fund

BC2026-395

Court of Common Pleas/Juvenile Court Division, submitting an amendment to Contract No. 5053 (fka Contract No. 4131) with Legacies Empowered, Inc. for positive youth development services for Court referred youth ages 14 to 20 with high risk for recidivism for the period 7/1/2023 – 6/30/2026 to extend the time period to 6/30/2027, to update insurance requirements, and for additional funds in the amount not-to-exceed $79,548.80, effective 7/1/2026.

Funding Source: RECLAIM grant

BC2026-396

Court of Common Pleas/Juvenile Court Division, submitting an amendment to Contract No. 5125 with New Community Restorative Justice L.L.C. to provide restorative justice diversion programming services to court referred youth 14 years of age or older with pending delinquency matters for the period 7/1/2024-6/30/2026 to extend the time period to 6/30/2027, to update insurance requirements, and for additional funds in the amount not-to-exceed $44,000.00, effective 7/1/2026.

Funding Source: RECLAIM Grant

BC2026-397

Court of Common Pleas/Juvenile Court Division, submitting an amendment to Contract No. 6341 (fka Contract Nos. 5249, 5128, 4112 and 4021) with Applewood Centers, Inc. for the Multisystemic Therapy/ Multisystemic Therapy-Problem Sexual Behavior Program for adjudicated youth for the period 7/1/2023 – 6/30/2026, to extend the time period to 6/30/2027, to update the service rates, to update insurance requirements, and for additional funds in the amount not-to-exceed $236,000.00, effective 7/1/2026.

Funding Source: RECLAIM Grant

BC2026-398

Court of Common Pleas/Juvenile Court Division,

a) Submitting an RFP exemption which will result in award recommendations to various providers in the total amount not-to-exceed $414,417.51 for professional and technical services for COURT referred youth participating in the Violence Intervention Program for the period 10/1/2025 - 9/30/2027, as follows:

    1) Contract No. 5968 with Cleveland Peacemakers, Inc. in the anticipated amount not-to-exceed $66,359.04.
    2) Contract No. 5969 with P.A.L.S. For Healing in the anticipated amount not-to-exceed $37,071.87.
    3) Contract No. 5971 with Legacies Empowered, Inc. in the anticipated amount not-to-exceed $234,666.60.
    4) Contract No. 5974 with Renounce Denounce Gang Intervention Program in the anticipated amount not-to-exceed $76,320.00.

b) Submitting a Master Contract with various providers (as listed above) in the total amount not-to-exceed $414,417.51 for professional and technical services for COURT referred youth participating in the Violence Intervention Program for the period 10/1/2025 - 9/30/2027.

Funding Source: Violence Intervention Program Grant

BC2026-399

County Prosecutor's Office, recommending an award on Purchase Order No. 26002636 with MNJ Technologies Direct, Inc. in the amount not-to-exceed $11,894.00 for a state contract purchase for renewal of (760) NetApp Data Infrastructure Insights storage software subscriptions for the period 8/1/2026 – 7/31/2027.

Funding Source: General Fund

BC2026-400

Department of Public Safety and Justice Services,

a) Submitting an RFP exemption, which will result in an award recommendation to Tammy & Taylor Meredeth, LLC in the amount not-to-exceed $22,900.00 for analysis of Cuyahoga County Jail data, effective upon signatures of all parties for a period of 10 weeks.

b) Recommending an award and enter into Contract No. 6340 with Tammy & Taylor Meredeth, LLC in the amount not-to-exceed $22,900.00 for analysis of Cuyahoga County Jail data, effective upon signatures of all parties for a period of 10 weeks.

Funding Source: General Fund

BC2026-401

Department of Health and Human Services/Office of the Director,

a) Submitting an RFP exemption, which will result in a Grant Agreement (via Contract No. 6330) with Cleveland Christian Home (CCH)/The Centers' Hope Campus dba The Centers in the amount not-to-exceed $500,000.00 to support the development and operations of the HOPE Campus for the period 7/1/2025-12/31/2026.

b) Recommending an award and enter into Contract No. 6330 with Cleveland Christian Home (CCH)/The Centers' Hope Campus dba The Centers in the amount not-to-exceed $500,000.00 to support the development and operations of the HOPE Campus for the period 7/1/2025-12/31/2026.

Funding Source: Cuyahoga County Board of Developmental Disabilities

C. – Exemptions

BC2026-402

Department of Public Works, recommending an alternative procurement process, which will result in award recommendations to a maximum of (5) County-eligible and Ohio Department of Transportation pre-qualified providers in the total amount not-to-exceed $2,000,000.00 for on-call heavy construction services for various road and bridge repairs, on a task order basis, in the amount not-to-exceed $400,000.00 each, for a period of 3 years.

Funding Source: Road and Bridge Fund

D. – Consent Agenda

BC2026-403

Fiscal Department, presenting proposed travel/membership requests for the week of 8/3/2026:

Dept:	Sheriff's Department
Event:	ACA 156TH Congress of Correction-Beyond the Game Workshop
Source:	American Correctional Association (ACA) MetroHealth
Location:	Pittsburgh, PA

Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Brian Patrick Klak	7/31/2026-8/2/2026	$325.00	$0.00	$522.12	$277.30	$0.00	$1,124.42	General Fund

*Paid to host
**Staff reimbursement
*** Airfare will be covered by a contract with the County's Travel Vendor

Purpose:
Attend ACA's 156th Congress of Correction in Pittsburgh, Pennsylvania from July 31-August 2, 2026. Selected by MetroHealth as the corrections-side presenter for the workshop Beyond the Game: Collaborative Responses to Gambling in the Cuyahoga County Jail, representing the Cuyahoga County Sheriff's Department. This workshop addresses gambling as an under-sound addiction and addictive behavior in jail settings. While correctional systems often maintain a generalized focus on substance-use addiction, addictive behaviors such as gambling can be overlooked. Gambling may be one of the most significant behavioral addictions affecting residents through debt, coercion, interpersonal conflict, misconduct, and facility safety concerns. Attend additional ACA workshops/trainings to bring correctional
safety, behavioral health, custody-clinical collaboration, and operational improvement ideas back to the department.

Dept:	Medical Examiner's Office
Event:	International Symposium on Human Identification
Source:	Promega
Location:	Providence, RI

Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Christine Scott	10/25/2026-10/29/2026	$1,170.00	$119.00	$1,108.96	$88.68	$289.78	$2,776.42	2025 DNA Backlog Grant

Marissa Esterline	10/25/2026-10/29/2026	$1,170.00	$151.00	$1,108.96	$270.00	$445.00	$3,144.96	2025 DNA Backlog Grant

*Paid to host
**Staff reimbursement
*** Airfare will be covered by a contract with the County's Travel Vendor

Purpose:
Presenting at a DNA conference and obtaining continuing education in my field of expertise.

Dept:	Medical Examiner's Office
Event:	SOFT/TIAFT 2026 Joint Meeting
Source:	Society of Forensic Toxicologist and The International Association of Forensic Toxicologist
Location:	Chicago, IL

Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Szabolcs Sofalvi	9/19/2026-9/25/2026	$1,284.00	$168.00	$1,919.04	$0.00	$0.00	$3,371.04	2025 Coverdell Grant
Kimberly Mansour	9/21/2026-9/25/2026	$1,084.00	$60.00	$1,279.36	$349.94	$481.81	$3,255.11	2025 Coverdell Grant
Danai Taruvinga	9/19/2026-9/24/2026	$1,084.00	$180.00	$1,919.04	$287.81	$418.80	$3,889.65	2025 Coverdell Grant

*Paid to host
**Staff reimbursement
*** Airfare will be covered by a contract with the County's Travel Vendor

Purpose:

To attend the Society of Forensic Toxicologists (SOFT) and The International Association of Forensic Toxicologists (TIAFT) joint meeting in Chicago for training and continuing education purposes and to present research.

Dept:	Medical Examiner's Office
Event:	36th Annual CLIC Technical Training Seminar
Source:	Clandestine Laboratory Investigating Chemists Association
Location:	Atlanta, GA

Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source

Shaena Taylor	9/9/2026-9/12/2026	$250.00	$297.00	$880.00	$363.84	$340.00	$2,130.84	2025 Coverdell Grant

*Paid to host
**Staff reimbursement
*** Airfare will be covered by a contract with the County's Travel Vendor

Purpose:
Clandestine laboratory investigations, forensic chemistry, analytical techniques, and safety programs. The seminar also provides an opportunity to meet other forensic chemists specializing in clandestine laboratory investigations. The type of training offered at a CUC seminar is unique because of its emphasis on clandestine drug laboratory investigations, analyses, and chemistry.

BC2026-404

Department of Purchasing, presenting proposed purchases for the week of 8/3/2026:

Direct Open Market Purchases
(Purchases between $10,000.01 - $200,000.00 unless requiring assistance from the Department of Purchasing – See Below):

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
26002590	Various rotating assemblies for County pump stations	Department of Public Works	The Craun-Liebing Company	$199,999.60	Sanitary Sewer Fund

V- OTHER BUSINESS

Item of Note (non-voted)

ION2026-87

Fiscal Office, submitting a grant agreement with Sears Consumer Protection and Education Fund in the amount of $10,000.00 for Developing a Scam Check Tool for banking and credit unions in connection with consumer protection endeavors.

Funding Source: Massachusetts Attorney General in connection with FY2025 Cycle

ION2026-88

Department of Public Safety and Justice Services on behalf of the Medical Examiner's Office,

a) Submitting a grant application with the U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance in the amount of $300,000.00 for modernization of outdated equipment for the Firearms and Toolmark Unit of the Cuyahoga County Regional Forensic Science Laboratory in connection with FY2026 National Integrated Ballistic Information (NIBIN) Modernization Program the for the period 10/1/2026 – 9/30/2031.

b) Submitting a Memorandum of Understanding with U. S. Department of Justice, Bureau of Alcohol, Tobacco, Firearms and Explosives to establish an ATF National Integrated Ballistic Information Network and define the responsibilities of the parties effective upon signatures of all parties through project completion.

Funding Source: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance

ION2026-89

Department of Public Safety and Justice Services, submitting a grant award from The Cleveland Foundation in the amount of $200,000.00 for violence reduction landscape analysis and strategic plan in connection with FY25 Violence Reduction Landscape Analysis & Strategic Plan Grant for the period 7/1/2026 -12/31/2027.

Funding Source: The Cleveland Foundation

ION2026-90

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, submitting an amendment to a grant agreement with U.S. Department of Housing and Urban Development for Rapid Re-housing services for single adults in connection with FY2024 Continuum of Care Homeless Program Competition Grant for the period 10/1/2025 – 9/30/2026; to make budget line item revisions; no additional funds required.

Funding Source(s): U.S. Department of Housing and Urban Development Continuum of Care Program in connection with FY24 Cuyahoga Rapid Rehousing for Singles. The subrecipient(s) awarded funds are required to provide a combined cash match of 25% ($146,075.50).

ION2026-91

Contracts up to $10,000.00 – Processed and executed (no vote required)

RQ No.	Contract Number	Vendor	Service Description	Amount	Department	Date(s) of Service	Funding Source	Date of Execution
NA	6325	Thompson Hine LLP	Legal services related to the Ohio Revised Code	$9,750.00	Fiscal Office on behalf of Department of Law	6/18/2026-project completion	General Fund	(Law) 7/8/2026
12469	6344 (fka 3625)	Monford Dent Consulting & Psychological Services, LLC	For sex offender assessment and treatment services for Court-referred youth project; **to update insurance requirements as outlined in Exhibit 1, to extend time,**	**$10,000.00**	Court of Common Pleas/Juvenile Court Division	7/1/2023-6/30/2026**; to extend the time period to 6/30/2027**	RECLAIM Grant	(Executive) 7/25/2026

			and for additional funds, effective 7/1/2026.					
14451	4969	Summit Food Service, LLC	For Jail food services in the Cuyahoga County Corrections Center; **to replace Enhanced Menu Schedule 1A with Enhanced Menu Schedule 1B representing pricing schedule, effective upon signatures of all parties.**	$0.00	Sheriff's Department	1/1/2025-12/31/2027	(Original) General Fund	(Executive) 7/25/2026 (Law) 7/24/2026
NA	2727	The Center for Community Solutions	For outreach, education and support services for reproductive rights.	$0.00	Department of Health and Human Services/Office of the Director	9/12/2022-6/30/2026; **to extend the time period to 6/30/2027**	(Original) General Fund – American Rescue Plan Act (ARPA) Revenue Replacement/ Provision of Government Services	(Executive) 7/25/2026 (Law) 7/27/2026
NA	3525 (fka 1555)	WellSky Human and Social Services Corporation	For the implementation of a software solution to support automated data transfers from the PeerPlace system to WellSky Aging and Disability system fka Social Assistance Management System (SAMS); **to amend budget terms as outlined in Exhibit A-3, to extend time, and for additional funds, effective 8/1/2026.**	**$2,069.41**	Department of Health and Human Services/ Division of Senior and Adult Services	8/1/2021-7/31/2026; **to extend the time period to 7/31/2027**	Health and Human Services Levy Fund	(Executive) 7/25/2026 (Law) 7/27/2026
NA	5453	McGregor Pace	For direct care staff for personal care support services to participants in the All-Inclusive	$0.00	Department of Health and Human Services/	4/1/2025-12/31/2028**; to extend the time period to 12/31/2029**	(Original) Revenue Generating	(Executive) 7/25/2026 (Law) 7/27/2026

			Care for the Elderly (PACE) program; **to amend and delete various terms, to extend time, effective 6/1/2026.**		Division of Senior and Adult Services			

VI – PUBLIC COMMENT

VII – ADJOURNMENT

Minutes
Cuyahoga County Board of Control
Monday, July 27, 2025 - 11:00 A.M.
County Headquarters
2079 East Ninth Street
Committee Room B

I – CALL TO ORDER

The meeting was called to order at 11:00 a.m.
Attending:
Erik Janas, Chief of Staff (Alternate for Chris Ronayne, County Executive) entered the room at 11:03
Michael Chambers, Fiscal Officer, serving as Chairman
Mellany Seay, Finance and Operations Administrator, Department of Public Works
(Alternate for Michael Dever)
Anitra Curry, Purchasing Manager (Alternate for Paul Porter)
Councilmember Meredith Turner
Councilmember Michael Houser
Laura Black, County Council (Alternate for Councilmember Robert Schleper)

II. – REVIEW MINUTES – 7/20/2026

Michael Chambers motioned to approve the minutes from the July 20, 2026, meeting; Meredith Turner 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

BC2026-376

Department of Public Works, recommending an award on Purchase Order No. 26002434 with River City Furniture, LLC dba RCF Group in the amount not-to-exceed $42,488.85 for a state contract purchase and installation of various office furnishings to outfit the Central Booking Unit at the Justice Center.

Funding Source: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance Grant

Thomas Pavich, Department of Public Works, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2026-376 was approved by unanimous vote.

BC2026-377

Department of Public Works/Division of Public Utilities, submitting an amendment to Contract No. 5350 with 21C LLC dba Compass Energy Platform for general engineering and construction management services for Cuyahoga Green Energy, the County Utility for the period 1/1/2025 – 12/31/2027 to include language addressing compliance with federal grant requirements and for additional funds in the amount not-to-exceed $350,000.00, effective upon signatures of all parties.

Funding Source: U.S. Environmental Protection Agency Climate Pollution Reduction Grant Award No. 00E0386

Michael Foley, Department of Public Works, presented. There were no questions. Michael Chambers motioned to approve the item; Laura Black seconded. Item BC2026-377 was approved by unanimous vote.

BC2026-378

Department of Public Works, recommending an award on RQ16296 and enter into Contract No. 6281 with American Structurepoint, Inc. (101-6) in the amount not-to-exceed $373,221.39 for engineering design services for Harvard Avenue from the West Corporate Limit to the East Corporate Limit including Denison Avenue up to Cuyahoga Heights West Corporate Limit in the Village of Cuyahoga Heights and Nottingham/Dille Road from St. Clair Avenue to Euclid Avenue in the Cities of Cleveland and Euclid for resurfacing projects, effective upon signatures of all parties through project completion.

Funding Source: Road and Bridge Fund

Eric Mack, Department of Public Works, presented. There were no questions. Michael Chambers motioned to approve the item; Michael Houser seconded. Item BC2026-378 was approved by unanimous vote.

BC2026-379

Department of Information Technology, submitting an amendment to Contract No. 5140 with Root Integrated Systems for service, maintenance, support, and hardware coverage on Audio Visual/Conference Room System in various rooms throughout Cuyahoga County buildings for the period 1/1/2025 - 12/31/2027, to change the insurance terms and for additional funds in the amount not-to-exceed $566,009.09, effective upon signatures of all parties.

Funding Source: General Fund

Brianna Witt, Department of Information Technology, presented. There were no questions. Michael Chambers motioned to approve the item; Erik Janas seconded. Item BC2026-379 was approved by unanimous vote.

BC2026-380

Department of Information Technology,

a) Submitting an RFP exemption, which will result in an award recommendation to Escal Institute of Advanced Technologies, Inc. dba SANS Institute in the amount not-to-exceed $26,310.00 for various

SANS Workforce Security and Risk Training programs to enhance cybersecurity readiness and response (5) Long Courses with Certification and (2) SLED Sans Skills courses.

b) Recommending an award on Purchase Order No. 26000647 to Escal Institute of Advanced Technologies, Inc. dba SANS Institute in the amount not-to-exceed $26,310.00 for various SANS Workforce Security and Risk Training programs to enhance cybersecurity readiness and response (5) Long Courses with Certification and (2) SLED Sans Skills courses.

Funding Source: General Fund

Brianna Witt, Department of Information Technology, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2026-380 was approved by unanimous vote.

BC2026-381

Department of Information Technology,

a) Submitting an RFP exemption, which will result in an award recommendation to Great Northern Consulting, LLC in the amount not-to-exceed $17,831.49 for the purchase of software support and maintenance services on (3) Oracle Database Appliances for the period 6/18/2026 - 6/17/2027.

b) Recommending an award on Purchase Order No. 26002520 to Great Northern Consulting, LLC in the amount not-to-exceed $17,831.49 for the purchase of software support and maintenance services on (3) Oracle Database Appliances for the period 6/18/2026 - 6/17/2027.

Funding Source: General Fund

Brianna Witt, Department of Information Technology, presented. There were no questions. Michael Chambers motioned to approve the item; Erik Janas seconded. Item BC2026-381 was approved by unanimous vote.

BC2026-382

Department of Information Technology, recommending an award on Purchase Order No. 26002513 to MNJ Technologies Direct, Inc. in the amount not-to-exceed $15,940.00 for a joint cooperative purchase of (11) LG monitors and (6) EPOS Sennheiser wireless headsets for the Medical Examiner's Office.

Funding Source: Coroner Lab Fund

Brianna Witt, Department of Information Technology, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2026-382 was approved by unanimous vote.

BC2026-383

Department of Information Technology, recommending an award on Purchase Order No. 26002514 to MNJ Technologies Direct, Inc. in the amount not-to-exceed $15,626.17 for a joint cooperative purchase of (12) Cisco transceivers.

Funding Source: Capital Improvement Plan

Brianna Witt, Department of Information Technology, presented. There were no questions. Michael Chambers motioned to approve the item; Erik Janas seconded. Item BC2026-383 was approved by unanimous vote.

BC2026-384

Court of Common Pleas/Juvenile Court Division, submitting an amendment to Contract No. 5535 with COHR Psychologist & Associates for sex offender assessment and treatment services for Court referred youth for the period 7/1/2025 – 6/30/2026 to extend the time period to 6/30/2027, to update insurance requirements, and for additional funds in the amount not-to-exceed $20,000.00, effective 7/1/2026.

Funding Source: RECLAIM Grant

Jennifer Howard, Court of Common Pleas/Juvenile Court Division, presented. There were no questions. Michael Chambers motioned to approve the item; Michael Houser seconded. Item BC2026-384 was approved by unanimous vote.

BC2026-385

Sheriff's Department,

a) Submitting an RFP exemption, which will result in an award recommendation to Porter Lee Corporation in the amount not-to-exceed $20,435.29 for inventory management software, hardware, and supplies to track inmate property, effective upon signatures of all parties for a period of 3 years.

b) Recommending an award and enter into Contract No. 6317 with Porter Lee Corporation in the amount not-to-exceed $20,435.29 for inventory management software, hardware, and supplies to track inmate property, effective upon signatures of all parties for a period of 3 years.

Funding Source: General Fund

Chris Costin, Sheriff's Department, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2026-385 was approved by unanimous vote.

BC2026-386

Department of Health and Human Services/Community Initiatives Division/Office of Early Childhood, submitting an amendment to Contract No. 4314 with Case Western Reserve University's Center on Urban Poverty and Community Development for implementation, management and evaluation of Invest in Children Programs for the period 7/1/2024 - 6/30/2026 to extend the time period to 6/30/2028, to update the scope of services, to update various language including budget terms, to add a vendor credit and branding provision, and for additional funds in the amount not-to-exceed $240,000.00, effective 7/1/2026.

Funding Source: Health and Human Services Levy Fund

Marcos Cortes, Department of Health and Human Services, presented. There were no questions. Michael Chambers motioned to approve the item; Erik Janas seconded. Item BC2026-386 was approved by unanimous vote.

C. – Consent Agenda

There were no questions or comments on the Consent Agenda items. Michael Chambers motioned to approve Consent Agenda Item No. BC2026-387 through BC2026-389; Meredith Turner seconded. The Consent Agenda Items were approved by unanimous vote.

BC2026-387

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

a) Requesting authority to apply for grant funds from U.S. Department of Housing and Urban Development in the amount of $617,945.00 for Rapid Re-housing services for single adults in connection with FY2025 Continuum of Care Homeless Program Competition Grant for the 10/1/2026 – 9/30/2027.

b) Submitting a grant award from U.S. Department of Housing and Urban Development in the amount of $617,945.00 for Rapid Re-housing services for single adults in connection with FY2025 Continuum of Care Homeless Program Competition Grant for the 10/1/2026 – 9/30/2027.

Funding Source: U.S. Department of Housing and Urban Development Continuum of Care Competition Grant in connection with FY25 Cuyahoga Coordinated Entry 2024 Renewal. The subrecipient(s) awarded funds are required to provide a combined cash match of 25% ($154,486.25).

BC2026-388

Fiscal Department, presenting proposed travel/membership requests for the week of 7/27/2026:

Dept:	Sheriff's Department
Event:	2026 MCSA Annual Conference
Source:	Major County Sheriffs Association
Location:	Milwaukee, WI

Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Harold Pretel	9/20/2026 - 9/23/2026	$0.00	$178.00	$846.00	$150.00	$600.00	$1,774.00	Continuing Professional Training Fund

*Paid to host
**Staff reimbursement
*** Airfare will be covered by a contract with the County's Travel Vendor

Purpose:
Annual mandatory conference - training - network with law enforcement agencies and corporation

Partners.

Dept:	Department of Health and Human Services/Office of the Director							
Event:	Harvard Kennedy School's Government Performance Lab Conference							
Source:	Harvard Kennedy Schools Government							
Location:	Cambridge, MA							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Daniel Humphrey	8/4/2026 - 8/5/2026	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	Harvard Kennedy School

*Paid to host
**Staff reimbursement
*** Airfare will be covered by a contract with the County's Travel Vendor

****All expenses covered by Harvard Kennedy School
Meals - $100.00
Lodging - $216.00
Ground TRN/Mileage - $100.00
Air - $237.00

Purpose:
Invitation for Daniel to be a panelist speaker at a conference at the Harvard Kennedy School's Government Performance Lab, to talk about relating to work that Cuyahoga HHS has done on SNAP benefit retention and software projects. The GPL conducts research on how to identify, promote, and implement effective social service projects in state and local governments and sometimes provides direct grants of technical assistance grants. The host is covering all costs — flight, hotel, airport transportation, and meals not provided during conference events.

BC2026-389

Department of Purchasing, presenting proposed purchases for the week of 7/27/2026.

Items/Services Received and Invoiced but not Paid:

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
26002552	Factory Authorized – Various compressor parts and repairs*	Department of Public Works	APO Pumps & Compressors, LLC	$11,124.60	General Fund

Approval No. BC2025-805, dated 12/22/2025 which approved an alternative procurement process, which will result in award recommendations and issuance of purchase orders to Factory Authorized Dealers in the amount not-to-exceed $1,000,000.00 for vehicle and equipment repairs, parts and services for the period 1/1/2026-12/31/2027.

V- OTHER BUSINESS

Item of Note (non-voted)

ION2026-84

Department of Public Works, submitting an Agreement with the City of East Cleveland to define the responsibilities of each party for coordination and installation of approximately (5) bicycle and scooter parking hubs, comprised of bicycle racks and signage and upon completion of the project the City shall accept as a gift and assume ownership and all maintenance obligations for this project.

Funding Source: Northeast Ohio Areawide Coordinating Agency Transportation Alternatives Program Funds

ION2026-85

Sheriff's Department,

a) Requesting authority to apply for grant funds from the U.S. Department of Homeland Security/ Federal Emergency Management Agency through the Ohio Department of Public Safety, Emergency Management Agency in the amount of $97,500.00 for reimbursement of eligible expenses for the Operation Stonegarden Project in connection with the FY2025 State Homeland Security Grant Program for the period 9/1/2025 – 6/30/2028.

b) Submitting a grant agreement with the U.S. Department of Homeland Security/ Federal Emergency Management Agency through the Ohio Department of Public Safety, Emergency Management Agency in the amount of $97,500.00 for reimbursement of eligible expenses for the Operation Stonegarden Project in connection with the FY2025 State Homeland Security Grant Program for the period 9/1/2025 – 6/30/2028.

Funding Source: U.S. Department of Homeland Security, Federal Emergency Management Agency, Customs and Border Patrol through the Ohio Department of Public Safety (OEMA)

ION2026-86

Contracts up to $10,000.00 – Processed and executed (no vote required)

RQ No.	Contract Number	Vendor	Service Description	Amount	Department	Date(s) of Service	Funding Source	Date of Execution
12413	5656 (fka 3662)	Vantedge Disaster Group, LLC dba Service Master CDR	For specialty cleaning and environmental mitigation services for various County buildings.	$0.00	Department of Public Works	9/27/2023-9/28/2026; **to extend the time period to 9/28/2028**	(Original) General Fund	(Executive) 7/20/2026 (Law) 7/17/2026

13103	4634	UBIZ Venture Capital	For design and administration of a Small Business Program with a focus on minority and women-owned businesses; **to replace Schedule 1 and 2 with an Amended and Restated Schedule 1 and 2, effective upon signatures of all parties.**	$0.00	Department of Development	8/12/2024-6/30/2026	(Original) Economic Development Fund	(Executive) 7/20/2026 (Law) 7/21/2026
13103	5105 (fka 4633)	JumpStart, Inc.	For design and administration of a Small Business Program with a focus on minority and women-owned businesses; **to replace Schedule 1 and 2 with an Amended and Restated Schedule 1 and 2, effective upon signatures of all parties.**	$0.00	Department of Development	8/12/2024-6/30/2026	(Original) Economic Development Fund	(Executive) 7/16/2026 (Law) 7/21/2026
NA	5457	Rust Belt Riders	To provide composting services for the East 9th building; **to update insurance requirements as outlined in Schedule A, to extend time; effective upon signatures of all parties.**	$0.00	Department of Sustainability	6/20/2025-6/19/2026; **to extend the time period to 6/15/2027**	(Original) Sustainability Projects Fund	(Executive) 7/20/2026 (Law) 7/17/2026
NA	6314	Bricker Graydon Wyatt LLP	Legal services regarding tax matters.	$7,500.00	Fiscal Office on behalf of the Department of Law	6/25/2026-project completion	General Fund	(Law) 6/25/2026
NA	5468 (fka 4995)	PALS for Healing	Master Contract with various providers for Trauma Informed Treatment services for Court-referred youth; **to update unit rate and/or monthly rates as outlined in Exhibit 1, to update**	**$10,000.00**	Court of Common Pleas/Juvenile Court Division	7/1/2024 – 6/30/2026; **to extend the time period to 6/30/2027**	RECLAIM Grant	(Executive) 7/16/2026

			insurance requirements as outlined in Exhibit 2, to extend time and for additional funds, effective 7/1/2026.					
NA	5672 (fka 4688)	MST Services LLC formerly known as MST Group LLC, dba MST Services	For licensures for Multi-Systemic Therapy services; **to change the vendor's name, to update unit rate and/or monthly rates as outlined in Exhibit 1, to update insurance requirements as outlined in Exhibit 2, to extend time and for additional funds, effective 7/1/2026.**	$8,100.00	Court of Common Pleas/Juvenile Court Division	7/1/2024 – 6/30/2026; **to extend the time period to 6/30/2027**	RECLAIM Grant	(Executive) 7/20/2026

Various Agreements – Processed and executed (no vote required)

Approving Resolution	Public convenience and welfare project description	Total Estimated Project Cost	Total Actual Project Cost	Funding Source	Date of Execution
R2024-0333	Resurfacing of Neff Road from CSX Railroad to Bella Drive in the City of Cleveland. Council District 10	$511,941.00		$250,000.00 Road and Bridge Fund $261,941.00 City of Cleveland	(Executive) 7/20/2026
R2026-0061	Resurfacing of Wolf Road from Bradley Road to Bassett Road in the City of Bay Village. Council District 1	$676,550.00		$250,000.00 Road and Bridge Fund $426,550.00 City of Bay Village	(Executive) 7/16/2026

VI – PUBLIC COMMENT

There was no public comment.

VII – ADJOURNMENT

Michael Chambers motioned to adjourn; Mellany Seay seconded. The motion to adjourn was unanimously approved at 11:14 a.m.

Item Details as Submitted by Requesting Departments

IV. Contracts and Awards

A. – Tabled Items

B. – New Items for Review

BC2026-389

TITLE	2026 Public Works requests approval to Apply, Accept, and Signature of U.S. Department of Transportation, Office of Federal Aviation Administration, FY-2026 Airport Improvement Grant Program for Shift Taxiway A (3,350'x35'), including MITL LED and Signage – Phase II (Construction) & Shift Taxiway B2 and B3, including MITL LED and Signage – Phase II
DEPARTMENT OR AGENCY NAME	Public Works

REQUESTED ACTION – PLEASE CHECK ALL THAT IS APPLICABLE *PLEASE INCLUDE SUPPORTING DOCUMENTS AS ATTACHMENTS TO THE SUBMISSION IN ONBASE.	☒ Authority to Apply (for grants with Cash Match and/or Subrecipients); County Executive signature required ☐ Grant Application (for grants with no Cash Match or Subrecipients County Executive signature required). Is ☐ Yes ☐ No ☐ Grant Agreement (when the signature of the County Executive is required). ☐ Grant Award (when the signature of the County Executive is not required). ☐ Grant Amendments ☐ Pre-Award Conditions Forms (when no signature is required by the County Executive)

GRANT CURRENT/ HISTORICAL INFO	NAME OF GRANT	TIME PERIOD	AMOUNT	PREVIOUS APPROVAL (PLEASE PROVIDE BOC MEETING DATE)	APPROVAL NO.
ORIGINAL (O)	Airport Improvement Grant Program		(FAA) $5,387,005.00 (ODOT Office of Aviation) $283,526.63 County share $282,207.58		

			Total project costs: $5,952,739.21		
AMENDMENT (A-1)					
AMENDMENT (A-)					

DESCRIPTION/EXPLANATION OF THE GRANT:	This grant contributes $5,387,005.00 in Federal Aviation Administration funds for Shift Taxiway A (3,350'x35'), including MITL LED and Signage – Phase II (Construction) & Shift Taxiway B2 and B3, including MITL LED and Signage – Phase II (Construction) at the Cuyahoga County Airport, with the County only needing to contribute $282,206.70 (non-eligible).
PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):	Approval to apply, accept, and get signatures on grants.
	Take advantage of Federal Aviation Administration funding.
	Continue fulfilling the ongoing County Airport Improvements Plan.

GRANT SUBRECIPIENTS – ARE THERE ANY SUBRECIPIENTS THAT ARE WRITTEN INTO THE GRANT ☐ YES ☒ NO	
IF ANSWERED YES, PLEASE COMPLETE THE BOXES BELOW AS IT PERTAINS TO THE SUBRECIPIENT. FOR MULTIPLE SUBRECIPIENTS, PLEASE COPY THIS SECTION AND COMPLETE FOR EACH SUBRECIPIENT.	
SUBRECIPIENT'S NAME AND ADDRESS:	
LIST THE (OWNERS, EXECUTIVE DIRECTOR, OTHER(specify) FOR THE CONTRACTOR/VENDOR	
SUBRECIPIENT'S COUNCIL DISTRICT:	
DOLLAR AMOUNT ALLOCATED:	

PROJECT COUNCIL DISTRICT:	11
PROVIDE FULL ADDRESS/LIST MUNICIPALITY(IES) IMPACTED BY GRANT/PROJECT, IF APPLICABLE.	Richmond Heights directly and Northeast as a whole, with the airport being a regional hub.

FUNDING SOURCE:	Please provide the complete, proper name of the funding source (no acronyms) for receipt of this grant.
	$5,387,005.00 U.S. Department of Transportation Federal Aviation Administration; $283,526.63 Ohio Department of Transportation, Office of Aviation Funds
	Does this require a Cash Match by the County? ☒ YES ☐ NO

	If yes, how much is required for the Cash Match by the County? Also, please provide the complete, proper name of the County funding source (no acronyms) that will be used for the Cash Match. Include percentages of funding if using more than one County funding source for the Cash Match.
	$282,207.58 - Airport Capital Improvement Plan budget

BC2026-390

Title	Public Works – Cuyahoga County Airport EMAS - Runway Safe Inc.
Department or Agency Name	Department of Public Works
Requested Action	☐ Contract ☐ Agreement ☐ Lease ☐ Amendment ☐ Revenue Generating ☒ Purchase Order ☐ Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
0	26002571	Runway Safe Inc.	N/A	$125,895.00	Pending	Pending

Service/Item Description (include quantity if applicable). When submitting an amendment, address any changes to the time period of the agreement, reduction or addition of funds, changes to the existing scope of services, changes to service rates/costs, and retroactive applicability of the changes, if any. This is a purchase order with a vendor for the materials and repair of the County Airport runway EMAS (Engineered Material Arresting System).
Indicate whether: ☒ New service/purchase ☐ Existing service/purchase ☐ Replacement for an existing service/purchase (provide details in Service/Item Description section above)
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 approval of this purchase order will allow the County to work with a vendor for the repair of the Airport's runway EMAS.

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). If there are multiple vendors copy this table and complete for each vendor.	
Vendor Name and address:	Owner, executive director, other (specify):
Runway Safe Inc. 2239 high Hill Road	Dana Peffer / Key account Manager

Logan Township, NJ 08085	
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# _____ ☐ RFB ☐ RFP ☐ RFQ ☐ Informal ☐ Formal Closing Date:	Provide a short summary for not using competitive bid process. Runway Safe Group acquired the EMAS business from ESCO (Engineered Arresting Systems Corporation), who was the original designer and installer of the system at the County Airport. *See Justification for additional information.
The total value of the solicitation:	☒ Exemption
Number of Solicitations (sent/received) /	☐ State Contract, list STS number and expiration date ☐ 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? ☐ Yes ☐ No, please explain. If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	☐ Sole Source ☐ Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: ☐ Yes ☐ No, please explain:	☐ Government Purchase
	☐ Alternative Procurement Process
How did pricing compare among bids received?	☐ Contract Amendment - (list original procurement)
	☐ Other Procurement Method, please describe:

Is Purchase/Services technology related ☒ No ☐ Yes If yes, list date of TAC approval and answer the questions below.	
List date of TAC approval	Date:

☐ Check if item on IT Standard List of approved purchase and provide date of TAC approval. ☐ Check if item is ERP related? ☐ No ☐ Yes.
Are the purchases compatible with the new ERP system? ☐ Yes ☐ No, please explain.

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. Airport Operating Fund / 100%
Is funding for this included in the approved budget? ☒ Yes ☐ No (if "no" please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit. PW600135 / 71100 CAOPR0001901
Payment Schedule: ☒ Invoiced ☐ Monthly ☐ Quarterly ☐ One-time ☐ Other (please explain):

Provide status of project.	
Is contract/purchase late ☒ No ☐ 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:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? ☐ No ☐ Yes (if yes, please explain)	
Have payments been made? ☐ No ☐ Yes (if yes, please explain)	

HISTORY (see instructions):

BC2026-391

Title	2026 Public Works plans to Amend contract CM 4051 for Geotechnical Services with CTL Engineering, Inc., Inc. for an additional $50,000.
Department or Agency Name	Department of Public Works

Requested Action	☐ Contract ☐ Agreement ☐ Lease ☒ Amendment ☐ Revenue Generating ☐ Purchase Order ☐ Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
O	CM 4051	CTL Engineering, Inc.	1/3/2024 – Completion of Work	$150,000	1/2/2024	BC2024-03
A-1	CM 4051	CTL Engineering, Inc.	9/15/2025 – Completion of Work	$50,000	9/15/2025	BC2025-573
A-2	CM 4051	CTL Engineering, Inc.	Effective date – Completion of Work	$50,000	pending	pending

Service/Item Description (include quantity if applicable). When submitting an amendment, address any changes to the time period of the agreement, reduction or addition of funds, changes to the existing scope of services, changes to service rates/costs, and retroactive applicability of the changes, if any. Requesting approval of this second amendment with CTL Engineering, Inc. in the amount of $50,000. As with the first amendment and the original contract, this amended contract does not have an end date, instead the contract extends through the completion of work. The scope of the contract remains the same.
Indicate whether: ☐ New service/purchase ☒ Existing service/purchase ☐ Replacement for an existing service/purchase (provide details in Service/Item Description section above)
For purchases of furniture, computers, vehicles: ☐ Additional ☐ Replacement N/A Age of items being replaced: How will replaced items be disposed of
Project Goals, Outcomes or Purpose (list 3): The primary goal of this request is the approval of the amendment with CTL Engineering, Inc. so that they may continue to provide the needed geotechnical services for the new Cuyahoga County Corrections Center project.

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). If there are multiple vendors copy this table and complete for each vendor.	
Vendor Name and address:	Owner, executive director, other (specify):
CTL Engineering, Inc. 3085 Interstate Parkway, Brunswick, Ohio 44212	Matthew Kairouz, P.E., Branch Manager
Vendor Council District:	Project Council District:
N/A – Located in Brunswick	8
If applicable provide the full address or list the municipality(ies) impacted by the project.	Garfield Heights

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# ___7866____ ☐ RFB ☐ RFP ☒ RFQ ☐ Informal ☐ Formal Closing Date: 1/12/2022	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation:	☐ Exemption
Number of Solicitations (sent/received) 83 / 3	☐ State Contract, list STS number and expiration date ☐ Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE (15%) SBE (10%) MBE (5%) WBE. Were goals met by awarded vendor per DEI tab sheet review? ☒ Yes ☐ No, please explain. If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	☐ Sole Source ☐ Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: ☐ Yes ☒ No, please explain: Venders were scored based on qualifications	☐ Government Purchase ☐ Alternative Procurement Process
How did pricing compare among bids received? N/A Venders were scored based on qualifications	☐ Contract Amendment - (list original procurement) ☐ Other Procurement Method, please describe:

Is Purchase/Services technology related ☒ No ☐ Yes If yes, list date of TAC approval and answer the questions below.
List date of TAC approval | Date: ☐ Check if item on IT Standard List of approved purchase and provide date of TAC approval. ☐ Check if item is ERP related? ☐ No ☐ Yes.
Are the purchases compatible with the new ERP system? ☒ Yes ☐ No, please explain.

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. General Fund 100%
Is funding for this included in the approved budget? ☒ Yes ☐ No (if "no" please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit. PW600125 55200 CFCCC0000301
Payment Schedule: ☒ Invoiced ☒ Monthly ☐ Quarterly ☐ One-time ☐ Other (please explain):

Provide status of project.	
Is contract/purchase late ☒ No ☐ 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:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? ☐ No ☐ Yes (if yes, please explain)	
Have payments been made? ☐ No ☐ Yes (if yes, please explain)	

HISTORY (see instructions):

BC2026-392

Title	2026 Cleveland Division of Water Utility Agreement, revenue generating, $120K (8/14/2026-8/13/2028)
Department or Agency Name	Public Works
Requested Action	☐ Contract ☒ Agreement ☐ Lease ☐ Amendment ☐ Revenue Generating ☐ Purchase Order ☐ Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
O	6337	City of Cleveland	8/14/2026-8/13/2028	$120,000	tbd	tbd

Service/Item Description (include quantity if applicable). When submitting an amendment, address any changes to the time period of the agreement, reduction or addition of funds, changes to the existing scope of services, changes to service rates/costs, and retroactive applicability of the changes, if any. This Utility Repair Agreement is for the County to continue to assist with repair of sanitary and storm sewers at the request of the City of Cleveland Division of Water on a task order basis. This is a revenue generating based direct bill agreement not-to-exceed $120,000 in revenue to the County.
Indicate whether: ☐ New service/purchase ☐ Existing service/purchase ☒ Replacement for an existing service/purchase (provide details in Service/Item Description section above)
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 goal is for the County to continue to assist with repair of sanitary and storm sewers at the request of the City of Cleveland Division of Water on a task order basis.	

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). If there are multiple vendors copy this table and complete for each vendor.	
Vendor Name and address:	Owner, executive director, other (specify):
City of Cleveland - Division of Water Department of Public Utilities 1201 Lakeside Avenue Cleveland, Ohio 44114-1175	Simon Mastroianni Procurement Manager
Vendor Council District: 7	Project Council District: various
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ ☐ RFB ☐ RFP ☐ RFQ ☐ Informal ☐ Formal Closing Date:	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation:	☒ Exemption – govt -to-govt revenue generating agreement
Number of Solicitations (sent/received) /	☐ State Contract, list STS number and expiration date ☐ 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? ☐ Yes ☐ No, please explain. If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	☐ Sole Source ☐ Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: ☐ Yes ☐ No, please explain:	☐ Government Purchase
	☐ Alternative Procurement Process

How did pricing compare among bids received?	☐ Contract Amendment - (list original procurement)
	☐ Other Procurement Method, please describe:

Is Purchase/Services technology related ☐ No ☐ Yes If yes, list date of TAC approval and answer the questions below.
List date of TAC approval | Date: ☐ Check if item on IT Standard List of approved purchase and provide date of TAC approval. ☐ Check if item is ERP related? ☐ No ☐ Yes.
Are the purchases compatible with the new ERP system? ☐ Yes ☐ No, please explain.

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. This is a revenue generating agreement for the County
Is funding for this included in the approved budget? ☐ Yes ☐ No (if "no" please explain): N/A
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit.
Payment Schedule: ☐ Invoiced ☐ Monthly ☒ Quarterly ☐ One-time ☐ Other (please explain):

Provide status of project.	
Is contract/purchase late ☒ No ☐ 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:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? ☐ No ☐ Yes (if yes, please explain)	
Have payments been made? ☐ No ☐ Yes (if yes, please explain)	

HISTORY (see instructions):

Prior Original (O) and subsequent Amendments (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
O	3574	City of Cleveland, Department of Public Utilities, Division of Water	8/14/2023-8/13/2025	$150,000	BC2023-423	7/10/2023
A-1	3574	City of Cleveland, Department of Public Utilities, Division of Water	1 year extension through 8/13/2026	$0	BOC Item of Note 5	7/14/2025

BC2026-393

Title	NetApp Storage Appliances Maintenance Licenses Subscription
Department or Agency Name	Department of Information Technology
Requested Action	☐ Contract ☐ Agreement ☐ Lease ☐ Amendment ☐ Revenue Generating ☒ Purchase Order ☐ Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
	26002615 JCOP	Logicalis, Inc.	Between 10/1/2025 and 7/1/2026 through 7/31/2027	$282,019.97	PENDING	PENDING

Service/Item Description (include quantity if applicable). When submitting an amendment, address any changes to the time period of the agreement, reduction or addition of funds, changes to the existing scope of services, changes to service rates/costs, and retroactive applicability of the changes, if any.

The Department of Information Technology plans to contract with Logicalis, for NetApp Storage Appliances Maintenance Licenses Subscription in the amount of $282,019.97.

Indicate whether: ☐ New service/purchase ☒ Existing service/purchase ☐ Replacement for an existing service/purchase (provide details in Service/Item Description section above)
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 subscription covers the IT Infrastructure Team's storage appliances for equipment hardware failures and allows the County access to security and functionality software patches to support a stable and secure storage platform. The hard drives within these storage appliances do have moving parts similar to records on a record player where the arm moves across a disk to read and write the data to the drives, but at a much faster rate than what a record player records data. Over time it is common that these hard drives do fail due to the immense workload of reading and writing data 24/7 of the arms moving over the disk, which this support agreement covers the replacement and installation of those drives. The quote reflects various dates to co-term specific lines to match the subscription period. This is not being submitted late.

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). If there are multiple vendors copy this table and complete for each vendor.	
Vendor Name and address:	Owner, executive director, other (specify):
Logicalis, Inc. 3333 Richmond Road, Suite 420 Beachwood, OH 44122 (248) 957-5600	Shawn O'Leary 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# _____ ☐ RFB ☐ RFP ☐ RFQ ☐ Informal ☐ Formal Closing Date:	Provide a short summary for not using competitive bid process. Logicalis is able to provide Cuyahoga County with GSA contract pricing under GSA MAS Contract 47QTCA19D00MM, *See Justification for additional information.
The total value of the solicitation:	☐ Exemption
Number of Solicitations (sent/received) /	☐ State Contract, list STS number and expiration date ☒ Government Coop (Joint Purchasing Program/GSA), list number and expiration date

	September 26, 2029
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review? ☐ Yes ☐ No, please explain. If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	☐ Sole Source ☐ Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: ☐ Yes ☐ No, please explain:	☐ Government Purchase
	☐ Alternative Procurement Process
How did pricing compare among bids received?	☐ Contract Amendment - (list original procurement)
	☐ Other Procurement Method, please describe:

Is Purchase/Services technology related ☐ No ☒ Yes If yes, list date of TAC approval and answer the questions below.
List date of TAC approval: Date:03/20/2026 ☒ Check if item on IT Standard List of approved purchase and provide date of TAC approval. ☐ Check if item is ERP related? ☒ No ☐ Yes.
Are the purchases compatible with the new ERP system? ☐ Yes ☐ No, please explain.

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 100% General Fund
Is funding for this included in the approved budget? ☒ Yes ☐ No (if "no" please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit. IT100140
Payment Schedule: ☒ Invoiced ☐ Monthly ☐ Quarterly ☐ One-time ☐ Other (please explain):

Provide status of project.
Is contract/purchase late ☒ No ☐ 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:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? ☐ No ☐ Yes (if yes, please explain)	
Have payments been made? ☐ No ☐ Yes (if yes, please explain)	

HISTORY (see instructions):						
Prior Original (O) and subsequent Amendments (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
	25001061 JCOP	Logicalis, Inc.	05/01/2025 - 07/31/2026	$234,560.85	03/24/2025	BC2025-198

BC2026-394

Title	Cybersecurity services purchase order, redacted per R.C. 9.64
Department or Agency Name	The Department of Information Technology
Requested Action	☐ Contract ☐ Agreement ☐ Lease ☐ Amendment ☐ Revenue Generating ☒ Purchase Order ☐ Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
	PO26002668 JCOP	Redacted per R.C. 9.64	9/25/2026 - 9/24/2027	$117,420.00	PENDING	PENDING

Service/Item Description (include quantity if applicable). When submitting an amendment, address any changes to the time period of the agreement, reduction or addition of funds, changes to the existing scope of services, changes to service rates/costs, and retroactive applicability of the changes, if any. Redacted per R.C. 9.64

Indicate whether: ☐ New service/purchase ☒ Existing service/purchase ☐ Replacement for an existing service/purchase (provide details in Service/Item Description section above)
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): Redacted per R.C. 9.64

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). If there are multiple vendors copy this table and complete for each vendor.	
Vendor Name and address:	Owner, executive director, other (specify):
Redacted per R.C. 9.64	Redacted per R.C. 9.64
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# _____ ☐ RFB ☐ RFP ☐ RFQ ☐ Informal ☐ Formal Closing Date:	Provide a short summary for not using competitive bid process. Cuyahoga County selected a vendor through a joint cooperative purchasing contract through Sourcewell. *See Justification for additional information.
The total value of the solicitation:	☐ Exemption
Number of Solicitations (sent/received) /	☐ State Contract, list STS number and expiration date ☒ Government Coop (Joint Purchasing Program/GSA), list number and expiration date Sourcewell contract # (Redacted per R.C. 9.64), which expires February 27, 2028.
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review? ☐ Yes ☐ No, please explain.	☐ Sole Source ☐ Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).

If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	
Recommended Vendor was low bidder: ☐ Yes ☐ No, please explain:	☐ Government Purchase
	☐ Alternative Procurement Process
How did pricing compare among bids received?	☐ Contract Amendment - (list original procurement)
	☐ Other Procurement Method, please describe:

Is Purchase/Services technology related ☐ No ☒ Yes If yes, list date of TAC approval and answer the questions below.
List date of TAC approval | Date: 7.21.2026 ☒ Check if item on IT Standard List of approved purchase and provide date of TAC approval. ☐ Check if item is ERP related? ☐ No ☐ Yes.
Are the purchases compatible with the new ERP system? ☐ Yes ☐ No, please explain.

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 100% General Fund
Is funding for this included in the approved budget? ☒ Yes ☐ No (if "no" please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit. IT100135
Payment Schedule: ☒ Invoiced ☐ Monthly ☐ Quarterly ☐ One-time ☐ Other (please explain):

Provide status of project.	
Is contract/purchase late ☒ No ☐ 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:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? ☐ No ☐ Yes (if yes, please explain)	
Have payments been made? ☐ No ☐ Yes (if yes, please explain)	

HISTORY (see instructions):						
Prior Original (O) and subsequent Amendments (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
	PO25003077 JCOP	Redacted per R.C. 9.64	09/25/2025 – 09/24/2026	$114,922.10	9/8/2025	BC2025-564

BC2026-395

Title	CUYAHOGA COUNTY COURT OF COMMON PLEAS, JUVENILE COURT DIVISION
Department or Agency Name	SECOND AMENDMENT FOR EDUCATIONAL/VOCATIONAL/POSITIVE YOUTH DEVELOPMENT SERVICES, LEGACIES EMPOWERED, INC
Requested Action	☐ Contract ☒ Agreement ☐ Lease ☐ Amendment ☐ Revenue Generating ☐ Purchase Order ☐ Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
(O)	4131	Legacies Empowered, Inc.	7/1/2023-6/30/2024	$89,548.00	2/20/2024	BC2024-130
(A)-1	4131	Legacies Empowered, Inc.	7/1/2023-6/30/2026	$159,096.00	12/02/2024	BC2024-893
(A)-2	5053 fka 4131	Legacies Empowered, Inc.	7/1/2023-6/30/2027	$79,548.80	pending	pending

Service/Item Description (include quantity if applicable). When submitting an amendment, address any changes to the time period of the agreement, reduction or addition of funds, changes to the existing scope of services, changes to service rates/costs, and retroactive applicability of the changes, if any.
Vendor to provide mentoring services for court referred youth to extend the term of the contract through June 30, 2027, add funds in the amount of $79,548.80, and replace applicable language as set forth in Exhibit-1.

Indicate whether: ☐ New service/purchase ☒ Existing service/purchase ☐ Replacement for an existing service/purchase (provide details in Service/Item Description section above)
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): Vendor shall provide linkage to specific job and career opportunities, engage youth in pro-social activities and career development.

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). If there are multiple vendors copy this table and complete for each vendor.	
Vendor Name and address: Legacies Empowered, Inc. 6100 Oak Tree Blvd. Independence, Ohio 44137	Owner, executive director, other (specify): Charde' Hollins, Executive Director
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# _____ ☐ RFB ☐ RFP ☐ RFQ ☐ Informal ☐ Formal Closing Date:	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation:	☐ Exemption
Number of Solicitations (sent/received) /	☐ State Contract, list STS number and expiration date ☐ 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? ☐ Yes ☐ No, please explain. If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	☐ Sole Source ☐ Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: ☐ Yes ☐ No, please explain:	☐ Government Purchase
	☐ Alternative Procurement Process

How did pricing compare among bids received?	☒ Contract Amendment - (list original procurement)
	☐ Other Procurement Method, please describe:

Is Purchase/Services technology related ☒ No ☐ Yes If yes, list date of TAC approval and answer the questions below.
List date of TAC approval | Date: ☐ Check if item on IT Standard List of approved purchase and provide date of TAC approval. ☐ Check if item is ERP related? ☒ No ☐ Yes.
Are the purchases compatible with the new ERP system? ☐ Yes ☐ No, please explain.

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 100% funded by the RECLAIM Grant.
Is funding for this included in the approved budget? ☒ Yes ☐ No (if "no" please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit. JC330100
Payment Schedule: ☐ Invoiced ☒ Monthly ☐ Quarterly ☐ One-time ☐ Other (please explain):

Provide status of project.	
Is contract/purchase late ☐ No ☒ Yes, In the fields below provide reason for late and timeline of late submission	
Reason: Contract negotiation and submission of compliance documents.	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	2/24/2026
Date documents were requested from vendor:	5/1/2026
Date of insurance approval from risk manager:	3/17/2026
Date Department of Law approved Contract:	5/1/2026
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? ☒ No ☐ Yes (if yes, please explain)	
Have payments been made? ☒ No ☐ Yes (if yes, please explain)	

HISTORY (see instructions):

BC2026-396

Title	FIRST CONTRACT AMENDMENT RESTORATIVE JUSTICE PROGRAM NEW COMMUNITY RESTORATIVE JUSTICE L.L.C.

Department or Agency Name	CUYAHOGA COUNTY COURT OF COMMON PLEAS, JUVENILE DIVISION
Requested Action	☐ Contract ☐ Agreement ☐ Lease ☒ Amendment ☐ Revenue Generating ☐ Purchase Order ☐ Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
Original (O)	5125	New Community Restorative Justice L.L.C	7/1/2024 6/30/2026	$150,000.00	3/3/2025	BC2025-143
(A-# 1)	5125	New Community Restorative Justice L.L.C	7/1/2024 6/30/2027	$44,000.00	PENDING	PENDING

Service/Item Description (include quantity if applicable). When submitting an amendment, address any changes to the time period of the agreement, reduction or addition of funds, changes to the existing scope of services, changes to service rates/costs, and retroactive applicability of the changes, if any. Vendor to provide restorative justice diversion programming to extend the term of the contract through June 30, 2027, add funds in the amount of $44,000., and replace applicable language as set forth in Exhibit-1.
Indicate whether: ☐ New service/purchase ☒ Existing service/purchase ☐ Replacement for an existing service/purchase (provide details in Service/Item Description section above)
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): Vendor to provide Restorative Justice Programming for youth and shall prepare each participant in a trauma-informed manner for persons harmed to be able to express how they have been impacted.

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). If there are multiple vendors copy this table and complete for each vendor.	
Vendor Name and address: 6114 Francis Ave. Cleveland, Ohio 44127	Owner, executive director, other (specify): Richard Gibson (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# _____ ☐ RFB ☐ RFP ☐ RFQ ☐ Informal ☐ Formal Closing Date:	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation:	☐ Exemption
Number of Solicitations (sent/received) /	☐ State Contract, list STS number and expiration date ☐ 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? ☐ Yes ☐ No, please explain. If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	☐ Sole Source ☐ Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: ☐ Yes ☐ No, please explain:	☐ Government Purchase
	☐ Alternative Procurement Process
How did pricing compare among bids received?	☒ Contract Amendment - (list original procurement)
	☐ Other Procurement Method, please describe:

Is Purchase/Services technology related ☒ No ☐ Yes If yes, list date of TAC approval and answer the questions below.
List date of TAC approval: Date: ☐ Check if item on IT Standard List of approved purchase and provide date of TAC approval. ☐ Check if item is ERP related? ☒ No ☐ Yes.
Are the purchases compatible with the new ERP system? ☐ Yes ☐ No, please explain.

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 100% Funded by the RECLAIM Grant.
Is funding for this included in the approved budget? ☒ Yes ☐ No (if "no" please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit. JC330100
Payment Schedule: ☐ Invoiced ☒ Monthly ☐ Quarterly ☐ One-time ☐ Other (please explain):

Provide status of project.	
Is contract/purchase late ☐ No ☒ Yes, In the fields below provide reason for late and timeline of late submission	
Reason: Contract negotiation and submission of compliance documents.	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	3.19.26
Date documents were requested from vendor:	5.7.26
Date of insurance approval from risk manager:	3.19.26
Date Department of Law approved Contract:	5.5.26
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? ☒ No ☐ Yes (if yes, please explain)	
Have payments been made? ☒ No ☐ Yes (if yes, please explain)	

HISTORY (see instructions):

BC2026-397

Title	THIRD CONTRACT AMENDMENT FOR MULTISYSTEMIC THERAPY AND MULTISYSTEMIC THERAPY-PROBLEM SEXUAL BEHAVIOUR (MST/MST-PSB) APPLEWOOD CENTERS, INC
Department or Agency Name	CUYAHOGA COUNTY COURT OF COMMON PLEAS, JUVENILE DIVISION
Requested Action	☐ Contract ☐ Agreement ☐ Lease ☒ Amendment ☐ Revenue Generating ☐ Purchase Order ☐ Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
Original (O)	4021	Applewood Centers, Inc.	7/1/2023-6/30/2025	$472,000.00	1/2/2024	BC2024-14
(A-# 1)	5249 fka 4021	Applewood Centers, Inc.	7/1/2023-6/30/2026	$52,000.00	7/28/2025	BC2025-482
(A-# 2)	5249 4112 and 4021	Applewood Centers, Inc.	7/1/2023-6/30/2026	$184,000.00	12/01/2025	BC2025-744
(A-# 3)	6341 fka 5249, 5128, 4112 and 4021	Applewood Centers, Inc.	7/1/2023-6/30/2027	$236,000.00	PENDING	PENDING

Service/Item Description (include quantity if applicable). When submitting an amendment, address any changes to the time period of the agreement, reduction or addition of funds, changes to the existing scope of services, changes to service rates/costs, and retroactive applicability of the changes, if any. Multisystemic Therapy (MST) Program and a Multisystemic Therapy-Problem Sexual Behavior (MST-PSB) Program to extend the term of the contract through June 30, 2027, add funds in the amount of $236,000.00, and replace applicable language set forth in Exhibit 1 and Exhibit 2.
Indicate whether: ☐ New service/purchase ☒ Existing service/purchase ☐ Replacement for an existing service/purchase (provide details in Service/Item Description section above)
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 MST standard model is a family-driven treatment approach that addresses a multitude of behavioral issues by addressing complex systemic drivers to youth delinquency. • MST-PSB is designed with core elements of MST Standard but additionally addresses problematic sexual behaviors. • The vendor should provide an intensive, in-home and community-based service for youth based on the MST and MST-PSB Models and maintain all elements of the fidelity model

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). If there are multiple vendors copy this table and complete for each vendor.	
Vendor Name and address: Applewood Centers, Inc. 22001 Fairmount Blvd. Shaker Heights, Ohio 44118	Owner, executive director, other (specify): Jennifer Blumhagen, Executive Director
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# _____ ☐ RFB ☐ RFP ☐ RFQ ☐ Informal ☐ Formal Closing Date:	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation:	☐ Exemption
Number of Solicitations (sent/received) /	☐ State Contract, list STS number and expiration date

	☐ 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? ☐ Yes ☐ No, please explain. If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	☐ Sole Source ☐ Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: ☐ Yes ☐ No, please explain:	☐ Government Purchase
	☐ Alternative Procurement Process
How did pricing compare among bids received?	☒ Contract Amendment - (list original procurement)
	☐ Other Procurement Method, please describe:

Is Purchase/Services technology related ☒ No ☐ Yes If yes, list date of TAC approval and answer the questions below.	
List date of TAC approval	Date:
☐ Check if item on IT Standard List of approved purchase and provide date of TAC approval. ☐ Check if item is ERP related? ☒ No ☐ Yes.	
Are the purchases compatible with the new ERP system? ☐ Yes ☐ No, please explain.	

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 100% funded by the RECLAIM Grant.
Is funding for this included in the approved budget? ☒ Yes ☐ No (if "no" please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit. JC330100
Payment Schedule: ☐ Invoiced ☒ Monthly ☐ Quarterly ☐ One-time ☐ Other (please explain):

Provide status of project.
Is contract/purchase late ☐ No ☒ Yes, In the fields below provide reason for late and timeline of late submission

Reason: Contract negotiation and submission of compliance documents.	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	2/18/2026
Date documents were requested from vendor:	5/7/2026
Date of insurance approval from risk manager:	3/19/2026
Date Department of Law approved Contract:	5/1/2026
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? ☒ No ☐ Yes (if yes, please explain)	
Have payments been made? ☒ No ☐ Yes (if yes, please explain)	

HISTORY (see instructions): see chart above

BC2026-398

Title	VIOLENCE INTERVENTION PROGRAM TREATMENT SERVICES
Department or Agency Name	CUYAHOGA COUNTY COURT OF COMMON PLEAS, JUVENILE DIVISION
Requested Action	☒ Contract ☐ Agreement ☐ Lease ☐ Amendment ☐ Revenue Generating ☐ Purchase Order ☐ Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
Original (O)		Various Vendors	10/01/2025-9/30/2027	$414,417.51	Pending	Pending
	5968	Cleveland Peacemakers, Inc.				
	5969	P.A.L.S. For Healing				
	5971	Legacies Empowered, Inc.				
	5974	Renounce Denounce Gang Intervention Program				

Service/Item Description (include quantity if applicable). When submitting an amendment, address any changes to the time period of the agreement, reduction or addition of funds, changes to the existing scope of services, changes to service rates/costs, and retroactive applicability of the changes, if any.
The Vendors shall provide trauma-informed community-based treatment services to address identified needs areas related to violence interruption, mentorship, trauma, vocational needs, educational needs, and emotional and behavioral challenges. The Vendors will focus on increasing environmental and social protective factors to

decrease future involvement in gun-related activities for youth aged 15-18 years old, as outlined in the contract for a term starting October 1, 2025, until September 30, 2027, for Violence Intervention Program Treatment Services in the amount of $414,417.51.
Indicate whether: ☒ New service/purchase ☐ Existing service/purchase ☐ Replacement for an existing service/purchase (provide details in Service/Item Description section above)
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): 80% of referred YOUTH will have a reduction in gun related offenses and gun related violations during the course of program participation. 80% of referred YOUTH will have successfully completed the program while remaining in the community. 75% of YOUTH participants will engage in a pro-social activity prior to program termination.

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). If there are multiple vendors copy this table and complete for each vendor.	
Vendor Name and address: Cleveland Peacemakers, Inc. 6114 Broadway Ave. Cleveland, OH 44127	Owner, executive director, other (specify): Kevin McDaniel -Interim Executive Director
P.A.L.S. For Healing 4700 Rockside Rd. Suite 135 Independence, OH 44131	Misty Ramos-Saviano – Executive Director
Legacies Empowered, Inc. 6100 Oak Tree Blvd S. Independence, OH 44131	Charde' Hollins
Renounce Denounce Gang Intervention Program 26155 Euclid Ave. Euclid, OH 44132	Laron Douglas-Executive Director
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# _____ ☐ RFB ☐ RFP ☐ RFQ ☐ Informal ☐ Formal Closing Date:	Provide a short summary for not using competitive bid process. Grant funded contract – the vendors were identified as the right fit for the VIP Alliance. *See Justification for additional information.
The total value of the solicitation:	☒ Exemption
Number of Solicitations (sent/received) /	☐ State Contract, list STS number and expiration date

	☐ 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? ☐ Yes ☐ No, please explain. If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	☐ Sole Source ☐ Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: ☐ Yes ☐ No, please explain:	☐ Government Purchase
	☐ Alternative Procurement Process
How did pricing compare among bids received?	☐ Contract Amendment - (list original procurement)
	☐ Other Procurement Method, please describe:

Is Purchase/Services technology related ☒ No ☐ Yes If yes, list date of TAC approval and answer the questions below.
List date of TAC approval | Date: ☐ Check if item on IT Standard List of approved purchase and provide date of TAC approval. ☐ Check if item is ERP related? ☒ No ☐ Yes.
Are the purchases compatible with the new ERP system? ☐ Yes ☐ No, please explain.

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. This is a budgeted agreement 100% funded by the (VIP) Violence Intervention Program Grant.
Is funding for this included in the approved budget? ☒ Yes ☐ No (if "no" please explain): Grant Funded
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit. JC285160
Payment Schedule: ☒ Invoiced ☐ Monthly ☐ Quarterly ☐ One-time ☐ Other (please explain):

Provide status of project.	
Is contract/purchase late ☐ No ☒ Yes, In the fields below provide reason for late and timeline of late submission	
Reason: Considerable time and effort were invested in drafting, reviewing, and obtaining approval for the contract.	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	07/10/2025
Date documents were requested from vendor:	01/06/2026
Date of insurance approval from risk manager:	02/17/2026

Date Department of Law approved Contract:	12/29/2025
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? ☒ No ☒ Yes (if yes, please explain)	
Have payments been made? ☒ No ☐ Yes (if yes, please explain)	

HISTORY (see instructions):

BC2026-399

Title	County Prosecutor's Request for Purchase of NetApp Data Infrastructure Insights Subscription
Department or Agency Name	Cuyahoga County Prosecutor
Requested Action	☐ Contract ☐ Agreement ☐ Lease ☐ Amendment ☐ Revenue Generating ☒ Purchase Order ☐ Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
0	26002636 STAC	MNJ Technologies Direct, Inc.	8-01-2026 – 7-31-2027	$11,894.00	pending	pending

Service/Item Description (include quantity if applicable). When submitting an amendment, address any changes to the time period of the agreement, reduction or addition of funds, changes to the existing scope of services, changes to service rates/costs, and retroactive applicability of the changes, if any. The Prosecutor's Office is seeking to renew NetApp Infrastructure Insights to continue supporting our storage security, auditing, and performance-monitoring needs. For more than 2 years, we have used its Workload Security features to identify potential ransomware activity and provide visibility into user access for storage auditing. The new license also expands our observability capabilities, giving us valuable insight into storage and VMware performance to improve troubleshooting, planning, and operational efficiency.
Indicate whether: ☐ New service/purchase ☒ Existing service/purchase ☐ Replacement for an existing service/purchase (provide details in Service/Item Description section above)
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): Improve troubleshooting, planning, and operational efficiency.

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). If there are multiple vendors copy this table and complete for each vendor.	
Vendor Name and address:	Owner, executive director, other (specify):
MNJ Technologies Direct, Inc. 1025 Busch Parkway Buffalo Grove, IL 60089	Jimmy Lochner, Account Manager
Vendor Council District: N/A	Project Council District: N/A
If applicable provide the full address or list the municipality(ies) impacted by the project.	N/A

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ ☐ RFB ☐ RFP ☐ RFQ ☐ Informal ☐ Formal Closing Date:	Provide a short summary for not using competitive bid process. Purchased through state contract *See Justification for additional information.
The total value of the solicitation:	☐ Exemption
Number of Solicitations (sent/received) /	☒ State Contract, list STS number and expiration date STS 534354 expires 12-19-2026 ☐ 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? ☐ Yes ☐ No, please explain. If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	☐ Sole Source ☐ Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: ☐ Yes ☐ No, please explain:	☐ Government Purchase
	☐ Alternative Procurement Process
How did pricing compare among bids received?	☐ Contract Amendment - (list original procurement)
	☐ Other Procurement Method, please describe:

Is Purchase/Services technology related ☐ No ☐ Yes If yes, list date of TAC approval and answer the questions below.

List date of TAC approval	Date: 7-15-2026

☒ Check if item on IT Standard List of approved purchase and provide date of TAC approval.
☐ Check if item is ERP related? ☒ No ☐ Yes.

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

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed.
100% General Fund

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

List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit.
PS100100

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

Provide status of project. N/A

Is contract/purchase late ☐ No ☐ 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:	

Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:

If late, have services begun? ☐ No ☐ Yes (if yes, please explain)

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

HISTORY (see instructions):

Prior Original (O) and subsequent Amendments (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.

0	25002616 QUOT	MNJ Technologies Direct, Inc.	8-01-2025 – 7-31-2026	$2,400.00	N/A	N/A

BC2026-400

Title	6340 - 2026 - Jail Data Set Analysis
Department or Agency Name	Department of Public Safety and Justice Services
Requested Action	☒ Contract ☐ Agreement ☐ Lease ☐ Amendment ☐ Revenue Generating ☐ Purchase Order ☐ Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
O	6340	Tammy and Taylor Meredith LLC.,	Upon execution – ten weeks after execution	22,900.00	Pending	Pending

Service/Item Description (include quantity if applicable). When submitting an amendment, address any changes to the time period of the agreement, reduction or addition of funds, changes to the existing scope of services, changes to service rates/costs, and retroactive applicability of the changes, if any. The Department of Public Safety and Justice Services plans to contract with Tammy and Taylor Meredith LLC., for ten weeks after the execution date for analysis of the Cuyahoga County Jail data in the amount of $22,900.00
Indicate whether: ☒ New service/purchase ☐ Existing service/purchase ☐ Replacement for an existing service/purchase (provide details in Service/Item Description section above)
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): Analyze Cuyahoga County jail data to produce a comprehensive jail population profile.

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). If there are multiple vendors copy this table and complete for each vendor.	
Vendor Name and address:	Owner, executive director, other (specify):
Tammy and Taylor Meredith LLC 6700 Long Rapids Road, Alpena MI 49707	Tammy Meredith CEO
Vendor Council District:	Project Council District:

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

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ ☐ RFB ☐ RFP ☐ RFQ ☐ Informal ☐ Formal Closing Date:	Provide a short summary for not using competitive bid process. The vendor is familiar with the data provided and is building on previous analysis. *See Justification for additional information.
The total value of the solicitation:	☒ Exemption
Number of Solicitations (sent/received) /	☐ State Contract, list STS number and expiration date ☐ 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? ☐ Yes ☐ No, please explain. If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	☐ Sole Source ☐ Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: ☐ Yes ☐ No, please explain:	☐ Government Purchase
	☐ Alternative Procurement Process
How did pricing compare among bids received?	☐ Contract Amendment - (list original procurement)
	☐ Other Procurement Method, please describe:

Is Purchase/Services technology related ☒ No ☐ Yes If yes, list date of TAC approval and answer the questions below.
List date of TAC approval | Date: ☐ Check if item on IT Standard List of approved purchase and provide date of TAC approval. ☐ Check if item is ERP related? ☐ No ☐ Yes.
Are the purchases compatible with the new ERP system? ☐ Yes ☐ No, please explain.

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 100% General Fund
Is funding for this included in the approved budget? ☒ Yes ☐ No (if "no" please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit. PJ100105
Payment Schedule: ☐ Invoiced ☐ Monthly ☐ Quarterly ☒ One-time ☐ Other (please explain):

Provide status of project. This project is currently awaiting approval to begin services.	
Is contract/purchase late ☒ No ☐ 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:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? ☐ No ☐ Yes (if yes, please explain)	
Have payments been made? ☐ No ☐ Yes (if yes, please explain)	

HISTORY (see instructions):

BC2026-401

Title	Contract with Cleveland Christian Home dba The Centers for the HOPE Campus Operational Services
Department or Agency Name	HHS: Office of the Director
Requested Action	☒ Contract ☐ Agreement ☐ Lease ☐ Amendment ☐ Revenue Generating ☐ Purchase Order ☐ Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
O	6330	Cleveland Christian Home (CCH)/The	7/1/2025-12/31/2026	$500,000.00	Pending	pending

		Centers' Hope Campus dba The Centers				

Service/Item Description (include quantity if applicable).
Service is to address the shortage of residential placements and supports for youth in the custody of the Cuyahoga County Division of Children and Family Services ("CCDCFS") Contract with Cleveland Christian Home dba The Centers for the HOPE Campus Operational Services from 7.1.2025 - 12.31.2026 in the amount of $500,000.00.
Indicate whether: ☒ New service/purchase ☐ Existing service/purchase ☐ Replacement for an existing service/purchase (provide details in Service/Item Description section above)
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): • to address the shortage of residential placements and supports for youth in the custody of the Cuyahoga County Division of Children and Family Services ("CCDCFS") • provide a central location where CCDCFS staff and nonprofits can collaborate to find the best placement for youth as quickly as possible • to govern respective obligations with respect to the grant awarded by The Cuyahoga County Board of Developmental Disabilities to The Centers to support the development and operations of the HOPE Campus

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):
Cleveland Christian Home dba The Centers 4500 Euclid Avenue Cleveland, Ohio 44103	Eric Morse, President and CEO
Vendor Council District: District #7	Project Council District: County Wide
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, as applicable) ☐ RFB ☐ RFP ☐ RFQ ☐ Informal ☐ Formal Closing Date:	Provide a short summary for not using competitive bid process. Grant Award to College Now A grant was awarded to The Centers specifically for the development and operational services of the Child Wellness Campus.

	*See Justification for additional information.
The total value of the solicitation:	☒ Exemption
Number of Solicitations (sent/received) /	☐ State Contract, list STS number and expiration date ☐ 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? ☐ Yes ☐ No, please explain. If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	☐ Sole Source ☐ Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: ☐ Yes ☐ No, please explain:	☐ Government Purchase
	☐ Alternative Procurement Process
How did pricing compare among bids received?	☐ Contract Amendment - (list original procurement) originally an RFP exmt
	☐ Other Procurement Method, please describe:

Is Purchase/Services technology related ☐ Yes ☒ No. If yes, complete section below:	
☐ 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? ☐ No ☐ Yes, answer the below questions.	
Are the purchases compatible with the new ERP system? ☐ Yes ☐ No, please explain.	

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 100% Cuyahoga County Board of Developmental Disabilities Grant
Is funding for this included in the approved budget? ☒ Yes ☐ No (if "no" please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit. HS215100 / 56010 / UCH05510
Payment Schedule: ☐ Invoiced ☐ Monthly ☐ Quarterly ☒ One-time ☐ Other (please explain):

Provide status of project. Project is currently functioning as intended. These funds are needed to continue the operations.
Is contract/purchase late ☐ No ☒ Yes, In the fields below provide reason for late and timeline of late submission

Reason: We needed to process the grant funding source and negotiate final payment with the vendor	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	2/1/2026
Date documents were requested from vendor:	7/15/2026
Date of insurance approval from risk manager:	6/26/2026
Date Department of Law approved Contract:	7/17/2026
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? ☐ No ☒ Yes (if yes, please explain) ongoing services	
Have payments been made? ☒ No ☐ Yes (if yes, please explain)	

HISTORY (see instructions): see chart above

C.- Exemptions

BC2026-402

TITLE	Alternative Procurement request for On-Call Heavy Construction Services Master Contract (max of 5 contractors) for Road & Bridge repairs, $2M over 3 years
DEPARTMENT OR AGENCY NAME	Public Works 2026

REQUESTED ACTION	☒ Alternative Procurement ☐ Amendment to Alternative Procurement

LIST MOST RECENT/PRIOR ALTERNATIVE PROCUREMENT APPROVALS FOR THIS REQUEST; INCLUDING AMENDMENTS, AS APPLICABLE	DATE BOC APPROVED/COUNCIL'S JOURNAL DATE	APPROVAL NO.
	9/6/2022	BC2022-536
DESCRIPTION/ EXPLANATION OF REQUEST:	Department of Public Works is requesting approval to utilize alternative procurement methods for future RFP #TBD for On-Call Heavy Construction Services for future Road and Bridge repairs and maintenance. The anticipated start-completion date will be from the date of execution for a period of three years for a maximum of five contractors for a total of $2,000,000.	

	The primary goal of this contract will be to conduct a competitive RFP process to select a maximum of five contractors that are County eligible and ODOT Pre-Qualified contractors for On-Call heavy construction services for Road and Bridge maintenance and repairs. Projects will be on a task-order basis for both routine maintenance and also emergency projects. 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 standard ODOT/County bid items.

FUNDING SOURCE:	Is funding for this included in the approved budget?
	☒ YES ☐ NO (if "no" please explain):
	Please provide the complete, proper name of the funding source (no acronyms). Include percentages of funding if using more than one source.
	Road & Bridge funds 100% (PW270205)

D. - Consent Agenda

BC2026-403
(See related items for proposed travel/memberships for the week of 8/3/2026 in Section D above).

BC2026-404
(See related items for proposed purchases for the week of 8/3/2026 in Section D above).

V – OTHER BUSINESS

Item of Note (non-voted)

ION2026-87

TITLE	2025 Sears Fund
DEPARTMENT OR AGENCY NAME	Fiscal Office

REQUESTED ACTION – PLEASE CHECK ALL THAT IS APPLICABLE *PLEASE INCLUDE SUPPORTING DOCUMENTS AS ATTACHMENTS TO THE SUBMISSION IN ONBASE.	☐ Authority to Apply (for grants with Cash Match and/or Subrecipients). ☐ Grant Application (for grants with no Cash Match or Subrecipients). ➢ Is County Executive signature required ☐ Yes ☐ No ☐ Grant Agreement (when the signature of the County Executive is required). ☒ Grant Award (when the signature of the County Executive is not required).

	☐ Grant Amendments ☐ Pre-Award Conditions Forms (when no signature is required by the County Executive)

GRANT CURRENT/ HISTORICAL INFO	NAME OF GRANT	TIME PERIOD	AMOUNT	PREVIOUS APPROVAL (PLEASE PROVIDE BOC MEETING DATE)	APPROVAL NO.
ORIGINAL (O)	Sears Consumer Protection and Education Fund in connection with the FY2025 Cycle	N/A	$10,000.00	Pending	Pending
AMENDMENT (A-1)					
AMENDMENT (A-)					
DESCRIPTION/ EXPLANATION OF THE GRANT:		Developing a Scam Check Tool partnering with banks and credit unions to disrupt scams at the teller window.			
PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):		Reduce scam losses incurred by Cuyahoga County residents Stop Scams at the teller window Partner with Banks to increase awareness and scam prevention			

GRANT SUBRECIPIENTS – ARE THERE ANY SUBRECIPIENTS THAT ARE WRITTEN INTO THE GRANT ☐ YES ☒ NO	
IF ANSWERED YES, PLEASE COMPLETE THE BOXES BELOW AS IT PERTAINS TO THE SUBRECIPIENT. FOR MULTIPLE SUBRECIPIENTS, PLEASE COPY THIS SECTION AND COMPLETE FOR EACH SUBRECIPIENT.	
SUBRECIPIENT'S NAME AND ADDRESS:	
LIST THE (OWNERS, EXECUTIVE DIRECTOR, OTHER(specify) FOR THE CONTRACTOR/VENDOR	
SUBRECIPIENT'S COUNCIL DISTRICT:	
DOLLAR AMOUNT ALLOCATED:	

PROJECT COUNCIL DISTRICT:	
PROVIDE FULL ADDRESS/LIST MUNICIPALITY(IES) IMPACTED BY GRANT/PROJECT, IF APPLICABLE.	

FUNDING SOURCE:	Please provide the complete, proper name of the funding source (no acronyms) for receipt of this grant.
	Massachusetts Attorney General
	Does this require a Cash Match by the County? ☐ YES ☒ NO

	If yes, how much is required for the Cash Match by the County? Also, please provide the complete, proper name of the County funding source (no acronyms) that will be used for the Cash Match. Include percentages of funding if using more than one County funding source for the Cash Match.

ION2026-88

TITLE	Public Safety and Justice Services on behalf of the Medical Examiner's Office; Permission to Apply for the FY 2026 Invited to Apply – National Integrated Ballistic Information (NIBIN) Modernization Program grant
DEPARTMENT OR AGENCY NAME	Public Safety and Justice Services on behalf of the Medical Examiner's

REQUESTED ACTION – PLEASE CHECK ALL THAT IS APPLICABLE *PLEASE INCLUDE SUPPORTING DOCUMENTS AS ATTACHMENTS TO THE SUBMISSION IN ONBASE.	☐ Authority to Apply *(for grants with Cash Match and/or Subrecipients).* ☒ Grant Application *(for grants with no Cash Match or Subrecipients).* ➢ *Is County Executive signature required* ☒ Yes ☐ No ☐ Grant Agreement *(when the signature of the County Executive is required)*. ☐ Grant Award (*when the signature of the County Executive is not required).* ☐ Grant Amendments ☐ Pre-Award Conditions Forms (*when no signature is required by the County Executive)*

GRANT CURRENT/ HISTORICAL INFO	NAME OF GRANT	TIME PERIOD	AMOUNT	PREVIOUS APPROVAL (PLEASE PROVIDE BOC MEETING DATE)	APPROVAL NO.
ORIGINAL (O)	DOJ FY 2026 Invited to Apply – National Integrated Ballistic Information (NIBIN) Modernization Program	10/01/2026 – 09/30/2031	$300,000		
AMENDMENT (A-1)					
AMENDMENT (A-)					

DESCRIPTION/ EXPLANATION OF THE GRANT:	This is an initiation-only grant to modernize National Integrated Ballistic Information (NIBIN) technology at 194 existing sites currently utilizing outdated technology. The grant will be used to purchase new, ATF-approved, NIBIN-compatible ballistic imaging equipment for the Firearms and Toolmark Unit of the Cuyahoga County Regional Forensic Science Laboratory. Grant funds will cover the cost of new NIBIN-compatible equipment and maintenance costs for five years. As part of the application, there is an MOU with the ATF that must be signed. This MOU establishes an ATF National Integrated Ballistic Information Network (NIBIN) and defines the responsibilities of the parties.
PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):	Goal of the grant: Improve nationwide access to NIBIN through modernization of ballistic imaging technology at NIBIN sites, enhancing forensic ballistic capabilities for state, local, and tribal law enforcement agencies to investigate and solve gun crimes committed by illegal aliens, counter gang and criminal activity including drug and human trafficking operations.
	Grant Objective 1: Replace end-of-life equipment at 194 existing NIBIN sites and deploy new NIBIN-compatible technology to ensure reliable, modern ballistic analysis capability nationwide.
	Grant Objective 2: Increase ballistic evidence processing capacity, reduce backlogs, and improve gun crime case clearance rates through enhanced NIBIN technology and crime gun intelligence best practices.

GRANT SUBRECIPIENTS – ARE THERE ANY SUBRECIPIENTS THAT ARE WRITTEN INTO THE GRANT ☐ YES ☒ NO	
IF ANSWERED YES, PLEASE COMPLETE THE BOXES BELOW AS IT PERTAINS TO THE SUBRECIPIENT. FOR MULTIPLE SUBRECIPIENTS, PLEASE COPY THIS SECTION AND COMPLETE FOR EACH SUBRECIPIENT.	
SUBRECIPIENT'S NAME AND ADDRESS:	
LIST THE (OWNERS, EXECUTIVE DIRECTOR, OTHER(specify) FOR THE CONTRACTOR/VENDOR	
SUBRECIPIENT'S COUNCIL DISTRICT:	
DOLLAR AMOUNT ALLOCATED:	

PROJECT COUNCIL DISTRICT:	
PROVIDE FULL ADDRESS/LIST MUNICIPALITY(IES) IMPACTED BY GRANT/PROJECT, IF APPLICABLE.	

FUNDING SOURCE:	Please provide the complete, proper name of the funding source (no acronyms) for receipt of this grant.
	U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance
	Does this require a Cash Match by the County? ☐ YES ☒ NO
	If yes, how much is required for the Cash Match by the County? Also, please provide the complete, proper name of the County funding source (no acronyms) that will be used for the Cash Match. Include percentages of funding if using more than one County funding source for the Cash Match.

ION2026-89

TITLE	FY25 Violence Reduction Landscape Analysis & Strategic Plan Grant Award
DEPARTMENT OR AGENCY NAME	Cuyahoga County Public Safety and Justice Services, Office of Violence

REQUESTED ACTION – PLEASE CHECK ALL THAT IS APPLICABLE *PLEASE INCLUDE SUPPORTING DOCUMENTS AS ATTACHMENTS TO THE SUBMISSION IN ONBASE.	☐ Authority to Apply (for grants with Cash Match and/or Subrecipients). ☐ Grant Application (for grants with no Cash Match or Subrecipients). ➢ Is County Executive signature required ☐ Yes ☒ No ☐ Grant Agreement (when the signature of the County Executive is required). ☒ Grant Award (when the signature of the County Executive is not required). ☐ Grant Amendments ☐ Pre-Award Conditions Forms (when no signature is required by the County Executive)

GRANT CURRENT/ HISTORICAL INFO	NAME OF GRANT	TIME PERIOD	AMOUNT	PREVIOUS APPROVAL (PLEASE PROVIDE BOC MEETING DATE)	APPROVAL NO.
ORIGINAL (O)	FY25 Violence Reduction Landscape Analysis & Strategic Plan	7/1/2026 - 12/31/2027	$200,000.00		
AMENDMENT (A-1)					
AMENDMENT (A-)					
DESCRIPTION/ EXPLANATION OF THE GRANT:		The Cuyahoga County Office of Violence Prevention (OVP) in partnership with the National Institute for Criminal Justice Reform (NICJR), will lead a coordinated effort to assess the county's violence landscape, quantify the fiscal impact of gun violence, develop a unified strategic plan, and			

	strengthen the county's data infrastructure through a public-facing violence reduction dashboard.
PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):	Completion of a comprehensive Violence Reduction Landscape Analysis.
	Delivery of a countywide Violence Reduction Strategic Plan.
	Deployment of a public-facing violence reduction dashboard.

GRANT SUBRECIPIENTS – ARE THERE ANY SUBRECIPIENTS THAT ARE WRITTEN INTO THE GRANT ☒ YES ☐ NO	
IF ANSWERED YES, PLEASE COMPLETE THE BOXES BELOW AS IT PERTAINS TO THE SUBRECIPIENT. FOR MULTIPLE SUBRECIPIENTS, PLEASE COPY THIS SECTION AND COMPLETE FOR EACH SUBRECIPIENT.	
SUBRECIPIENT'S NAME AND ADDRESS:	National Institute for Criminal Justice Reform (NICJR) Oakland, California
LIST THE (OWNERS, EXECUTIVE DIRECTOR, OTHER(specify) FOR THE CONTRACTOR/VENDOR	David Muhammad, Executive Director
SUBRECIPIENT'S COUNCIL DISTRICT:	All
DOLLAR AMOUNT ALLOCATED:	$200,000.00

FUNDING SOURCE:	Please provide the complete, proper name of the funding source (no acronyms) for receipt of this grant.
	The Cleveland Foundation
	Does this require a Cash Match by the County? ☐ YES ☒ NO
	If yes, how much is required for the Cash Match by the County? Also, please provide the complete, proper name of the County funding source (no acronyms) that will be used for the Cash Match. Include percentages of funding if using more than one County funding source for the Cash Match.

ION2026-90

TITLE	FY24 RAPID REHOUSING FOR SINGLES HOMELESS CONTINUUM OF CARE RENEWAL – GRANT AMENDMENT
DEPARTMENT OR AGENCY NAME	Office of Homeless Services

REQUESTED ACTION – PLEASE CHECK ALL THAT IS APPLICABLE *PLEASE INCLUDE SUPPORTING DOCUMENTS AS ATTACHMENTS TO THE SUBMISSION IN ONBASE.	☐ Authority to Apply (for grants with Cash Match and/or Subrecipients). ☐ Grant Application (for grants with no Cash Match or Subrecipients). ➢ Is County Executive signature required ☐ Yes ☐ No ☐ Grant Agreement (when the signature of the County Executive is required). ☐ Grant Award (when the signature of the County Executive is not required). ☒ Grant Amendments

	☐ Pre-Award Conditions Forms (when no signature is required by the County Executive)

GRANT CURRENT INFO	NAME OF GRANT	TIME PERIOD	AMOUNT	PREVIOUS APPROVAL (PLEASE PROVIDE BOC MEETING DATE)	APPROVAL NO.
ORIGINAL (O)	Continuum of Care Competition/ Rapid Rehousing for Singles	10/1/25-9/30/26	HUD-$584,302.00 The subrecipient(s) awarded funds are required to provide a combined cash match of 25% - $146,075.50	5/19/2025	BC2025-334
AMENDMENT (A-1)	Continuum of Care Competition/ Rapid Rehousing for Singles	10/1/25-9/30/26	$0 (Budget line-item revision)	Pending	Pending

DESCRIPTION/EXPLANATION OF THE GRANT:	OHS received this grant through the FY2024 U.S. Department of Housing and Urban Development Continuum of Care Competition. Rapid Rehousing for Singles is designed to rapidly connect single adults experiencing literal homelessness to permanent housing through a tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services. Locally this supports rapid rehousing for single adults through the Salvation Army PASS Program. This is a budget line adjustment amendment only. There is no change to the grant term or funding amount.
PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):	Facilitate rapid exit from shelter to permanent housing using a housing-first approach
	Provide ongoing rental assistance and case management to homeless single adults
	Support housing stability through coordination with community-based resources

GRANT SUBRECIPIENTS – ARE THERE ANY SUBRECIPIENTS THAT ARE WRITTEN INTO THE GRANT ☒ YES ☐ NO	
IF ANSWERED YES, PLEASE COMPLETE THE BOXES BELOW AS IT PERTAINS TO THE SUBRECIPIENT. FOR MULTIPLE SUBRECIPIENTS, PLEASE COPY THIS SECTION AND COMPLETE FOR EACH SUBRECIPIENT.	
SUBRECIPIENT'S NAME AND ADDRESS:	The Salvation Army

LIST THE (OWNERS, EXECUTIVE DIRECTOR, OTHER(specify) FOR THE CONTRACTOR/VENDOR	Ayana M. Vasquez, Corporate Legal Secretary Beau Hill, Executive Director (Correspondence) 440 West Nyack Rd West Nyack, NY 10994
SUBRECIPIENT'S COUNCIL DISTRICT:	7
DOLLAR AMOUNT ALLOCATED:	$584,302.00
PROJECT COUNCIL DISTRICT:	County-wide
PROVIDE FULL ADDRESS/LIST MUNICIPALITY(IES) IMPACTED BY GRANT/PROJECT, IF APPLICABLE.	County-wide

FUNDING SOURCE:	Please provide the complete, proper name of the funding source (no acronyms) for receipt of this grant.
	100% U.S. Department of Housing and Urban Development in connection with FY24 Cuyahoga Rapid Rehousing for Singles. The subrecipient(s) awarded funds are required to provide a combined cash match of 25% - $146,075.50
	Does this require a Cash Match by the County? ☐ YES ☒ NO
	If yes, how much is required for the Cash Match by the County? Also, please provide the complete, proper name of the County funding source (no acronyms) that will be used for the Cash Match. Include percentages of funding if using more than one County funding source for the Cash Match.

ION2026-91
(See related list of Contracts up to $10,000.00 and Various Agreements – processed and executed for the week of 8/3/2026 in Section V. above).

VI – PUBLIC COMMENT

VII – ADJOURNMENT