Cuyahoga County Board of Control Agenda
Monday, August 17, 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 – 8/10/2026

III. – PUBLIC COMMENT

IV. – CONTRACTS AND AWARDS

A. – Tabled Items

B. – New Items for Review

BC2026-421

Department of Public Works, recommending an award on Purchase Order No. 26002790 to American Interiors, Inc. in the amount not-to-exceed $192,009.30 for a joint cooperative purchase and installation of various furniture and fixtures for the Archive Document Management space located in the Halle Building.

Funding Source: 50% General Fund and 50% Real Estate Assessment Fund

BC2026-422

Department of Public Works, submitting an amendment to Contract No. 5067 with SONA Construction, LLC for Cuyahoga County Metzenbaum Building Elevator Modernization Project to expand the scope of services to include abatement of asbestos related materials, additional work on existing electrical, plumbing, and heating systems, and for additional funds in the amount not-to-exceed $178,864.04, effective upon signatures of all parties through project completion.

Funding Source: General Fund

BC2026-423

Department of Public Works, recommending awards on RQ16374 and enter into contracts with various providers (110-13) in the total amount not-to-exceed $900,000.00 for general engineering services, effective upon signatures of all parties for a period of 3 years:

a) Contract No. 6303 with AECOM Services of Ohio, Inc. in the amount not-to-exceed $450,000.00.
b) Contract No. 6304 with Euthenics, Inc. in the amount not-to-exceed $450,000.00.

Funding Source: Road and Bridge Fund

BC2026-424

Department of Housing and Community Development, recommending an award and enter into Agreement No. 6320 with City of Euclid in the amount not-to-exceed $155,890.18 for FY2020 HOME funded activities for the period 1/1/2026 – 12/31/2026.

Funding Source: HOME Investment Partnership Grant

BC2026-425

Department of Information Technology, recommending an award on Purchase Order No. 26002702 to MNJ Technologies Direct, Inc. in the amount not-to-exceed $11,856.00 for a joint cooperative purchase of (4) each HP Z2 Mini G1i Workstations and monitors for the Central Booking unit at the Justice Center.

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

BC2026-426

Department of Information Technology, recommending an award on Purchase Order No. 26002772 with Carahsoft Technology Corp. in the amount not-to-exceed $39,439.40 for a state contract purchase for the renewal of (110) Slack Enterprise Grid licenses for the period 9/10/2026 - 9/9/2027.

Funding Source: General Fund

BC2026-427

Court of Common Pleas/Juvenile Court Division, submitting an amendment to Contract No. 3881 with Project Lift Behavioral Health Services for Restorative Justice Diversion Program for the period 7/1/2023 – 6/30/2026 to extend the time period to 6/30/2027, to update insurance requirements as outlined in Exhibit 1 and for additional funds in the amount not-to-exceed $27,500.00, effective 7/1/2026.

Funding Source: RECLAIM Grant

BC2026-428

Court of Common Pleas/Juvenile Court Division, submitting an amendment to Contract No. 4276 (fka Contract No. 4043) with Love Train Ministries for structured, pro-social leadership programs and mentoring services for court referred males ages 11 to 18 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 as outlined in Exhibit 1 and for additional funds in the amount not-to-exceed $14,250.00, effective 7/1/2026.

Funding Source: RECLAIM Grant

BC2026-429

Court of Common Pleas/Juvenile Court Division, submitting an amendment to a Master Contract with various providers for Substance Abuse Treatment Program services for Court-referred youth for the period 7/1/2021 – 6/30/2026 to extend the time period to 6/30/2027, to update the unit rate and/or monthly rates as outlined in Exhibit 1, to update insurance requirements as outlined in Exhibit 2 and for additional funds in the total amount not-to-exceed $45,000.00, effective 7/1/2026:

a) Contract No. 5549 (formerly Contract Nos. 4911, 2588 and 1794) with Catholic Charities Diocese of Cleveland, dba Catholic Charities in the anticipated amount not-to-exceed $22,500.00.

b) Contract No. 5351 (formerly Contract Nos. 4912, 3002 and 1807) OhioGuidestone in the anticipated amount not-to-exceed $22,500.00.

Funding Source: RECLAIM Grant

BC2026-430

Court of Common Pleas/Juvenile Court Division, submitting an amendment to Contract No. 6375 (fka Contract Nos. 5835, 5056, 2792 and 413) with Reaching Above Hopelessness and Brokenness Ministries, Inc. for trauma-informed mentoring services for youth assigned to the Safe Harbor Docket for the period 7/1/2020 – 6/30/2026 to extend the time period to 6/30/2027, to change the terms setting forth unit rate and/or monthly rates with an hourly rate, to update insurance requirements as outlined in Exhibit 1 and for additional funds in the amount not-to-exceed $30,000.00, effective 7/1/2026.

Funding Source: RECLAIM Grant

BC2026-431

Court of Common Pleas/Juvenile Court Division, recommending an award and enter into Agreement No. 6346 with City of Highland Heights in the amount not-to-exceed $19,793.47 for Community Diversion Program services for the period 4/1/2026 - 12/31/2027.

Funding Source: Health and Human Services Levy

BC2026-432

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

a) Submitting an RFP exemption, which will result in an award recommendation to Cleveland Mediation Center in the amount not-to-exceed $23,400.00 for a pilot project of facilitation and mediation services for select Permanent Supportive Housing system case conferences for the period 8/1/2026 – 12/31/2026.

b) Recommending an award and enter into Contract No. 6336 with Cleveland Mediation Center in the amount not-to-exceed $23,400.00 for a pilot project of facilitation and mediation services for select Permanent Supportive Housing system case conferences for the period 8/1/2026 – 12/31/2026.

Funding Source: U.S. Department of Housing and Urban Development

C. – Exemptions

BC2026-433

Department of Public Works, recommending to amend Board of Control Approval No. BC2025-536 dated 8/18/2025, which authorized an alternative procurement process resulting in purchase orders to various vendors for the purchase of various automotive repair services in connection with vehicles involved in an accident for the Fleet Division on an as-needed basis for the period 8/14/2023 – 8/13/2026 to extend the time period to 12/31/2026 and to change the total amount not-to-exceed amount from $200,000.00 to $225,000.00:

a) Premier Auto Body & Collision Center, LLC
b) Valore's Truck Painting & Body Co.

Funding Source: County Fleet Division and charged back to County Departments

D. – Consent Agenda

BC2026-434

Fiscal Department, presenting proposed travel/membership requests for the week of 8/17/2026:

Dept:	Sheriff's Department
Event:	Law Enforcement Executive Training Great Lakes Leadership Seminar
Source:	U.S Department of Justice-Federal Bureau of Investigation
Location:	Niagara Falls, NY

Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Steven Bartczak	9/20/2026-9/25/2026	$450.00	$204.00	$550.00	$0.00	$0.00	$1,204.00	Continuing Professional Training Fund

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

Purpose:
Travel to the State of New York to attend a Seminar with 79 other Law Enforcement Executives to discuss leadership, officer wellness, media engagement, and communication between ranks.

BC2026-435

Department of Purchasing, presenting proposed purchases for the week of 8/17/2026:

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
26002755	Miscellaneous rigid parts for automotive repair	Department of Public Works	Amico LLC dba United Business Supply	Not-to-exceed $25,000.00	Sanitary Sewer Fund

V- OTHER BUSINESS

Item of Note (non-voted)

ION2026-95

Department of Public Works, submitting a Master Agreement of Cooperation with various municipalities for FY2025 pavement preventative maintenance services in connection with various road projects:

a) City of Lakewood – Hillard Road from Riverside Drive to Warren Road
b) Cities of North Royalton and Parma – Sprague Road Part 2 from West 130th Street to York Road
c) City of Warrensville Heights – Harvard Road from East 190th Street to Warrensville Center Road

Funding Source: Road and Bridge Fund

ION2026-96

Court of Common Pleas/Juvenile Court Division submitting a grant award from Ohio Department of Mental Health and Addiction Services in the amount of $50,000.00 for personnel costs, behavioral treatment for substance use and mental health disorders, drug/alcohol testing, medication assisted treatment and various recovery supports for the operation of the SFY2027 Drug Court Specialized Dockets for the period 7/1/2026 – 6/30/2027.

Funding Source: Ohio Department of Mental Health and Addiction Services

ION2026-97

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
13103	4634	UBIZ Venture Capital	For design and administration of a Small Business Program with a focus on minority and women-owned businesses	$0.00	Department of Development	8/12/2024-6/30/2026**; to extend the time period to 9/30/2026**	(Original) Economic Development Fund	(Executive) 8/10/2026 (Law) 8/10/2026

VI – PUBLIC COMMENT

VII – ADJOURNMENT

Minutes
Cuyahoga County Board of Control
Monday, August 10, 2026 - 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:
Katherine A. Gallagher, Chief of Operations & Community Innovation County Executive Administration (Alternate for Chris Ronayne, County Executive)
Michael Chambers, Fiscal Officer, serving as Chairman
Michael Dever, Director Department of Public Works
Paul Porter, Director, Department of Purchasing
Laura Black, County Council (Alternate for Councilmember Meredith Turner)
Cynthia Mason, County Council (Alternate for Councilmember Michael Houser)
Councilmember Robert Schleper

II. – REVIEW MINUTES – 8/3/2026

Michael Chambers motioned to approve the minutes from the August 3, 2026, meeting; Michael Dever 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

BC2026-405

Department of Information Technology on behalf of the Medical Examiner's Office, recommending an award on Purchase Order No. 26002686 to MNJ Technologies Direct, Inc. in the amount not-to-exceed $31,630.00 for a joint cooperative purchase of (20) Online double-conversion uninterruptible power supply units for the Medical Examiner's Office equipment.

Funding Source: Coroners Lab Fund

Brianna Witt, Department of Information Technology, presented. There were no questions. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2026-405 was approved by unanimous vote.

BC2026-406

Department of Information Technology, recommending an award on Purchase Order No. 26002693 to Logicalis, Inc.in the amount not-to-exceed $38,136.74 for a joint cooperative purchase of (12) transceivers and various parts for the NetApp enterprise storage platform.

Funding Source: Capital Improvement Plan

Brianna Witt, Department of Information Technology. There were no questions. Michael Chambers motioned to approve the item; Paul Porter seconded. Item BC2026-406 was approved by unanimous vote.

BC2026-407

Court of Common Pleas/Juvenile Court Division, submitting an amendment to Contract No. 5424 with Project Lift Behavioral Health Services for the Credible Messenger Mentorship and Violence Intervention Program for Court-referred youths ages 13 to 21 identified as moderate to high risk of recidivism for the period 1/1/2025 - 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 $75,000.00, 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 Dever seconded. Item BC2026-407 was approved by unanimous vote.

BC2026-408

Sheriff's Department, submitting an amendment to Purchase Order No. 26000320 to The MetroHealth System for an additional amount not-to-exceed $425,000.00 for reimbursement of offsite medical services for inmates for the period 1/1/2026 – 12/31/2026.

Funding Source: General Fund

Chris Costin, Sheriff's Department, presented. Cynthia Mason asked since the Purchase Order is obviously from January to the end of the year, is the additional amount just to get us through the end of the year. Michael Chambers motioned to approve the item; Michael Dever seconded. Item BC2026-408 was approved by unanimous vote.

BC2026-409

Sheriff's Department on behalf of Court of Common Pleas/Juvenile Court Division, submitting an amendment to an Agreement (via Contract No. 3389) (fka Contract No. 2212) with Securus Technologies, LLC for inmate telecommunications system and maintenance services for the period 9/6/2016 – 9/6/2027, to expand the scope of services by adding the Juvenile Court Division, to incorporate additional terms and fees payable by Juvenile Court in the total amount not-to-exceed $86,320.00, effective upon signatures of all parties.

Funding Source: General Fund

Chris Costin, Sheriff's Department, presented. There were no questions. Michael Chambers motioned to approve the item; Cynthia Mason seconded. Item BC2026-409 was approved by unanimous vote.

BC2026-410

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, submitting an amendment to Contract No. 5838 (fka Contract No. 4498) with Family Promise of Greater Cleveland to provide shelter and rapid re-housing services to families experiencing homelessness or domestic violence in connection with the FY2023 Continuum of Care Homeless Assistance Grant Program for the period 6/1/2024 – 5/31/2026 to extend the time period to 10/31/2026, to change the scope of services to remove rapid re-housing services and modify various terms as outlined in Exhibit I-A, to amend budget terms, to add a vendor credit and branding provision, and for additional funds in the amount not-to-exceed $36,480.00, effective 6/1/2026.

Funding Source: Health and Human Services Levy Fund

Sharonda Mason, Department of Health and Human Services, presented. There were no questions. Michael Chambers motioned to approve the item; Michael Dever seconded. Item BC2026-410 was approved by unanimous vote.

BC2026-411

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, submitting an amendment to Contract No. 5839 (fka Contract No. 4501) with West Side Catholic Center for shelter and rapid re- housing services to families experiencing homelessness throughout Cuyahoga County in connection with the FY2023 Continuum of Care Homeless Assistance Grant Program for the period 6/1/2024 – 5/31/2026 to extend the time period to 10/31/2026, to change the scope of services to remove rapid re-housing services and modify various terms as outlined in Exhibit I-A, to amend budget terms, to add a vendor credit and branding provision, and for additional funds in the amount not-to-exceed $40,855.00, effective 6/1/2026.

Funding Source: Health and Human Services Levy Fund

Sharonda Mason, Department of Health and Human Services, presented. There were no questions. Michael Chambers motioned to approve the item; Cynthia Mason seconded. Item BC2026-411 was approved by unanimous vote.

BC2026-412

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, submitting an amendment to Contract No. 5937 (fka Contract No. 4500) with The Salvation Army to provide shelter and rapid re-housing services to families experiencing homelessness or domestic violence in connection with the FY2023 Continuum of Care Homeless Assistance Grant Program for the period 6/1/2024 – 5/31/2026 to extend the time period to 10/31/2026, to change the scope of services to remove rapid re-housing services and modify various terms as outlined in Exhibit I-B, to amend budget terms, and for additional funds in the amount not-to-exceed $107,256.00, effective 6/1/2026.

Funding Source: Health and Human Services Levy Fund

Sharonda Mason, Department of Health and Human Services, presented. There were no questions. Michael Chambers motioned to approve the item; Michael Dever seconded. Item BC2026-412 was approved by unanimous vote.

C. – Exemptions

BC2026-413

Sheriff's Department, requesting an alternative procurement process, which will result in award recommendations to various providers in the total amount not-to-exceed $150,000.00 for canine related supplies, veterinary services, and boarding for the Corrections and Law Enforcement K-9 Units for the period 1/1/2027 – 12/31/2028:

a) PetSmart, LLC
b) Family Pet Clinic
c) Metropolitan Veterinary Hospitals
d) MedVet
e) VCA Great Lakes Veterinary Specialists
f) Westpark Animal Hospital
g) Clover Leaf Animal Hospital
h) Elyria Animal Hospital
i) Excel K9 Services
j) Provider(s) to be determined for emergency services at the nearest available veterinary clinic

Funding Source: Commissary Funds and Federal Equitable Sharing Account (percentage dependent upon Division)

Chris Costin, Sheriff's Department, presented. There were no questions. Michael Chambers motioned to approve the item; Michael Dever seconded. Item BC2026-413 was approved by unanimous vote.

BC2026-414

Sheriff's Department, requesting an alternative procurement process, which will result in award recommendations to various providers in the total amount not-to-exceed $60,000.00 for various purchases for food service operations in the Jail Kitchen for the period 1/1/2027 - 12/31/2028:

a) W.W. Grainger, Inc. in the amount not-to-exceed $15,000.00.
b) Joshen Paper and Packaging in the amount not-to-exceed $15,000.00.
c) Dean Supply Company in the amount not-to-exceed $15,000.00.
d) Gordon Food Supply in the amount not-to-exceed $15,000.00.

Funding Source: General Fund

Chris Costin, Sheriff's Department, presented. Robert Schleper asked whether all these purchases would fall outside the contract with Summit Foods and these additional pieces would be for paper products and

things you mentioned. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2026-414 was approved by unanimous vote.

BC2026-415

Sheriff's Department, requesting an alternative procurement process, which will result in award recommendations to various providers in the total amount not-to-exceed $75,000.00 for various equipment repairs in the Jail Facilities, for the period 1/1/2027 - 12/31/2028:

a) Belenky, Inc. in the amount not-to-exceed $25,000.00.
b) General Parts, LLC in the amount not-to-exceed $25,000.00.
c) Toyota Material Handling Ohio in the amount not-to-exceed $25,000.00.

Funding Source: General Fund

Chris Costin, Sheriff's Department, presented. Michael Chambers commented so once again, we're just getting ahead of ourselves. That's good. Michael Chambers motioned to approve the item; Michael Dever seconded. Item BC2026-415 was approved by unanimous vote.

BC2026-416

Sheriff's Department, requesting an alternative procurement process, which will result in award recommendations to various providers in the total amount not-to-exceed $400,000.00 for emergency offsite medical services for inmates for the period 1/1/2027 – 12/31/2028:

a) Alternative Body Connections
b) Ascend Clinical, LLC
c) AT Associates
d) Case Dental Medicine Support Services
e) Cleveland Clinic
f) Cleveland Clinic Foundation
g) Cleveland Emergency Medical Service
h) Cleveland Foot & Ankle Clinic
i) Community Dialysis Center – East
j) Davita
k) Donald Martens & Sons Ambulance Service Inc.
l) Emergency Professional Services, Inc
m) Euclid Hospital
n) Faith Medical Associates
o) Fresenius Medical Care
p) Geauga Vision
q) Grady Memorial Hospital
r) Hastings Home Health Center
s) ID Consultants Inc.
t) Lutheran Hospital
u) Manuel Garcia Prosthetics

v) Myocare Nursing Home, Inc
w) Ohio Emergency Care Services
x) Ohio Renal Care West
y) Orthotic Prosthetic Specialties
z) Partners in Nephrology Care LTD
aa) Physicians Ambulance Service
bb) Premier Physicians Centers
cc) Sequenom CMM San Diego
dd) St. Vincent Charity Hospital
ee) St. Vincent Charity Hospital – House Providers
ff) St. Vincent Charity Hospital – Medical Group
gg) University Hospital
hh) University Hospital – Bedford
ii) University Hospital – Emergency Specialists
jj) University Hospital – Medical Group
kk) University Hospital – Parma
ll) University Hospital – Primary Care Practice
mm) Westpark Neurology & Rehabilitation Center
nn) Select Specialty Hospital- Cleveland, LLC

Funding Source: General Fund

Chris Costin, Sheriff's Department, presented. There were no questions. Michael Chambers motioned to approve the item; Michael Dever seconded. Item BC2026-416 was approved by unanimous vote.

D. – Consent Agenda

There were no questions or comments on the Consent Agenda items. Michael Chambers motioned to approve Consent Agenda Item No. BC2026-417 through BC2026-420; Robert Schleper seconded. The Consent Agenda Items were approved by unanimous vote.

BC2026-417

Department of Public Works, recommending to declare (1) printing machine that has no value as surplus County-owned property no longer needed for public use; recommending to discard the surplus property in accordance with EO2012-0001.

Funding Source: N/A

BC2026-418

Office of Innovation and Performance, submitting an amendment to a grant agreement with the Ohio Department of Development for the BroadbandOhio Grant for the period 7/1/2022-3/31/2026 to extend the time period to 10/1/2026; no additional funds required.

Funding Source: Ohio Department of Development BroadbandOhio Grant

BC2026-419

Fiscal Department, presenting proposed travel/membership requests for the week of 8/10/2026:

Fiscal Office, recommending to Amend Board Approval No. BC2026-358, dated 7/13/2026, which authorized Brad Cromes to attend the 2026 NACo Annual Conference sponsored by National Association of Counties for the period 7/17/2026 – 7/21/2026, to increase the expenses from $1,901.77 to $1,962.79.

Dept:	Fiscal Office
Event:	2026 NACo Annual Conference
Source:	National Association of Counties
Location:	New Orleans, LA

Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Brad Cromes	7/17/2026-7/21/2026	$675.00	~~$180.00~~	~~$411.00~~ $573.90	~~$100.00~~ $178.12	$535.77	$1,962.79	Delinquent Tax Assessment Collection

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

Purpose:
We would like to attend NACo's Annual conference and exposition to accept the award for the Taxpayer Assistance Program. We received the 2026 Achievement Award for Best in Category for Financial Management.

Dept:	Fiscal Office
Event:	ICC Wyoming Chapter of Building Officials (WCBO) 50th Conference
Source:	International Code Council ICC
Location:	Cody, WY

Staff	Travel Dates	Registration **	Meals **	Lodging **	Ground TRN/ Mileage **	Air **	Total	Funding Source
David Molnar	8/4/2026 - 8/6/2026	$0.00	$300.00	$816.96	$486.45	$1,034.40	$2,637.81	International Code Council will reimburse the employee

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

Purpose:
As a member of the ICC Board of Directors, I am an ambassador to our members and upon request, I am required to attend chapter conferences to provide leadership support. This is WCBO'S 50th anniversary and they are in the process of rebuilding their leadership for serving on the BOD, ICC reimburses all directors for their travel, lodging and meals to attend these meetings. I am not seeking any reimbursement from Cuyahoga County. The conference registration will be comped by the host chapter.

Dept:	Public Defender's Office							
Event:	2026 Making the Case for Life Seminar							
Source:	NACDL							
Location:	New Orleans, LA							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Erika Cunliffe	8/26/2026 - 8/28/2026	$317.00	$180.00	$0.00	$0.00	$0.00	$497.00	General Fund 80% reimbursed by Office of the Ohio Public Defender

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

Purpose:
This seminar is designed to help capital defenders, investigators, and mitigation specialists. Participants will hear cutting-edge presentations regarding pretrial investigations, capital jury selection, new perspectives on discovering the story of the client and mitigation evidence. Attendees will learn from seasoned capital trial lawyers, nationally known law professors, and jury consultants, who will offer their personal perspectives, advice, and proven strategies for making the best case for life.

BC2026-420

Department of Purchasing, presenting proposed purchases for the week of 8/10/2026:

Items/Services Received and Invoiced but not Paid:

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
26002695	Factory Authorized - Equipment repairs for (3) SNE-2200 units*	Department of Public Works	Johnson Controls Building Solutions, LLC	$34,524.78	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)

ION2026-92

Department of Public Safety and Justice Services, submitting an amendment to ION2026-29 amending a grant award from the Department of Justice/Office of Community Oriented Policing Services (COPS Office) for Cuyahoga County 911 System Upgrade in connection with FY2024 COPS Office Technology and Equipment Program Invitational Solicitation for the period 3/9/2024 – 3/31/2027, to add Mary Beth Vaughn, Business Services Manager for Public Safety and Justice Services as the delegated final financial authority on behalf of the county for acceptance of the award, and to execute other authorizations and forms related to the grant during the term thereof in the JustGrants award management system.

Funding Source: FY24 COPS Technology and Equipment Program Invitational Solicitation

ION2026-93

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
12381	3586	The Mannik & Smith Group, Inc.	For general engineering services	$0.00	Department of Public Works	8/10/2023-8/9/2026; **to extend the time period to 3/31/2028**	(Original) Road and Bridge Fund	(Executive) 7/31/2026 (Law) 8/4/2026
14580	4736	Fabrizi Recycling, Inc.	For the 2024 Sewer Repair Program for various County Sewer Districts; **to update insurance requirements and extend time, effective upon signatures of all parties.**	$0.00	Department of Public Works	10/2/2024 – 10/7/2026; **to extend the time period to 12/31/2027**	(Original) Sewer District Cash Balance Revenue Fund	(Executive) 7/31/2026 (Law) 7/31/2026
13103	4627	Northeast Ohio Hispanic Center for Economic Development	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**	$0.00	Department of Development	08/12/2024 – 06/30/2026	(Original) Economic Development Fund	(Executive) 7/31/2026 (Law) 8/5/2026

			upon signatures of all parties.					
13103	4629	Economic & Community Development Institute	For design and administration of a Small Business Program with a focus on minority and women-owned businesses.	$0.00	Department of Development	08/12/2024 – 06/30/2026; **to extend the time period to 9/30/2026**	(Original) Economic Development Fund	(Executive) 7/31/2026 (Law) 8/5/2026
13617	5909 (fka 4933)	Community Housing Solutions	For financial counseling, foreclosure prevention and real property tax services for Cuyahoga County residents; **to update insurance requirements, effective upon signatures of all parties.**	$0.00	Fiscal Office	10/1/2024-09/30/2026**; to extend the time period to 9/30/2027**	85.71% Community Development Block Grant 14.29% Delinquent Tax Assessment Collection	(Executive) 7/31/2026 (Law) 7/31/2026
NA	3970 (fka 228)	The MetroHealth System	For Correctional Health Care Services; **to amend Exhibit B of the original contract to add a new position and extend time, effective 8/1/2026.**	$0.00	Sheriff's Department	5/9/2019 – 7/31/2026; **to extend the time period to 8/8/2026**	(Original) General Fund	(Executive) 7/31/2026 (Law) 7/31/2026
NA	6151	Dr. Krystal Hans Ph.D. dba Hans Forensics, LLC	Master Contract for Bugs & Bones Workshop Instructors; **to terminate the contract, effective 8/2/2026**.	$0.00	Medical Examiner's Office	8/4/2026-8/7/2026	(Original) Coroner Lab Fund	NA
NA	6153	Dr. Linda B. Spurlock Ph.D.	Master Contract for Bugs & Bones Workshop Instructors; **to terminate the contract, effective 8/2/2026**.	$0.00	Medical Examiner's Office	8/4/2026-8/7/2026	(Original) Coroner Lab Fund	NA

ION2026-94

Purchases Processed (No Vote Required) in the amount not-to-exceed $10,000.00 for the period 7/1/2026 – 7/31/2026 (No Vote Required) will be available at the following link at time of posting the Final Agenda. To view the report, click on the Title "8/10/2026 – Board of Control Meeting".

Board of Control (cuyahogacounty.gov)

VI – PUBLIC COMMENT

There was no Public Comment.

VII – ADJOURNMENT

Michael Chambers motioned to adjourn; Cynthia Mason seconded. The motion to adjourn was unanimously approved at 11:17 a.m.

Item Details as Submitted by Requesting Departments

IV. Contracts and Awards

A. – Tabled Items

B. – New Items for Review

BC2026-421

Title	Public Works-Halle Building-Miscellaneous Furniture-American Interiors, Inc. for Archive Document Management space
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)	26002790	American Interiors, Inc.	Upon Execution	$192,009.30	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 Works is requesting a purchase order for miscellaneous furniture for the Halle Building, Public Works-Halle Building-Miscellaneous Furniture-American Interiors, Inc. for Archive Document Management space. This purchase will utilize the Omnia Partners Cooperative platform through Omnia-Herman Miller #2020000622 exp. 12/31/2026, Omnia-Humanscale #R221002 exp. 12/31/2027, Omnia-SitOnIt #2020000604 exp. 12/31/2026, resulting in a purchase order in the amount of $192,009.30.

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: new furniture How will replaced items be disposed of NA

Project Goals, Outcomes or Purpose (list 3):
This is a purchase order for needed miscellaneous furniture for workstation configurations in the Halle Building for the Microfilm area.

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):
American Interiors, Inc. 302 S. Byrne Bldg. 100 Toledo, Ohio 43615	Joe Moran
Vendor Council District:	Project Council District:
NA	NA
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 County is utilizing JCOP contract which was previously bid and/or negotiated, allowing government entities access to favorable costs and services *See Justification for additional information.
The total value of the solicitation: $192,009.30	☐ Exemption
Number of Solicitations (sent/received) 0 / 0	☐ State Contract, list STS number and expiration date ☒ Government Coop (Joint Purchasing Program/GSA), list number and expiration date: Omnia-Herman Miller #2020000622 exp. 12/31/2026 Omnia-Humanscale #R221002 exp. 12/31/2027 Omnia-SitOnIt #2020000604 exp. 12/31/2026
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: NA-Joint Cooperative	☐ Government Purchase ☐ Alternative Procurement Process
How did pricing compare among bids received?	☐ Contract Amendment - (list original procurement)

NA-Joint Cooperative	☐ 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. 50% General Fund 50% Real Estate Assessment 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. FS100140 54300 100 FS305100 54300 100
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):	7.9.26
Date documents were requested from vendor:	7.9.26
Date of insurance approval from risk manager:	NA
Date Department of Law approved Contract:	NA
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):

BC2026-422

Title	Cuyahoga County Metzenbaum Buildings Elevator Modernization
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.
Original	CM5067	SONA Construction, LLC	6/26/2025 Project Completion	$1,229,000.00	6/10/2025	R2025-0190
Amendment #1	CM5067	SONA Construction, LLC	6/26/2025 Project Completion	$178,864.04	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 scope of work for this project is to provide full modernization to the existing elevator and construction of a new elevator (including but not limited to new foundations and masonry walls for the new elevator shaft, elevator cab, elevator controls, elevator machine room, etc.) near the main entrance . The new elevator will be primarily used by visitors accessing the building. The modernization includes system upgrades to bring the entire elevator system up to the current code. These systems include Architectural, Plumbing, Mechanical and Electrical, along with machine room, lobbies, hoistway, and elevator pit and roof.

The scope of services is expanded for unforeseen repairs to existing structures and equipment.

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 scope of work for this project is to provide full modernization to the existing elevator and construction of a new elevator (including but not limited to new foundations and masonry walls for the new elevator shaft, elevator cab, elevator controls, elevator machine room, etc.) near the

main entrance . The new elevator will be primarily used by visitors accessing the building. The modernization includes system upgrades to bring the entire elevator system up to the current code. These systems include Architectural, Plumbing, Mechanical and Electrical, along with machine room, lobbies, hoistway, and elevator pit and roof.

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):
SONA Construction, LLC 7122 Harvard Ave. Cleveland, Ohio 44105	Rahman S. Patel - President
Vendor Council District:	Project Council District:
District 7	District 7
If applicable provide the full address or list the municipality(ies) impacted by the project.	CLEVELAND

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ ☐ RFB ☐ RFP ☐ RFQ ☐ Informal ☐ Formal Closing Date:	Provide a short summary for not using competitive bid process. Vendor is currently doing the work and has done so satisfactorily *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 ( ).
	☐ Government Purchase

Recommended Vendor was low bidder: ☐ Yes ☐ No, please explain:	☐ Alternative Procurement Process
How did pricing compare among bids received?	☒ Contract Amendment - (list original procurement) Request for Bids in 2024-RQ15146
	☐ 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
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.
Payment Schedule: ☒ Invoiced ☐ Monthly ☐ Quarterly ☐ One-time ☐ Other (please explain):

Provide status of project. Project is moving along as planned	
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): see chart above

BC2026-423 a)

Title	DPW requesting approval of a General Engineering Services contract with AECOM Services of Ohio, Inc.; RFQ#16374;
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	6303	AECOM Services of Ohio, Inc.	Effective upon signature of all parties for a period of 3-years	$450,000	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. The Department of Public Works is seeking qualifications from engineering firms to provide on-call General Engineering Services supporting the County's transportation infrastructure program. Services may include roadway, bridge, traffic, drainage, utility, surveying, environmental, and right-of-way engineering, as well as plan review, inspections, and technical support. Firms should have experience with public infrastructure projects and applicable regulatory requirements.
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 Department of Public Works utilizes on-call General Engineering Services contracts to supplement in-house staff and address fluctuating workloads, emergency needs, and accelerated project schedules. These contracts help ensure the timely and efficient delivery of the County's transportation infrastructure and capital improvement projects.

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):
AECOM Services of Ohio, Inc. 1300 East 9th Street, Suite 500 Cleveland, OH 44114	Angela Marinucci, PE Associate Vice President
Vendor Council District:	Project Council District:
7	Various
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _16374_____ ☐ RFB ☐ RFP ☒ RFQ ☐ Informal ☒ Formal Closing Date: 06/01/2026	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation: $900,000	☐ Exemption
Number of Solicitations (sent/received) 105/13 13 responses were scored and 2 were selected	☐ State Contract, list STS number and expiration date ☐ Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): (30%) DBE (30%) SBE (0%) MBE (0%) 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: Vendors were scored based on qualifications.	☐ Government Purchase ☐ Alternative Procurement Process
How did pricing compare among bids received? N/A	☐ 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% Road & Bridge 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. (PW270205 55030)
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	4344	AECOM Services of Ohio, Inc.	06/26/2024 – 06/25/2027	$450,000	6/18/2024	R2024-0204

A-1	4344	AECOM Services of Ohio, Inc.	Extend through 7/1/2029	$150,000	7/13/2026	BC2026-0346

BC2026-423 b)

Title	DPW requesting approval of a General Engineering Services contract with Euthenics, Inc.; RFQ#16374;
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	6304	Euthenics, Inc.	Effective upon signature of all parties for a period of 3-years	$450,000	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.

The Department of Public Works is seeking qualifications from engineering firms to provide on-call General Engineering Services supporting the County's transportation infrastructure program. Services may include roadway, bridge, traffic, drainage, utility, surveying, environmental, and right-of-way engineering, as well as plan review, inspections, and technical support. Firms should have experience with public infrastructure projects and applicable regulatory requirements.

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 Department of Public Works utilizes on-call General Engineering Services contracts to supplement in-house staff and address fluctuating workloads, emergency needs, and accelerated project schedules. These contracts help ensure the timely and efficient delivery of the County's transportation infrastructure and capital improvement projects.

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):

Euthenics, Inc. 8235 Mohawk Drive Strongsville, OH 44136	Alan Piatak, PE President
Vendor Council District:	Project Council District:
5	Various
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _16374_____ ☐ RFB ☐ RFP ☒ RFQ ☐ Informal ☒ Formal Closing Date: 06/01/2026	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation: $900,000	☐ Exemption
Number of Solicitations (sent/received) 105/13 13 responses were scored and 2 were selected	☐ State Contract, list STS number and expiration date ☐ Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): (30%) DBE (30%) SBE (0%) MBE (0%) 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: Vendors were scored based on qualifications.	☐ Government Purchase ☐ Alternative Procurement Process
How did pricing compare among bids received? N/A	☐ 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% Road & Bridge 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. (PW270205 55030)
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	4805 (fka 2470)	Euthenics, Inc.	7/11/2022–7/10/2025	$450,000	7/5/2022	R2022-0146

BC2026-424

Title	CM6320 – Department of Housing and Community Development – City of Euclid – FY2020 HOME Consortium Contract
Department or Agency Name	Housing and Community Development
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	6320	City of Euclid	01/01/2026 – 12/31/2026	$155,890.18	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.

Department of Housing and Community Development is requesting approval of a contract with City of Euclid in the amount not to exceed $155,890.18 for the period of January 1, 2026 through December 31, 2026.

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 goals of the project are for the City of Euclid to use HOME funds for the eligible buyer assistance, new construction, and rehabilitation costs.

The City of Euclid, as a member of the HOME Consortium is allocated a percentage of funding. This agreement constitutes their allocation.

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 Euclid 585 E. 222nd Street Euclid, OH 44123	Kristen Holzheimer Gail, Mayor

Vendor Council District: 11	Project Council District: 11
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 City of Euclid, as a member of the HOME Consortium is allocated a percentage of funding. This agreement constitutes their allocation. *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% HOME Investment Partnership 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. HC223135
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 requested in Matrix 05/22/2026. The Contract period is 01/01/2026 – 12/31/2026, but contract was not created until mid-2026.	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	Matrix created 08/22/2026 Procurement received 07/02/2026
Date documents were requested from vendor:	07/02/2026
Date of insurance approval from risk manager:	07/07/2026
Date Department of Law approved Contract:	06/08/2026
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):

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	5759	City of Euclid	01/01/2025 – 12/31/2025	$203,089.41	03/23/2026	BC2026-130

BC2026-425

Title	PO26002702JCOP-2026- Procurement of 4 Workstations and monitors for the Central Booking area of the Corrections Center
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.
	PO26002702 JCOP	MNJ Technologies Direct, Inc.	2026	$11,856.00	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 Information Technology plans to contract with MNJ Technologies Direct, for procurement of 4 HP Workstations and 4 Monitors in the amount of $11,856.00 for the Central Booking area of the Corrections Center.

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 purchase is grant-funded and will support the operation of the newly installed security camera system. The workstations and monitors are required to enable staff to effectively monitor and view the new surveillance cameras, enhancing security and operational efficiency within the facility.
The pricing for this equipment is established and regularly reviewed through the Ohio Department of Administrative Services. If pricing is determined to be inconsistent with comparable equipment, vendors are required to adjust their pricing to remain compliant with State procurement standards.

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 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. MNJ Technologies Direct is able to provide Cuyahoga County with Contract Pricing based off NCPA Contract #01-148 pricing which is considered lowest and best negotiated pricing for this purchase. NCPA-01-148 Expires on 11.30.2026 *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 NCPA-01-148 Expires on 11.30.2026
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:7.23.2026

☒ 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% Grant Fund U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance 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. PJ280145 PJ-22-CBTEE
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):

BC2026-426

Title	PO26002772STAC-2026- Slack Enterprise Grid Subscription Renewal
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.
	PO26002772 STAC	Carahsoft Technology Corp.	9/10/2026-9/9/2027	$39,439.40	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 Carahsoft Technology Corporation, for the Slack Enterprise Grid Software Subscription in the amount of $39,439.40 for the period of 09/10/2026-09/09/2027.
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): Slack Enterprise Grid allows multiple interconnected Slack workspaces under a single organization, enabling better collaboration across departments while maintaining data governance and user management. This is a renewal and has been in place since 2020- platform is a leading solution for chat operations.

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):
Carahsoft Technology Corporation 11493 Sunset Hills Road, Suite 100, Reston, VA 20190	Meagan Phillips Administrator
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ ☐ RFB ☐ RFP ☐ RFQ ☐ Informal ☐ Formal Closing Date:	Provide a short summary for not using competitive bid process. Carahsoft Technology Corporation is able to provide Cuyahoga County the requested software using Ohio State Term Schedule pricing. All vendors awarded an

	Ohio state contract have gone through formal bidding processes and have been vetted by the State of Ohio prior to award. STS#MCSA0016 Expires on 6.30.2027 *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#MCSA0016 Expires on 6.30.2027 ☐ 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.

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.
	PO25003174 STAC	Carahsoft Technology Corporation	9/10/2025-9/9/2026	$39,439.40	8.6.2025	BC2025-545

BC2026-427

Title	THIRD AMENDMENT FOR RESTORATIVE JUSTICE PROGRAM PROJECT LIFT BEHAVIORAL HEALTH 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.

(O)	3881	Project Lift	7/1/2023-6/30/2025	$75,000.00	11/13/2023	BC2023-728
(A#-1)	3881	Project Lift	7/1/2023-6/30/2026	$211,300.00	1/13/2025	BC2025-20
(A#-2)	3881	Project Lift	7/1/2023-6/30/2026	($69,400.00)	6/30/2025	BC2025-420
(A#-3)	3881	Project Lift	7/1/2023-6/30/2027	$27,500.00	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. Mentoring services for Court referred youth to extend the term of the contract through June 30, 2027, add funds in the amount of $27,500., and replace applicable language 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): The RJP creates a consensus-based plan to "make things right" with persons harmed, the family, the community, and themselves.

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: Project Lift Behavioral Health Services 4415 Euclid Ave. Suite 315 Cleveland, Ohio 44103-1005	Owner, executive director, other (specify): LaToya Logan CEO
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ ☐ 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):	2/27/2026
Date documents were requested from vendor:	5/7/2026
Date of insurance approval from risk manager:	3/26/2026
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

BC2026-428

Title	SECOND AMENDMENT FOR MENTORING SERVICES LOVE TRAIN MINISTRIES.
Department or Agency Name	CUYAHOGA COUNTY COURT OF COMMON PLEAS, JUVENILE COURT 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.
(O) Original	4043	Love Train Ministries	7/1/2023-6/30/2024	$19,249.95	1/8/2024	BC2024-35
(A-1)	4276 FKA 4043	Love Train Ministries	7/1/2023-6/30/2026	$28,499.90	8/26/2026	BC2024-620
(A-2)	4276 FKA 4043	Love Train Ministries	7/1/2023-6/30/2027	$14,250.00	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. Amendment for Mentoring Services to extend the term of the contract through June 30. 2027, add funds in the amount of $14,250.00, 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): Provide one-on-one mentoring meetings through structured activities and community service opportunities and provide ongoing monthly support meeting to participants.

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: Love Train Ministries 1141 East 74th St. Cleveland, Ohio 44103	Owner, executive director, other (specify): Mary K. Williams – Founder/CEO
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ ☐ 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):	2.25.26
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): see chart above

BC2026-429

Title	FOURTH CONTRACT AMENDMENT FOR SUBSTANCE ABUSE TREATMENT
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.
(O)	1808	New Directions	7/1/2021-6/30/2022	$125,000.00	10/4/2021	BC2021-546
	1807	Ohio Guidestone				
	1794	Catholic Charities				
(A-1)	3003 fka 1808	New Directions	7/1/2021-6/30/2023	$75,000.00	01/9/2023	BC2023-15
	3002fka 1807	Ohio Guidestone				
	2588 fka 1794	Catholic Charities				
(A-2)	3003 fka 1808	New Directions	7/1/2021-6/30/2024	$45,000.00	3/18/2024	BC2024-216
	3002fka 1807	Ohio Guidestone				
	2588 fka 1794	Catholic Charities				
(A-3)	4913 fka 3003, 1808	New Directions	7/1/2021-6/30/2026	$90,000.00	10/21/2024	BC2024-757
	4912 fka 3002, 1807	Ohio Guidestone				
	4911 fka 2588, 1794	Catholic Charities				
(A-4)	5351 fka 4912, 3002, 1807	Ohio Guidestone	7/1/2021-6/30/2027	$45,000.00	Pending	Pending

	5549 fka 4911, 2588, 1794	Catholic Charities Diocese of Cleveland, dba Catholic Charities				

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. Master contract amendment for Substance Abuse Treatment Master Contract with Catholic Charities Diocese of Cleveland, dba Catholic Charities Corporation and Ohio Guidestone to extend the term of the contract through June 30, 2027, add funds in the amount of $45,000., and replace applicable language as 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): Provide community-based assessment and treatment services and additional case management services.

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: Ohio Guidestone 343 W. Bagley Rd. Berea, Ohio 44017	Owner, executive director, other (specify): Brant Russell-President & CEO
Vendor Name and address: Catholic Charities dba Catholic Charities Diocese of Cleveland 7911 Detroit Ave. Cleveland, Ohio 44102	Owner, executive director, other (specify): Daniel Horrigan- President & CEO
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT

RQ# _____ ☐ 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% 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):	2.23.26
Date documents were requested from vendor:	5.7.26
Date of insurance approval from risk manager:	3.17.26
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): see chart above

BC2026-430

Title	FIFTH CONTRACT AMENDMENT FOR TRAUMA-INFORMED MENTORING SERVICES REACHING ABOVE HOPELESSNESS AND BROKENNESS MINISTRIES 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)	413	Reaching Above Hopelessness and Brokenness Ministries Inc.	7/1/2020-6/30/2021	$93,377.52	11/2/2020	BC2020-590
(A-#1)	413	Reaching Above Hopelessness	7/1/2020-6/30/2022	$93,377.52	9/24/2021	BC2021-563

		and Brokenness Ministries Inc.				
(A-#2)	2792 FKA 413	Reaching Above Hopelessness and Brokenness Ministries Inc.	7/1/2020-6/30/2023	$93,377.52	10/31/2022	BC2022-650
(A-#3)	2792 FKA 413	Reaching Above Hopelessness and Brokenness Ministries Inc.	7/1/2020-6/30/2024	$93,377.52	10/10/2023	BC2023-620
(A-#4)	5056 FKA 413, 2792	Reaching Above Hopelessness and Brokenness Ministries Inc.	7/1/2020-6/30/2026	$186,755.04	01/13/2025	BC2025-22
(A-#5)	6375 FKA 5835, 5056, 2792, 413	Reaching Above Hopelessness and Brokenness Ministries Inc.	7/1/2020-6/30/2027	$30,000.00	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. Trauma Informed Treatment Mentoring Services to extend the term of the contract through June 30, 2027, add funds in the amount of $30,000., replace applicable language set forth with an hourly rate of $200.00., replace the 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): The purpose of this program is to provide community-based options for effective programming for at-risk youth and mentoring youth and their families based on strengths and trauma.

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: Reaching Above Hopelessness and Brokenness Ministries dba RAHAB Ministries 3480 W. Market St. Ste 3030 Fairlawn, Ohio 44333	Owner, executive director, other (specify): Sonya Hartburg, 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):	2.27.26
Date documents were requested from vendor:	5.18.26
Date of insurance approval from risk manager:	3.26.26
Date Department of Law approved Contract:	5.18.26
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): see chart above

BC2026-431

Title	Community Diversion Program contract with the City of Highland Heights
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.
(O)	6346	City of Highland Heights	04/01/2026-12/31/2027	$19,793.47	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 a contract as indicated in the chart above.
Implement effective diversion services with a focus on rehabilitation and accountability versus deterrence-based sanctions.

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 YOUTH served during the AGREEMENT period will successfully complete the program without referral to the COURT for official COURT processing.

80% of YOUTH referred will be engaged in and complete services with no new charges.

90% of YOUTH engaged in services will complete services within a targeted timeframe of ninety (90) calendar days.

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 Highland Heights	Sean Brown (Programmatic Contact)

5827 Highland Road Highland Heights, OH 44143	
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	City of Highland Heights

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ ☐ RFB ☐ RFP ☐ RFQ ☐ Informal ☐ Formal Closing Date:	Provide a short summary for not using competitive bid process. Government Purchase *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. Health and Human Services Levy
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. JC280105-55130
Payment Schedule: ☐ Invoiced ☒ Monthly ☐ Quarterly ☐ One-time ☐ Other (please explain):

Provide status of project. New service	
Is contract/purchase late ☐ No ☒ Yes, In the fields below provide reason for late and timeline of late submission	
Reason: Vendor Insurance delay	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	01/22/2026
Date documents were requested from vendor:	04/20/2026
Date of insurance approval from risk manager:	04/06/2026
Date Department of Law approved Contract:	04/14/2026
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):

BC2026-432

Title	OHS; 2026 CLEVELAND MEDIATION CENTER; PERMANENT SUPPORTIVE HOUSING CASE CONFERENCING PILOT PROGRAM
Department or Agency Name	The Department of Health and Human Services, Office of Homeless 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	6336	Cleveland Mediation Center	8/1/2026-12/31/2026	$23,400.00	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.

Office of Homeless Services requesting approval of a new contract with Cleveland Mediation Center in the amount of $23,400.00 for the period of 8/1/26 – 12/31/26.

The Cleveland Mediation Center (CMC) will serve as a neutral, third-party facilitator and mediator for select Permanent Supportive Housing (PSH) system case conferences within the Cleveland/Cuyahoga County Continuum of Care (CoC). CMC's role is to support housing stabilization, eviction prevention, and appropriate housing transitions through structured case review, mediation, and decision support, consistent with CoC PSH policies and procedures.

The case conferences will focus on residents who are at immediate risk of being evicted and also residents that are at risk of eviction within 30 days. CMC will also be available to mediate between property management and service provider staff and between residents when conflicts/interactions negatively impact residents' housing stability. CMC will also be available to provide Conflict Resolution Training for both PSH residents and staff and also in-person listening sessions where they will be available to meet with any resident in the building.

Cleveland Mediation Center (CMC) services will be provided during an initial pilot period of 5 months, beginning August 1, 2026. The pilot will focus on system-level Permanent Supportive Housing (PSH) cases meeting CoC criteria for case conferencing (e.g., risk of eviction, unresolved tenancy conflicts, need for higher-level care, or potential PSH transfer). Pilot scope, volume, and outcomes will be reviewed jointly to inform continuation or expansion. This work will be focused at five (5) PSH buildings: South Pointe, Harpers Pointe, Greenbridge I, Buckeye Square, and The Lotus.

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 N/A

Project Goals, Outcomes or Purpose (list 3):
More consistent application of Progressive Engagement and Transfer Pathways with facilitating case conferences via resident-centered, trauma-informed, and rights-protected environments.
Increased successful resolution of complex PSH cases without eviction.
Improved coordination between Property Management and Supportive Services.

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 Mediation Center 4515 Superior Avenue Cleveland, OH 44103	Owner, executive director, other (specify): Danielle Cosgrove, Executive Director
Vendor Council District: 7	Project Council District: 7
If applicable provide the full address or list the municipality(ies) impacted by the project.	Countywide

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ ☐ RFB ☐ RFP ☐ RFQ ☐ Informal ☐ Formal Closing Date:	Provide a short summary for not using competitive bid process. The Office of Homeless Services, as the lead agency for the Cuyahoga County Continuum of Care, was awarded a HUD planning grant during the FY2024 Continuum of Care competition. This grant is designed to improve service coordination across the Homeless Continuum of Care. OHS issues subgrants to providers that focus on specific homeless populations/issues. *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. N/A
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% U.S. Department of Housing and Urban Development
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. HS220115/55130/HS-26-COC PLAN
Payment Schedule: ☒ Invoiced ☒ Monthly ☐ Quarterly ☐ One-time ☐ Other (please explain):

Provide status of project. Project is set to commence 8/1/26 pending approval	
Is contract/purchase late ☐ No ☒ Yes, In the fields below provide reason for late and timeline of late submission	
Reason: Provider needed additional time to create budget and scope due to nature of the pilot project.	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	7/1/2026
Date documents were requested from vendor:	6/22/2026
Date of insurance approval from risk manager:	7/27/2026
Date Department of Law approved Contract:	7/29/2026
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: n/a	
If late, have services begun? ☒ No ☐ Yes (if yes, please explain)	
Have payments been made? ☒ No ☐ Yes (if yes, please explain)	

HISTORY (see instructions):

C.- Exemptions

BC2026-433

TITLE	Public Works – Fleet Accident Repairs – Amendment #2 to Alternate
DEPARTMENT OR AGENCY	Department of Public Works

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.
	8/14/23	BC2023-513
	8/18/25	BC2025-536
DESCRIPTION/ EXPLANATION OF REQUEST:	The Department of Public Works is requesting to amend an Alternative Procurement process that results in as-needed Purchase Orders to various automotive repair vendors. The County's Fleet Division provides maintenance and repair of critical vehicles and equipment within the County and relies on external vendor partners to provide accident repairs as they're needed. This amendment will continue to allow the Fleet Division to access vendors on an as-needed basis for those vehicle accident repair services in a timely manner that meets the needs of the County. The two (2) vendors that were originally identified through a competitive bid process were Premier Auto Body & Collision Center LLC and Valore's Truck Painting & Body Co. The dates of the original Alternative Procurement were 8/14/23 – 8/13/25, with $125,000.00 in as-needed funding. The first amendment extended the term to 8/13/26 and add allowable funds in the amount of not-to-exceed $75,000.00. This second amendment will extend the term to 12/31/26 and add allowable funds in the amount of $25,000.	

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.
	Fleet Services Fund (Charged back to Departments)

D. - Consent Agenda

BC2026-434
(See related items for proposed travel/memberships for the week of 8/17/2026 in Section D above).

BC2026-435
(See related items for proposed purchases for the week of 8/17/2026 in Section D above).

V – OTHER BUSINESS

Item of Note (non-voted)

ION2026-95

TITLE	Amend the Master Cooperation Agreement for Pavement Preventative Maintenance Services for the Year 2025
DEPARTMENT OR AGENCY NAME	Public Works

REQUESTED ACTION	☒ Amendment to Approval (BOC or Council) ☐ Other action; please describe

DESCRIPTION/ EXPLANATION OF REQUEST:	The County would like to add the following municipalities and project descriptions to the 2025 Year contract: City of Lakewood – Hillard Road from Riverside Drive to Warren Road City of North Royalton and City of Parma – Sprague Road Part 2 from West 130th Street to York Road City of Warrensville Heights – Harvard Road from East 190th Street to Warrensville Center Road The municipalities will be provided free of charge pavement crack sealing and striping for the roadway improvements listed above and in the attached table. This will be the third agreement.

CURRENT/HISTORICAL INFORMATION	DATE BOC APPROVED/ COUNCIL'S JOURNAL DATE	APPROVAL NO.
ORIGINAL (O)	09-02-2025	CON2025-76
AMENDMENT (A)	11-17-2025	CON2025-96

ION2026-96

TITLE	SFY2027 SPECIALIZED DOCKETS SUBSIDY ALLOCATION
DEPARTMENT OR AGENCY NAME	COURT OF COMMON PLEAS – JUVENILE COURT DIVISION

REQUESTED ACTION – PLEASE CHECK ALL THAT IS APPLICABLE	☐ Authority to Apply ☐ Grant Application ➢ Is County Executive signature required ☐ Yes ☐ No

*PLEASE INCLUDE SUPPORTING DOCUMENTS AS ATTACHMENTS TO THE SUBMISSION IN ONBASE.	☐ 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

GRANT CURRENT/ HISTORICAL INFO	NAME OF GRANT	TIME PERIOD	AMOUNT	PREVIOUS APPROVAL	APPROVAL NO.
ORIGINAL (O)	OHIO DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES	7/1/2024 – 6/30/2025	$80,000.00	3/31/2025	CON2025-26
ORIGINAL (O)	OHIO DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES	7/1/2025 – 6/30/2026	$50,000.00	2/9/2026	ION2026-05
ORIGINAL (O)	OHIO DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES	7/1/2026 – 6/30/2027	$50,000.00	PENDING	PENDING
DESCRIPTION/EXPLANATION OF THE GRANT:		This grant provides funding for various services and incentives, such as treatment services, drug testing and recovery supports, for the participants of Family Drug Recovery Court.			
PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):		Assist participants in finding and attending the recovery services needed			
		Assist participants with other needed resources while managing their recovery			
		To ensure participants have a positive start to a successful recovery and reunification			

GRANT SUBRECIPIENTS – ARE THERE ANY SUBRECIPIENTS THAT ARE WRITTEN INTO THE GRANT ☐ YES ☒ NO

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

FUNDING SOURCE:	Please provide the complete, proper name of the funding source for receipt of this grant.
	OHIO DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES
	Does this require a Cash Match by the County? ☐ YES ☒ NO

ION2026-97

(See related list of Contracts up to $10,000.00 processed and executed for the week of 8/17/2026 in Section V. above).

VI – PUBLIC COMMENT

VII – ADJOURNMENT