



**AGENDA**  
**CUYAHOGA COUNTY HEALTH, HUMAN SERVICES & AGING**  
**COMMITTEE MEETING**  
**WEDNESDAY, APRIL 3, 2024**  
**CUYAHOGA COUNTY ADMINISTRATIVE HEADQUARTERS**  
**C. ELLEN CONNALLY COUNCIL CHAMBERS – 4<sup>TH</sup> FLOOR**  
**1:00 PM**

**Committee Members:**

**Yvonne M. Conwell, Chair – District 7**  
**Martin J. Sweeney, Vice Chair – District 3**  
**Cheryl L. Stephens – District 10**  
**Meredith M. Turner – District 9**  
**Dale Miller – District 2**

- 1. CALL TO ORDER**
- 2. ROLL CALL**
- 3. PUBLIC COMMENT**
- 4. APPROVAL OF MINUTES FROM THE MARCH 6, 2024 MEETING** [See Page 4]
- 5. MATTERS REFERRED TO COMMITTEE**
  - a) R2024-0128: A Resolution making awards on RQ13809 to a Master Contract with various providers in the total amount not-to-exceed \$1,444,625.00 for various programs and resources for the Cuyahoga County Fatherhood Initiative for the period 4/1/2024 – 12/31/2025; authorizing the County Executive to execute the Master Contract and all other documents consistent with said awards and this Resolution; and declaring the necessity that this Resolution become immediately effective: [See Page 8]
    - 1) Agreement No. 4278 with The MetroHealth System in the amount not-to-exceed \$77,875.00 for the Boot Camp for New Dads program.

- 2) Contract No. 4269 with Career Development and Placement Strategies, Inc. in the amount not-to-exceed \$180,000.00 for the Rising Above program.
- 3) Contract No. 4267 with The Children's Museum of Cleveland in the amount not-to-exceed \$58,000.00 for the Through Dad's Count program.
- 4) Contract No. 4265 with Circle Health Services dba The Centers in the amount not-to-exceed \$145,250.00 for the Families and Fathers Together program.
- 5) Contract No. 4270 with JDC Advertising in the amount not-to-exceed \$127,500.00 for a Public Awareness Campaign.
- 6) Contract No. 4172 with Journey Center for Safety and Healing in the amount not-to-exceed \$209,750.00 for the Safe and Sound Visitation Center.
- 7) Contract No. 4279 with Murtis Taylor Human Services System in the amount not-to-exceed \$108,000.00 for the Strong Fathers program.
- 8) Contract No. 4274 with Nueva Luz Urban Resource Center in the amount not-to-exceed \$80,000.00 for the Fathers in the Ring program.
- 9) Contract No. 4271 with Passages Connecting Fathers and Families, Inc. in the amount not-to-exceed \$180,000.00 for the Jobs for Dads program.
- 10) Contract No. 4273 with Towards Employment, Incorporated in the amount not-to-exceed \$180,000.00 for the Fatherhood Career Pathway program.
- 11) Contract No. 4275 with University Settlement Slavic Village, LLC in the amount not-to-exceed \$98,250.00 for the Healthy Fathering program.

## **6. MISCELLANEOUS BUSINESS**

## **7. ADJOURNMENT**

*\*Complimentary parking for the public is available in the attached garage at 900 Prospect. A skywalk extends from the garage to provide additional entry to the Council Chambers from the 5th floor parking level of the garage. Please see the Clerk to obtain a complimentary parking pass.*

*\*\*Council Chambers is equipped with a hearing assistance system. If needed, please see the Clerk to obtain a receiver.*



## MINUTES

### CUYAHOGA COUNTY HEALTH, HUMAN SERVICES & AGING COMMITTEE MEETING

WEDNESDAY, MARCH 6, 2024

CUYAHOGA COUNTY ADMINISTRATIVE HEADQUARTERS

C. ELLEN CONNALLY COUNCIL CHAMBERS – 4<sup>TH</sup> FLOOR

1:00 PM

#### 1. CALL TO ORDER

**Chairwoman Conwell called the meeting to order at 1:05 p.m.**

#### 2. ROLL CALL

**Ms. Conwell asked Assistant Deputy Clerk Georgakopoulos to call the roll. Committee members Conwell, Sweeney, Stephens, Turner and Miller were in attendance and a quorum was determined.**

#### 3. PUBLIC COMMENT

**Loh addressed the committee regarding the challenges of persons experiencing homelessness at local shelters.**

#### 4. APPROVAL OF MINUTES FROM THE FEBRUARY 21, 2024 MEETING

**A motion was made by Mr. Miller, seconded by Ms. Turner and approved by unanimous vote to approve the minutes from the February 21, 2024 meeting.**

#### 5. MATTERS REFERRED TO COMMITTEE

- a) R2024-0077: A Resolution awarding a total sum, not to exceed \$50,000, to the Catholic Charities Corporation for Capacity Building Development for the Catholic Charities St. Martin de Porres Family Center from the District 7 ARPA Community Grant Fund; and declaring the necessity that this Resolution become immediately effective.

**Ms. Karnese McKenzie, Agency Director of St. Martin DePorres Family Center, addressed the Committee regarding Resolution No. R2024-0077. Discussion ensued.**

**Committee members asked questions of Ms. McKenzie pertaining to the item, which she answered accordingly.**

**On a motion by Ms. Conwell with a second by Ms. Stephens, Resolution No. R2024-0077 was considered and approved by unanimous vote to be referred to the full Council agenda for second reading.**

**Ms. Stephens and Ms. Turner requested to have their names added as co-sponsors to the legislation.**

b) R2024-0087: A Resolution authorizing Title IV-D Cooperative Agreements with various providers, in the total amount not-to-exceed \$11,473,857.03 for child support services for the period 1/1/2024 – 12/31/2024; authorizing the County Executive to execute the agreements and all other documents consistent with this Resolution; and declaring the necessity that this Resolution become immediately effective:

- 1) Agreement No. 4154 with Cuyahoga County Treasurer's Office in the amount not-to-exceed \$19,701.15.
- 2) Agreement No. 4155 with Cuyahoga County Court of Common Pleas/Division of Juvenile Court in the amount not-to-exceed \$3,322,443.68.
- 3) Agreement No. 4159 with Cuyahoga County Court of Common Pleas/Division of Juvenile Court/Cashiers Department in the amount not-to-exceed \$18,273.85.
- 4) Agreement No. 4163 with Cuyahoga County Court of Common Pleas/Division of Domestic Relations in the amount not-to-exceed \$3,796,651.78.
- 5) Agreement No. 4172 with Cuyahoga County Prosecuting Attorney's Office in the amount not-to-exceed \$4,316,786.57.

**Ms. Tyra Taylor, Chief Counsel for the Department of Law introduced a proposed substitute to Resolution No. R2024-0087. Discussion ensued.**

**A motion was then made by Mr. Miller, seconded by Ms. Turner and approved by unanimous vote to accept the proposed substitute.**

**Mr. David Merriman, Director and Mr. Marcos Cortes, Administrator of the Division of Contracts and Performance for the Department of Health and Human Services; and**

**Mr. Jeffrey Bloom, Administrator for the Office of Child Support Services, addressed the Committee regarding Resolution No. R2024-0087. Discussion ensued.**

**Committee members asked questions of Mr. Merriman, Mr. Cortes and Mr. Bloom pertaining to the item, which they answered accordingly.**

**On a motion by Ms. Conwell with a second by Mr. Sweeney, Resolution No. R2024-0087 was considered and approved by unanimous vote to be referred to the full Council agenda with a recommendation for passage under second reading suspension of the rules, as substituted.**

- c) R2024-0088: A Resolution authorizing an amendment to Contract No. 3014 with Young Women’s Christian Association of Greater Cleveland, Ohio dba YWCA Greater Cleveland for operation and case management services at the Norma Herr Women’s Shelter for the period 1/1/2023 – 12/31/2023, to extend the time period to 12/31/2024, to change the terms, effective 1/1/2024, and for additional funds in the amount not-to-exceed \$2,536,793.00; authorizing the County Executive to execute the amendment and all other documents consistent with this Resolution; and declaring the necessity that this Resolution become immediately effective.

**Mr. Merriman, Ms. Melissa Sirak, Director of the Office of Homeless Services; Ms. Helen Forbes Fields, President and Chief Executive Officer and Ms. Cynthia Dailey, Executive Vice President of Programs of the YWCA of Greater Cleveland, addressed the Committee regarding Resolution No. R2024-0088. Discussion ensued.**

**Committee members asked questions of Mr. Merriman, Ms. Sirak, Ms. Forbes Fields and Ms. Dailey pertaining to the item, which they answered accordingly.**

**On a motion by Ms. Stephens with a second by Ms. Turner, Resolution No. R2024-0088 was considered and approved by unanimous vote to be referred to the full Council agenda with a recommendation for passage under second reading suspension of the rules.**

## 6. PRESENTATION

- a) The Center for Community Solutions –
- Introduction of Ms. Emily Campbell, President and Chief Executive Officer
  - An overview of organization’s mission and recent initiatives

**Ms. Emily Campbell, President and Chief Executive Officer, addressed the Committee and provided an overview of the organization’s mission and recent initiatives and provided data regarding poverty rates and its’ impact on residents in Cuyahoga County. Discussion ensued.**

**Committee members asked questions of Ms. Campbell pertaining to the presentation, which she answered accordingly.**

**7. MISCELLANEOUS BUSINESS**

**Ms. Conwell spoke about the “Senior Tsunami” anticipated in 2030, when 60% of our residents will be aged 60 or older, and said that she had met with the Director of the Office of Budget and Management to discuss on how to best prepare the next 3 biennial budget cycles to ensure the level of support services are appropriate to address the anticipated needs of seniors in Cuyahoga County and asked for the support of her colleagues. The committee members discussed the possible strategies and resources available to bring attention to lobbyists and state legislatures to garner funding support of critical senior programs and the need to find collaborative partners to achieve this goal.**

**8. ADJOURNMENT**

**With no further business to discuss, Chairwoman Conwell adjourned the meeting at 2:41 p.m., without objection.**

# County Council of Cuyahoga County, Ohio

## Resolution No. R2024-0128

<p>Sponsored by: <b>County Executive Ronayne/Department of Health and Human Services/Cuyahoga Job and Family Services</b></p>	<p><b>A Resolution</b> making awards on RQ13809 for a Master Agreement with various providers in the total amount not-to-exceed \$1,444,625.00 for various programs and resources for the Cuyahoga County Fatherhood Initiative for the period 4/1/2024 – 12/31/2025; authorizing the County Executive to execute the Master contract and agreement and all other documents consistent with said awards and this Resolution; and declaring the necessity that this Resolution become immediately effective.</p>
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**WHEREAS**, the County Executive/Department of Health and Human Services/ Cuyahoga Job and Family Services recommends awards on RQ13809 for a Master contract with various providers in the total amount not-to-exceed \$1,444,625.00 for various programs and resources for the Cuyahoga County Fatherhood Initiative for the period 4/1/2024 – 12/31/2025 as follows:

Agreement:

- a) Agreement No. 4278 with The MetroHealth System in the amount not-to-exceed \$77,875.00 for the Boot Camp for New Dads program.

Contracts:

- b) Contract No. 4269 with Career Development and Placement Strategies, Inc. in the amount not-to-exceed \$180,000.00 for the Rising Above program.
- c) Contract No. 4267 with The Children’s Museum of Cleveland in the amount not-to-exceed \$58,000.00 for the Dads Count program.



- d) Contract No. 4265 with Circle Health Services dba The Centers in the amount not-to-exceed \$145,250.00 for the Father's and Families Together program.
- e) Contract No. 4270 with JDC Advertising in the amount not-to-exceed \$127,500.00 for a Public Awareness Campaign.
- f) Contract No. 4172 with Journey Center for Safety and Healing in the amount not-to-exceed \$209,750.00 for the Safe and Sound Visitation Center.
- g) Contract No. 4279 with Murtis Taylor Human Services System in the amount not-to-exceed \$108,000.00 for the Murtis Taylor Fatherhood program.
- h) Contract No. 4274 with Nueva Luz Urban Resource Center in the amount not-to-exceed \$80,000.00 for the Fathers in the Ring program.
- i) Contract No. 4271 with Passages Connecting Fathers and Families, Inc. in the amount not-to-exceed \$180,000.00 for the Family Resilience program.
- j) Contract No. 4273 with Towards Employment, Incorporated in the amount not-to-exceed \$180,000.00 for the Fatherhood Career Pathway program.
- k) Contract No. 4275 with University Settlement Slavic Village, LLC in the amount not-to-exceed \$98,250.00 for the Healthy Fathering program.

**WHEREAS**, the goals of the Fatherhood Initiative are to: (1) promote public awareness of the importance of the role of a father, (2) provide access to public services to young men and fathers in order to educate them about fatherhood and responsibilities of being a father, and (3) fund fatherhood related programs at the county level; and

**WHEREAS**, the project is funded 100% by Health and Human Services Levy Fund; and

**WHEREAS**, it is necessary that this Resolution become immediately effective in order that critical services provided by Cuyahoga County can continue and to provide for the usual, daily operation of a County entity.

**NOW, THEREFORE, BE IT RESOLVED BY THE COUNTY COUNCIL OF CUYAHOGA COUNTY, OHIO:**

**SECTION 1.** That the Cuyahoga County Council hereby makes awards on RQ13809 for a Master contract with various providers in the total amount not-to-exceed \$1,444,625.00 for various programs and resources for the Cuyahoga County Fatherhood Initiative for the period 4/1/2024 – 12/31/2025 as follows:

Agreement:

- a) Agreement No. 4278 with The MetroHealth System in the amount not-to-exceed \$77,875.00 for the Boot Camp for New Dads program.

Contracts:

- b) Contract No. 4269 with Career Development and Placement Strategies, Inc. in the amount not-to-exceed \$180,000.00 for the Rising Above program.
- c) Contract No. 4267 with The Children's Museum of Cleveland in the amount not-to-exceed \$58,000.00 for the Dads Count program.
- d) Contract No. 4265 with Circle Health Services dba The Centers in the amount not-to-exceed \$145,250.00 for the Fathers and Families Together program.
- e) Contract No. 4270 with JDC Advertising in the amount not-to-exceed \$127,500.00 for a Public Awareness Campaign.
- f) Contract No. 4172 with Journey Center for Safety and Healing in the amount not-to-exceed \$209,750.00 for the Safe and Sound Visitation Center.
- g) Contract No. 4279 with Murtis Taylor Human Services System in the amount not-to-exceed \$108,000.00 for the Murtis Taylor Fatherhood program.
- h) Contract No. 4274 with Nueva Luz Urban Resource Center in the amount not-to-exceed \$80,000.00 for the Fathers in the Ring program.
- i) Contract No. 4271 with Passages Connecting Fathers and Families, Inc. in the amount not-to-exceed \$180,000.00 for the Family Resiliency program.
- j) Contract No. 4273 with Towards Employment, Incorporated in the amount not-to-exceed \$180,000.00 for the Fatherhood Career Pathway program.
- k) Contract No. 4275 with University Settlement Slavic Village, LLC in the amount not-to-exceed \$98,250.00 for the Healthy Fathering program.

**SECTION 2.** That the County Executive is authorized to execute the Master contract and agreements and all other documents consistent with said awards and this Resolution.

**SECTION 3.** It is necessary that this Resolution become immediately effective for the usual daily operation of the County; the preservation of public peace, health or safety in the County; and any additional reasons set forth in the preamble. Provided that this Resolution receives the affirmative vote of at least eight members of Council, it shall take effect and be in force immediately upon the earliest occurrence of any of the following: (1) its approval by the County Executive through signature, (2) the expiration of the time during which it may be disapproved by the County Executive under Section 3.10(6) of the Cuyahoga County Charter, or (3) its passage by at least eight members of Council after disapproval pursuant to Section 3.10(7) of the Cuyahoga County Charter. Otherwise, it shall take effect and be in force from and after the earliest period allowed by law.

**SECTION 4.** It is found and determined that all formal actions of this Council relating to the adoption of this Resolution were adopted in an open meeting of the Council, and that all deliberations of this Council and of any of its committees that resulted in such formal action were in meetings open to the public, in compliance with all legal requirements, including Section 121.22 of the Ohio Revised Code.

On a motion by \_\_\_\_\_, seconded by \_\_\_\_\_, the foregoing Resolution was duly adopted.

Yeas:

Nays:

\_\_\_\_\_  
County Council President

\_\_\_\_\_  
Date

\_\_\_\_\_  
County Executive

\_\_\_\_\_  
Date

\_\_\_\_\_  
Clerk of Council

\_\_\_\_\_  
Date

First Reading/Referred to Committee: March 26, 2024  
Committee(s) Assigned: Health, Human Services & Aging

Journal \_\_\_\_\_  
\_\_\_\_\_, 20\_\_

**PURCHASE-RELATED TRANSACTIONS**

<b>Title</b>	RQ#13809 – 2024 – Multiple Vendors – RFP Master Agreement – Services for Custodial and Non-Custodial Fathers and Their Children in Cuyahoga County
<b>Department or Agency Name</b>	Cuyahoga County Fatherhood Initiative
<b>Requested Action</b>	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendme nt (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council’s Journal Date	Approval No.
O	4265, 4269, 4267, 4270, 4272, 4278, 4279, 4274, 4271, 4273, 4275	Multiple Vendors	4/1/2024-12/31/2025	\$1,444,625.00	Pending	Pending

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

Cuyahoga County Fatherhood Initiative is requesting approval of a Master Agreement with **multiple vendors** to provide educational services related to **Services for Custodial and Non-Custodial Fathers and Their Children in Cuyahoga County** in the amount of **\$1,444,625.00** for the time period of **4/1/2024 – 12/31/2025**.

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

**Project Goals, Outcomes or Purpose (list 3):**

- Improve the ability of men to co-parent.
- Increase the quality and quantity of father-child interactions.
- Improve the personal coping skills and lifestyle choices of fathers.
- Strengthen relationships between parenting partners.
- Increase occupational skill training for program participants.

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

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

Vendor Name and address:  <b>Career Development and Placement Strategies 3631 Perkins Avenue, Suite 3C Cleveland, Ohio 44114</b>	Owner, executive director, other (specify):  <b>Maurice Stevens, Executive Director</b>
Vendor Council District: <b>07</b>	Project Council District: <b>Countywide</b>
If applicable provide the full address or list the municipality(ies) impacted by the project.	<b>Countywide</b>

Vendor Name and address:  <b>The Centers for Families and Children 4500 Euclid Avenue Cleveland, Ohio 44115</b>	Owner, executive director, other (specify):  <b>Eric Morse, CEO</b>
Vendor Council District: <b>07</b>	Project Council District: <b>Countywide</b>
If applicable provide the full address or list the municipality(ies) impacted by the project.	<b>Countywide</b>
Vendor Name and address:  <b>The Children’s Museum of Cleveland 3813 Euclid Avenue Cleveland, Ohio 44115</b>	Owner, executive director, other (specify):  <b>Maria Campanelli, Executive Director</b>
Vendor Council District: <b>07</b>	Project Council District: <b>Countywide</b>
If applicable provide the full address or list the municipality(ies) impacted by the project.	<b>Countywide</b>
Vendor Name and address:  <b>JDC Advertising 20245 Glen Russ Lane Euclid, OH 44117</b>	Owner, executive director, other (specify):  <b>Joseph C. Hewitt, Owner</b>
Vendor Council District: <b>11</b>	Project Council District: <b>Countywide</b>
If applicable provide the full address or list the municipality(ies) impacted by the project.	<b>Countywide</b>
Vendor Name and address:  <b>Domestic Violence &amp; Child Advocacy Center dba Journey Center for Safety and Healing 2806 Payne Ave Cleveland, Ohio 44114</b>	Owner, executive director, other (specify):  <b>Robin D. Johnson, Interim Chief Executive Officer</b>
Vendor Council District: <b>07</b>	Project Council District: <b>Countywide</b>
If applicable provide the full address or list the municipality(ies) impacted by the project.	<b>Countywide</b>
Vendor Name and address:  <b>MetroHealth System 2500 MetroHealth Drive Cleveland, OH 44109</b>	Owner, executive director, other (specify):  <b>Dr. Airica Steed, CEO</b>
Vendor Council District: <b>03</b>	Project Council District: <b>Countywide</b>
If applicable provide the full address or list the municipality(ies) impacted by the project.	<b>Countywide</b>
Vendor Name and address:  <b>Murtis Taylor Human Services System 13422 Kinsman Road</b>	Owner, executive director, other (specify):  <b>Lovell J. Custard, CEO</b>

<b>Cleveland, Ohio 44120</b>	
Vendor Council District: <b>09</b>	Project Council District: <b>Countywide</b>
If applicable provide the full address or list the municipality(ies) impacted by the project.	<b>Countywide</b>
Vendor Name and address:  <b>Nueva Luz Urban Resource Center 6600 Detroit Avenue Cleveland, Ohio 44102</b>	Owner, executive director, other (specify):  <b>Max Rodas, CEO/Executive Director</b>
Vendor Council District: <b>15</b>	Project Council District: <b>Countywide</b>
If applicable provide the full address or list the municipality(ies) impacted by the project.	<b>Countywide</b>
Vendor Name and address:  <b>Passages Connecting Fathers and Sons 4600 Carnegie Avenue Cleveland, Ohio 44103</b>	Owner, executive director, other (specify):  <b>Dr. Brian Moore, CEO</b>
Vendor Council District: <b>08</b>	Project Council District: <b>Countywide</b>
If applicable provide the full address or list the municipality(ies) impacted by the project.	<b>Countywide</b>
Vendor Name and address:  <b>Towards Employment, Inc 3301 St. Clair Avenue Cleveland, Ohio 44114</b>	Owner, executive director, other (specify):  <b>Jill Rizika, Executive Director</b>
Vendor Council District: <b>07</b>	Project Council District: <b>Countywide</b>
If applicable provide the full address or list the municipality(ies) impacted by the project.	<b>Countywide</b>
Vendor Name and address:  <b>University Settlement 4800 Broadway Avenue Cleveland, OH 44127</b>	Owner, executive director, other (specify):  <b>Kelly McConnell, Development Director</b>
Vendor Council District: <b>08</b>	Project Council District: <b>Countywide</b>
If applicable provide the full address or list the municipality(ies) impacted by the project.	<b>Countywide</b>

<b>COMPETITIVE PROCUREMENT</b>	<b>NON-COMPETITIVE PROCUREMENT</b>
RQ # <i>if applicable</i> <b>RQ13809</b> <input type="checkbox"/> RFB <input checked="" type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: <b>1/12/2024</b>	Provide a short summary for not using competitive bid process.  *See Justification for additional information.
The total value of the solicitation: <b>\$1,444,625.00</b>	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date

There were 13 proposals pulled from OPD, 13 proposals submitted for review, 11 proposals approved	<input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( 4% ) SBE ( 2% ) MBE ( 4% ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain: N/A	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received? N/A	<input type="checkbox"/> Contract Amendment (list original procurement)
	<input type="checkbox"/> Other Procurement Method, please describe:

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

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

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



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

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

**HISTORY (see instructions):**

O R2021-0121 5/11/2021

A-1 R2023-0090 4/11/2023

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

Infor/Lawson RQ#:	RQ 13809
Infor/Lawson PO# Code (if applicable):	RFP
Event #	5057
CM Contract#	4269

<b>Career Development and Placement Strategies, Inc.</b>	<b>Department initials</b>	<b>Clerk of the Board</b>
Briefing Memo	DA	X EB

Late Submittal Required:	Yes	No X
Why is the contract being submitted late?		
What is being done to prevent this from reoccurring?		

TAC or CTO Required or authorized IT Standard	Yes <input type="checkbox"/>	No X
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<b>FULL AND OPEN COMPETITION</b>				
<b>Formal RFP</b>				
<b>Reviewed by Purchasing</b>				
<b>Career Development and Placement Strategies, Inc.</b>			<b>Department initials</b>	<b>Purchasing</b>
Notice of Intent to Award (sent to all responding vendors)			DA	EB
Bid Specification Packet			DA	EB
Final DEI Goal Setting Worksheet			DA	EB
Diversity Documents – <i>if required (goal set)</i>			DA	EB
Award Letter (sent to awarded vendor)			DA	EB
Vendor’s Confidential Financial Statement – <i>if RFP requested</i>			N/A	N/A
Tabulation Sheet			DA	EB
Evaluation with Scoring Summary ( <i>Names of evaluators to be included, must have minimum of three evaluators</i> ).			DA	EB
IG#	24-0059-REG	EXP. 12/31/28	DA	EB
Debarment/Suspension Verified	Date:	2.15.24	DA	EB
Auditor’s Finding	Date:	2.13.24	DA	EB
Vendor’s Submission			DA	EB
Independent Contractor (I.C.) Requirement	Date:	2.14.24	DA	EB
Cover - <i>Master contracts only</i>			DA	EB
Contract Evaluation – <i>if required</i>			AG	EB
TAC/CTO Approval or IT Standards (attach and identify relevant page #s), if required.			N/A	N/A
Checklist Verification			DA	EB

Other documentation may be required depending upon your specific item

Glossary of Terms at: <https://intranet.cuyahoga.cc/policies-procedures/procurement-information>

<b>Reviewed by Law</b>	
<b>Career Development and Placement Strategies, Inc.</b>	<b>Department initials</b>
Agreement/Contract and Exhibits	DA
Matrix Law Screen shot	DA

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

COI	DA
Workers’ Compensation Insurance	DA
Performance Bond, if required per RFP	N/A

### CONTRACT SPENDING PLAN

Time Period	Accounting Unit	Account	Activity	Account Category or Subaccount	Amount
4/1/2024-12/31/2024	HS280100	55130	UCH00000	55130	\$77,142.86
1/1/2025-12/31/2025	HS280100	55130	UCH00000	55130	\$102,857.14
			<b>TOTAL</b>		<b>\$180,000.00</b>

### CONTRACT HISTORY (to be completed by department)

<b>CE/AG# (if applicable)</b>		N/A			
<b>Infor/Lawson PO# and PO Code (if applicable)</b>		RFP			
<b>Lawson RQ# (if applicable)</b>		4542			
<b>CM Contract#</b>		1054			
	Original Amount	Amendment Amount	Original Time Period & End Date/ Amended End Date	Approval Date	Approval #
<b>Original Amount (CM#1054)</b>	\$200,000.00		4/1/2021 – 3/31/2023	5/11/2021	R2021-0121
	<b>Prior Amendment Amounts (list separately)</b>	\$100,000.00	4/1/2023-3/31/2024	4/11/2023	R2023-0090
		\$			
		\$			
	<b>Pending Amendment</b>	\$			
	<b>Total Amendments</b>	\$100,000.00			
<b>Total Contract Amount</b>	<b>\$300,000.00</b>				
<b>New Contract Action: Master Agreement (CM#4269)</b>	\$180,000.00		4/1/2024 - 12/31/2025	Pending	Pending

PURCHASING USE ONLY

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Revised 7/28/2022

## Department of Purchasing – Required Documents Checklist

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Prior Resolutions	R2021-0121; R2023-0090
CM#:	4269
Vendor Name:	Career Development and Placement Strategies, Inc.
ftp:	4/1/2024 – 12/31/2025
Amount:	\$180,000.00
History/CE:	OK
EL:	OK
Procurement Notes:	N/A
Purchasing Buyer’s initials and date of approval	EB 3/12/2024

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## CONTRACT EVALUATION FORM

<b>Contractor</b>	Career Development and Placement Strategies				
<b>Current Contract History: CE/AG# (if applicable) Infor/Lawson PO#:</b>	210518				
<b>RQ#</b>	4542				
<b>Time Period of Original Contract</b>	April 1, 2021, thru March 31, 2024				
<b>Background Statement</b>					
<b>Service Description</b>	<p>This is a Workforce Development/Training program at Career Development and Placement Strategies aimed at non-custodial fathers. It is a four-week training program with the goal of assisting fathers to reconnect with their families and preparing them to be a productive part of the workforce. Rising Above provides career readiness, career path counseling, relationship workshops, anger management and job placement.</p>				
<b>Performance Indicators</b>	<p>1) Ability to successfully recruit number of contracts specified program participants.                  2) Number of program participants to successfully complete the program curriculum.                  3) Number of program participants successfully achieving employment.                  4) Overall quality of program as indicated on formal program evaluations.                  5) Successful completion of all required monthly reports.</p>				
<b>Actual Performance versus performance indicators (include statistics):</b>	<p>The Rising Above program is contracted to recruit and serve two hundred and twenty five (225) fathers with one hundred and thirty eight (138) of those program participants completing the curriculum and sixty (60) to be successfully employed for the new contract year. The Rising Above program has been able to provide the following services during the thirty-four months (34) months of the current contract period: two hundred and forty (240) fathers have been assessed, one hundred and eighty one (181) fathers have completed the program and sixty-three (63) have been successfully placed in jobs. In addition, Career Development and Placement Strategies has partnered with the Cuyahoga County Landbank to provide trained labor for their foreclosure housing program.</p> <p>The Rising Above Program has continued to meet all monthly reporting requirements. They also continue to receive high level evaluations from the program participants. The program is on track to meet all annual performance goals</p>				
<b>Rating of Overall Performance of Contractor</b>	<b>Superior</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Poor</b>
<b>Select One (X)</b>	x				
<b>Justification of Rating</b>	See above				

<b>Department Contact</b>	Aldonis Grimes
<b>User Department</b>	Cuyahoga County Fatherhood Initiative
<b>Date</b>	02/26/2024

## Department of Purchasing – Required Documents Checklist

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Infor/Lawson RQ#:	13809
Infor/Lawson PO# Code (if applicable):	RFP
Event #	5057
CM Contract#	4267

<b>Children’s Museum of Cleveland- Fatherhood24 (3 of 11)</b>	<b>Department initials</b>	<b>Clerk of the Board</b>
Briefing Memo	AL	X EB

Late Submittal Required:	Yes	No <b>X</b>
Why is the contract being submitted late?	N/A	
What is being done to prevent this from reoccurring?	N/A	

TAC or CTO Required or authorized IT Standard	Yes <input type="checkbox"/>	No <b>X</b>
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<b>FULL AND OPEN COMPETITION</b>		
<b>Formal RFP</b>		
<b>Reviewed by Purchasing</b>		
Children’s Museum of Cleveland- Fatherhood24 (3 of 11)	Department initials	Purchasing
Notice of Intent to Award (sent to all responding vendors)	AL	EB
Bid Specification Packet	AL	EB
Final DEI Goal Setting Worksheet	AL	EB
Diversity Documents – <i>if required (goal set)</i>	AL	EB
Award Letter (sent to awarded vendor)	AL	EB
Vendor’s Confidential Financial Statement – <i>if RFP requested</i>	N/A	N/A
Tabulation Sheet	AL	EB
Evaluation with Scoring Summary ( <i>Names of evaluators to be included, must have minimum of three evaluators.</i> )	AL	EB
IG# <del>21-0345-REG</del> <b>21-0345-REG 31DEC2025</b>	AL	EB
Debarment/Suspension Verified      Date: 2/28/24	AL	EB
Auditor’s Finding                      Date: 2/28/24	AL	EB
Vendor’s Submission	AL	EB
Independent Contractor (I.C.) Requirement      Date: 2/14/24	AL	EB
Cover - <i>Master contracts only</i>	AL	EB
Contract Evaluation – <i>if required</i>	AG	EB
TAC/CTO Approval or IT Standards (attach and identify relevant page #s), if required.	N/A	N/A
Checklist Verification	AL	EB

Other documentation may be required depending upon your specific item

Glossary of Terms at: <https://intranet.cuyahoga.cc/policies-procedures/procurement-information>

<b>Reviewed by Law</b>	
	<b>Department initials</b>
Agreement/Contract and Exhibits	LC
Matrix Law Screen shot	SM

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

COI	AL- Cyber/Professional Waivers Approved
Workers’ Compensation Insurance	AL
Performance Bond, if required per RFP	N/A

### CONTRACT SPENDING PLAN

Time Period	Accounting Unit	Account	Activity	Account Category or Subaccount	Amount
4/1/2024 – 12/31/2024	HS280100	55130	UCH00000	55130	\$24,857.14
1/1/2025 – 12/31/2025	HS280100	55130	UCH00000	55130	\$33,142.86
			<b>TOTAL</b>		\$58,000.00

### CONTRACT HISTORY (to be completed by department)

CE/AG# (if applicable)		N/A			
Infor/Lawson PO# and PO Code (if applicable)		RFP			
Lawson RQ# (if applicable)		4542			
CM Contract#		1055			
	<b>Original Amount</b>	<b>Amendment Amount</b>	<b>Original Time Period &amp; End Date/ Amended End Date</b>	<b>Approval Date</b>	<b>Approval #</b>
<b>Original Amount (CM#1055)</b>	\$64,000.00		4/1/2021 – 3/31/2023	5/11/2021	R2021-0121
	<b>Prior Amendment Amounts (list separately)</b>	\$32,000.00	4/1/2023- 3/31/2024	4/11/2023	R2023-0090
		\$			
		\$			
	<b>Pending Amendment</b>	\$			
	<b>Total Amendments</b>	\$32,000.00			
<b>Total Contact Amount</b>	<b>\$96,000.00</b>				
<b>New Contract Action: Master Agreement (CM#4267)</b>	\$58,000.00		4/1/2024 - 12/31/2025	Pending	Pending

### PURCHASING USE ONLY



## **Department of Purchasing – Required Documents Checklist**

Upload as “word” document in Infor

Prior Resolutions	R2021-0121; R2023-0090
CM#:	4267
Vendor Name:	The Children’s Museum of Cleveland
ftp:	4/1/2024 – 12/31/2025
Amount:	\$58,000.00
History/CE:	OK
EL:	OK
Procurement Notes:	N/A
Purchasing Buyer’s initials and date of approval	EB 3/12/2024

## CONTRACT EVALUATION FORM

<b>Contractor</b>	Children's Museum of Cleveland				
<b>Current Contract History: CE/AG# (if applicable) Infor/Lawson PO#:</b>	210519				
<b>RQ#</b>	4542				
<b>Time Period of Original Contract</b>	April 1, 2021 thru March 31, 2024				
<b>Background Statement</b>					
<b>Service Description</b>	Fatherhood Initiative provides fatherhood programming for fathers and children at the Children's Museum with special recruiting emphasis on early learning centers and Domestic Relations Court.				
<b>Performance Indicators</b>	Quality of Programming at the Museum Quality of Reports Provided Number of attendees at the events				
<b>Actual Performance versus performance indicators (include statistics):</b>	The Children's Museum has done an excellent job of engaging fathers and their children in programming both at the museum. They have met all of reporting goals and objectives established at the beginning of the contract period. During this contract period 2,969 fathers and children have attended Dads Count events with two months left on the contract (Out of a total goal of 3,000 for the 36 months). The Museum had to close for a period during the COVID epidemic but has reopened and increased the number of days at the facility available for the Dads Count Program. This program at their new facility has been very well received by the community.				
<b>Rating of Overall Performance of Contractor</b>	<b>Superior</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Poor</b>
<b>Select One (X)</b>	x				
<b>Justification of Rating</b>	See above				
<b>Department Contact</b>	Aldonis Grimes				
<b>User Department</b>	Cuyahoga County Fatherhood Initiative				
<b>Date</b>	02/26/2024				

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

Infor/Lawson RQ#:	13809
Infor/Lawson PO# Code (if applicable):	RFP
Event #	N/A
CM Contract#	CM4265

	<b>Department initials</b>	<b>Clerk of the Board</b>
Briefing Memo	LC	X EB

Late Submittal Required:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Why is the contract being submitted late?		
What is being done to prevent this from reoccurring?		

TAC or CTO Required or authorized IT Standard	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
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<b>FULL AND OPEN COMPETITION Formal RFP Reviewed by Purchasing</b>
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The Centers for Families and Children ( 1 of 11)	Department initials	Purchasing
Notice of Intent to Award (sent to all responding vendors)	LC	EB
Bid Specification Packet	LC	EB
Final DEI Goal Setting Worksheet	LC	EB
Diversity Documents – <i>if required (goal set)</i>	LC	EB
Award Letter (sent to awarded vendor)	LC	EB
Vendor’s Confidential Financial Statement – <i>if RFP requested</i>	N/A	N/A
Tabulation Sheet	LC	EB
Evaluation with Scoring Summary ( <i>Names of evaluators to be included, must have minimum of three evaluators.</i> )	LC	EB
IG# 24-0066-REG 12/31/28	LC	EB
Debarment/Suspension Verified	Date: 2/9/2024 3/12/2024	LC EB
Auditor’s Finding	Date: 2/9/2024 3/12/2024	LC EB
Vendor’s Submission	LC	EB
Independent Contractor (I.C.) Requirement	Date: 2/8/2024 2/12/2024	LC EB
Cover - <i>Master contracts only</i>	LC	EB
Contract Evaluation – <i>if required</i>	LC	EB
TAC/CTO Approval or IT Standards (attach and identify relevant page #s), if required.	N/A	N/A
Checklist Verification	SM	EB

Other documentation may be required depending upon your specific item

Glossary of Terms at: <https://intranet.cuvahoga.cc/policies-procedures/procurement-information>

<b>Reviewed by Law</b>
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## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

	Department initials
Agreement/Contract and Exhibits	LC
Matrix Law Screen shot	SM
COI	LC
Workers’ Compensation Insurance	LC
Performance Bond, if required per RFP	N/A

### CONTRACT SPENDING PLAN

Time Period	Accounting Unit	Account	Activity	Account Category or Subaccount	Amount
4/1/2024 – 12/31/2024	HS280100	55130	UCH00000	55130	<b>\$62,250.00</b>
1/1/2025 – 12/31/2025	HS280100	55130	UCH00000	55130	<b>\$83,000.00</b>
			<b>TOTAL</b>		<b>\$145,250.00</b>

### CONTRACT HISTORY (to be completed by department)

<b>CE/AG# (if applicable)</b>		N/A			
<b>Infor/Lawson PO# and PO Code (if applicable)</b>		RFP			
<b>Lawson RQ# (if applicable)</b>		4542			
<b>CM Contract#</b>		1061			
	<b>Original Amount</b>	<b>Amendment Amount</b>	<b>Original Time Period &amp; End Date/ Amended End Date</b>	<b>Approval Date</b>	<b>Approval #</b>
	<b>Original Amount (CM#1061)</b>	\$166,000.00	4/1/2021 – 3/31/2023	5/11/2021	R2021-0121
	<b>Prior Amendment Amounts (list separately)</b>	\$83,000.00	4/1/2023- 3/31/2024	4/11/2023	R2023-0090
		\$			
		\$			
	<b>Pending Amendment</b>	\$			
	<b>Total Amendments</b>				
	<b>Total Contact Amount</b>	<b>\$145,250.00</b>			
	<b>New Contract Action: Master</b>	\$145,250.00	4/1/2024 - 12/31/2025	Pending	Pending

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

<i>Agreement (CM#4265)</i>					
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### PURCHASING USE ONLY

Prior Resolutions	R2021-0121; R2023-0090
CM#:	4265
Vendor Name:	Circle Health Services dba The Centers
ftp:	4/1/2024 -12/31/2025
Amount:	\$145,250.00
History/CE:	OK
EL:	OK
Procurement Notes:	N/A
Purchasing Buyer’s initials and date of approval	EB 3/12/2024

## CONTRACT EVALUATION FORM

<b>Contractor</b>	Center for Families and Children				
<b>Current Contract History: CE/AG# (if applicable) Infor/Lawson PO#:</b>	210525				
<b>RQ#</b>	4542				
<b>Time Period of Original Contract</b>	April 1, 2021, thru March 31, 2024				
<b>Background Statement</b>					
<b>Service Description</b>	The overall goal of this program located at the Center for Families and Children is to educate fathers about parenting and how to be a caring, committed and responsible father. In addition, the program teaches and encourages fathers to be a healthy role model for his children. Programming includes extensive workshops, father and child activities and retreats.				
<b>Performance Indicators</b>	<ol style="list-style-type: none"> <li>1) Successful recruitment of required number of program participants.</li> <li>2) Programming content indicated by variety and choice of workshops offered.</li> <li>3) Demonstrated quality of workshops offered through program evaluations.</li> <li>4) Number of program participants completing the required number of workshop hours.</li> <li>5) Evaluative and anecdotal evidence of number of fathers spending more quality time with their child/ren.</li> <li>6) Evaluative and anecdotal evidence of success of particular father/child activity focused workshops.</li> <li>7) Successful completion of all required monthly reports.</li> </ol>				
<b>Actual Performance versus performance indicators (include statistics):</b>	The FAFT program continues to be one of the Initiative's core components. During this contract period, the FAFT Program had a goal to recruit and serve one hundred and forty-four (144) fathers and have one hundred and five (105) of those program participants complete the FAFT workshop curriculum (20 hours of workshop programming). During the past thirty-four months of this contract period, the FAFT program has been able to enroll (185) fathers with one hundred and sixty-six (166) of those fathers completing twenty hours of workshop programming and all of the accompanying requirements. During this contract period the Fathers and Families Together program held a series of workshops that included "Cooking with Dads", Healthy Relationships, Financial Literacy, Living with the Law and Navigating Community Resources. The program has also been responsible for helping 14 fathers receive employment.				
<b>Rating of Overall Performance of Contractor</b>	<b>Superior</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Poor</b>
<b>Select One (X)</b>	x				
<b>Justification of Rating</b>	See above				

<b>Department Contact</b>	Aldonis Grimes
<b>User Department</b>	Cuyahoga County Fatherhood Initiative
<b>Date</b>	02/26/2024

## Department of Purchasing – Required Documents Checklist

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SInfor/Lawson RQ#:	RQ 13809
Infor/Lawson PO# Code (if applicable):	RFP
Event #	5057
CM Contract#	4270

<b>JDC Advertising-Fatherhood 2024</b>	<b>Department initials</b>	<b>Clerk of the Board</b>
Briefing Memo	DA	X EB

Late Submittal Required:	Yes	No <b>X</b>
Why is the contract being submitted late?		
What is being done to prevent this from reoccurring?		

TAC or CTO Required or authorized IT Standard	Yes <input type="checkbox"/>	No <b>X</b>
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<b>FULL AND OPEN COMPETITION</b>		
<b>Formal RFP</b>		
<b>Reviewed by Purchasing</b>		
<b>JDC Advertising-Fatherhood 2024</b>	<b>Department initials</b>	<b>Purchasing</b>
Notice of Intent to Award (sent to all responding vendors)	DA	EB
Bid Specification Packet	DA	EB
Final DEI Goal Setting Worksheet	DA	EB
Diversity Documents – <i>if required (goal set)</i>	DA	EB
Award Letter (sent to awarded vendor)	DA	EB
Vendor’s Confidential Financial Statement – <i>if RFP requested</i>	N/A	N/A
Tabulation Sheet	DA	EB
Evaluation with Scoring Summary ( <i>Names of evaluators to be included, must have minimum of three evaluators.</i> )	DA	EB
IG# 24-0068-REG exp. 12/31/28	DA	EB
Debarment/Suspension Verified Date: 2.15.24	DA	EB
Auditor’s Finding Date: 2.14.24	DA	EB
Vendor’s Submission	DA	EB
Independent Contractor (I.C.) Requirement Date: 2.10.24	DA	EB
Cover - <i>Master contracts only</i>	DA	EB
Contract Evaluation – <i>if required</i>	AG	EB
TAC/CTO Approval or IT Standards (attach and identify relevant page #s), if required.	N/A	N/A
Checklist Verification	DA	EB

Other documentation may be required depending upon your specific item

Glossary of Terms at: <https://intranet.cuyahoga.cc/policies-procedures/procurement-information>

<b>Reviewed by Law</b>	
<b>JDC Advertising-Fatherhood 2024</b>	<b>Department initials</b>
Agreement/Contract and Exhibits	DA
Matrix Law Screen shot	DA



## Department of Purchasing – Required Documents Checklist

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COI	DA
Workers’ Compensation Insurance	DA
Performance Bond, if required per RFP	N/A

### CONTRACT SPENDING PLAN

Time Period	Accounting Unit	Account	Activity	Account Category or Subaccount	Amount
4/1/2024-12/31/2024	HS280100	55130	UCH00000	55130	\$54,642.86
1/1/2025-12/31/2025	HS280100	55130	UCH00000	55130	\$72,857.14
			<b>TOTAL</b>		\$127,500.00

### CONTRACT HISTORY (to be completed by department)

CE/AG# (if applicable)		N/A			
Infor/Lawson PO# and PO Code (if applicable)		RFP			
Lawson RQ# (if applicable)		4542			
CM Contract#		1056			
	Original Amount	Amendment Amount	Original Time Period & End Date/ Amended End Date	Approval Date	Approval #
Original Amount (CM#1056)	\$140,000.00		4/1/2021 – 3/31/2023	5/11/2021	R2021-0121
	Prior Amendment Amounts (list separately)	\$70,000.00	4/1/2023-3/31/2024	4/11/2023	R2023-0090
		\$			
		\$			
	Pending Amendment	\$			
	Total Amendments	\$70,000.00			
Total Contract Amount	<b>\$210,000.00</b>				
New Contract Action: <i>Master Agreement</i> (CM#4270)	\$127,500.00		4/1/2024 - 12/31/2025	Pending	Pending

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

Prior Resolutions	R2021-0121; R2023-0090
CM#:	4270
Vendor Name:	JDC Advertising
ftp:	4/1/2024 – 12/31/2025
Amount:	\$127,500.00
History/CE:	OK
EL:	OK
Procurement Notes:	N/A
Purchasing Buyer’s initials and date of approval	EB 3/12/2024

## CONTRACT EVALUATION FORM

<b>Contractor</b>	JDC Advertising				
<b>Current Contract History: CE/AG# (if applicable) Infor/Lawson PO#:</b>	210520				
<b>RQ#</b>	4542				
<b>Time Period of Original Contract</b>	April 1,2021 thru March 31, 2024				
<b>Background Statement</b>					
<b>Service Description</b>	The goal of the Public Awareness Campaign is to promote the message of the importance of responsible fatherhood in the lives of children. The Public Awareness Campaign includes developing ads and purchasing of advertising to promote the Cuyahoga County Fatherhood Initiative. Various media outlets are used including radio, television, billboards, and print ads in kiosks and buses.				
<b>Performance Indicators</b>	1) Quality of advertisements developed especially for the Cuyahoga County Fatherhood Initiative as reflected in outreach and overall penetration into target population (fathers throughout Cuyahoga County). 2) Quality of placement of Cuyahoga County Fatherhood Initiative advertisements as reflected in overall responses to those advertisements. 3) Completion of all required monthly reports.				
<b>Actual Performance versus performance indicators (include statistics):</b>	JDC Advertising has continued to effectively conduct the public awareness campaign for The Cuyahoga County Fatherhood Initiative. JDC Advertising has continued to meet its contract goals by successfully penetrating the target population (over 34,000 calls to the 211Fatherhood Line since inception) and providing the outreach necessary to maintain levels of participation in all Initiative funded programs. During the first 34 months of this contract period, the public awareness campaign generated 6,270 calls to the 211 Fatherhood line and the Fatherhood Initiative office. JDC Advertising continues to complete all required monthly reports. We also continue to get very positive feedback from the community on the quality of our ads. JDC is also able to negotiate discounted ad rates as a result their experience and the number of clients they represent, acquire a number of free PSA's for the Fatherhood Initiative and schedule appearances for the fatherhood director to highlight the Initiative on community programs such as Community Talk with Kaleidoscope, Harry Boomer, Urban Spotlight on Radio One, Religious programming shows, drive time radio, ESPN radio sport shows and others.				
<b>Rating of Overall Performance of Contractor</b>	<b>Superior</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Poor</b>
<b>Select One (X)</b>	x				
<b>Justification of Rating</b>	See above				

<b>Department Contact</b>	Aldonis Grimes
<b>User Department</b>	Cuyahoga County Fatherhood Initiative
<b>Date</b>	02/26/2024

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

Infor/Lawson RQ#:	13809
Infor/Lawson PO# Code (if applicable):	RFP
Event #	N/A
CM Contract#	4272

<b>FTHD 2024-Journey Center</b>	<b>Department initials</b>	<b>Clerk of the Board</b>
Briefing Memo	LS	X EB

Late Submittal Required:	Yes	No X
Why is the contract being submitted late?		
What is being done to prevent this from reoccurring?		

TAC or CTO Required or authorized IT Standard	Yes <input type="checkbox"/>	No X
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<b>FULL AND OPEN COMPETITION</b> <b>Formal RFP</b> <b>Reviewed by Purchasing</b>
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<b>FTHD 2024-Journey Center</b>	<b>Department initials</b>	<b>Purchasing</b>
Notice of Intent to Award (sent to all responding vendors)	LS	EB
Bid Specification Packet	LS	EB
Final DEI Goal Setting Worksheet	LS	EB
Diversity Documents – <i>if required (goal set)</i>	LS	EB
Award Letter (sent to awarded vendor)	LS	EB
Vendor’s Confidential Financial Statement – <i>if RFP requested</i>	N/A	N/A
Tabulation Sheet	LS	EB
Evaluation with Scoring Summary ( <i>Names of evaluators to be included, must have minimum of three evaluators.</i> )	LS	EB
IG# 23- exp. 31DEC2027 0466- 23-0466-REG 31DEC2027 REG	LS	EB
Debarment/Suspension Verified	Date: 2/8/2024 3/12/2024	LS EB
Auditor’s Finding	Date: 2/8/2024 3/12/2024	LS EB
Vendor’s Submission	LS	EB
Independent Contractor (I.C.) Requirement	Date: 2.9.2024	LS EB
Cover - <i>Master contracts only</i>	LS	EB
Contract Evaluation – <i>if required</i>	LS	EB
TAC/CTO Approval or IT Standards (attach and identify relevant page #s), if required.	N/A	N/A
Checklist Verification	LS	EB

Other documentation may be required depending upon your specific item

Glossary of Terms at: <https://intranet.cuyahoga.cc/policies-procedures/procurement-information>

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

Reviewed by Law	
	<b>Department initials</b>
Agreement/Contract and Exhibits	LC
Matrix Law Screen shot	LS
COI exp. 6.1.24	LS
Workers’ Compensation Insurance exp. 7.1.24	LS
Performance Bond, if required per RFP	N/A

### CONTRACT SPENDING PLAN

Time Period	Accounting Unit	Account	Activity	Account Category or Subaccount	Amount
4/1/2024 – 12/31/2024	HS280100	55130	UCH00000		\$89,892.86
1/1/2025 – 12/31/2025	HS280100	55130	UCH00000		\$119,857.14
			<b>TOTAL</b>		<b>\$209,750.00</b>

### CONTRACT HISTORY (to be completed by department)

CE/AG# (if applicable)		N/A			
Infor/Lawson PO# and PO Code (if applicable)		RFP			
Lawson RQ# (if applicable)		4542			
CM Contract#		1057			
	Original Amount	Amendment Amount	Original Time Period & End Date/ Amended End Date	Approval Date	Approval #
Original Amount (CM 1057)	\$234,000.00		4/1/2021 – 03/31/2023	5/11/2021	R2021-0121
	Prior Amendment Amounts (list separately)	\$117,000.00	4/1/2023 - 03/31/2024	4/11/2023	R2023-0090
		\$			
		\$			
	Pending Amendment				
	Total Amendments	\$117,000.00			
Total Contract Amount	<del>\$351,000.00</del>				
New Contract Action: Master	\$209,750.00		4/1/2024 – 12/31/2025	Pending	Pending

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

<b>Agreement (CM#4272)</b>					
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### PURCHASING USE ONLY

Prior Resolutions	R2021-0121; R2023-0090
CM#:	4272
Vendor Name:	Journey Center for Safety and Healing
ftp:	4/1/2024 – 12/31/2025
Amount:	\$209,750.00
History/CE:	OK
EL:	OK
Procurement Notes:	N/A
Purchasing Buyer’s initials and date of approval	EB 3/13/2024

## CONTRACT EVALUATION FORM

<b>Contractor</b>	Journey Center for Safety and Healing				
<b>Current Contract History: CE/AG# (if applicable) Infor/Lawson PO#:</b>	210521				
<b>RQ#</b>	4542				
<b>Time Period of Original Contract</b>	April 1, 2021, thru March 31, 2024				
<b>Background Statement</b>					
<b>Service Description</b>	The Supervised Visitation Program provides services for families currently mandated to participate in a supervised visitation program. In addition to ongoing supervised visitation, fathers who participate in the program will attend fathering classes designed to build the skills that lead to successful parenting and stronger families. Supervised visitation and the fathering classes are presented at the Community Care Network Building.				
<b>Performance Indicators</b>	<ol style="list-style-type: none"> <li>1) Outreach and management of referrals for program services.</li> <li>2) Successfully connect fathers with their child/ren through supervised visitation services.</li> <li>3) Successful scheduling of all supervised visits or supervised exchanges.</li> <li>4) Completion of all contract specified supervised visitation sessions.</li> <li>5) Completion of all required monthly reports.</li> </ol>				
<b>Actual Performance versus performance indicators (include statistics):</b>	During this contract period, the Journey Center's goal is to provide supervised visitation services to one hundred and five (105) families. During the thirty-four months of this contract period, the Journey Center has served (112) new families and provided 1,724 supervised visits by leveraging funds received through the Cuyahoga County Fatherhood Initiative. The supervised visitation program has also conducted 606 monitored exchanges. The Journey Center for Safety and Healing has also been compliant in completing all monthly reporting requirements.				
<b>Rating of Overall Performance of Contractor</b>	<b>Superior</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Poor</b>
<b>Select One (X)</b>	x				
<b>Justification of Rating</b>	See above				
<b>Department Contact</b>	Aldónis Grimes				
<b>User Department</b>	Cuyahoga County Fatherhood Initiative				
<b>Date</b>	02/26/2024				



## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

Infor/Lawson RQ#:	13809
Infor/Lawson PO# Code (if applicable):	RFP
Event #	N/A
CM Contract#	4278

	<b>Department initials</b>	<b>Clerk of the Board</b>
Briefing Memo	LC	X EB

Late Submittal Required:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Why is the contract being submitted late?		
What is being done to prevent this from reoccurring?		

TAC or CTO Required or authorized IT Standard	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
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<b>FULL AND OPEN COMPETITION</b>				
<b>Formal RFP</b>				
<b>Reviewed by Purchasing</b>				
<b>METROHEALTH SYSTEMS (6 of 11)</b>			<b>Department initials</b>	<b>Purchasing</b>
Notice of Intent to Award (sent to all responding vendors)			LC	EB
Bid Specification Packet			LC	EB
Final DEI Goal Setting Worksheet			LC	EB
Diversity Documents – <i>if required (goal set)</i>			LC	EB
Award Letter (sent to awarded vendor)			LC	EB
Vendor’s Confidential Financial Statement – <i>if RFP requested</i>			N/A	N/A
Tabulation Sheet			LC	EB
Evaluation with Scoring Summary ( <i>Names of evaluators to be included, must have minimum of three evaluators</i> ).			LC	EB
IG#			N/A	N/A Exempt public entity
Debarment/Suspension Verified	Date:	2/8/2024	LC	EB
Auditor’s Finding	Date:	2/8/2024	LC	EB
Vendor’s Submission			LC	EB
Independent Contractor (I.C.) Requirement	Date:	1/9/2024	LC	EB
Cover - <i>Master contracts only</i>			LC	EB
Contract Evaluation – <i>if required</i>			LC	EB
TAC/CTO Approval or IT Standards (attach and identify relevant page #s), if required.			N/A	N/A
Checklist Verification			LC	EB

Other documentation may be required depending upon your specific item

Glossary of Terms at: <https://intranet.cuyahoga.cc/policies-procedures/procurement-information>

<b>Reviewed by Law</b>	
	<b>Department initials</b>
Agreement/Contract and Exhibits	LC

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

Matrix Law Screen shot	SM
COI	LC
Workers’ Compensation Insurance	LC
Performance Bond, if required per RFP	N/A

### CONTRACT SPENDING PLAN

Time Period	Accounting Unit	Account	Activity	Account Category or Subaccount	Amount
4/1/2024 – 12/31/2024	HS280100	55130	UCH00000	55130	<b>\$33,375.00</b>
1/1/2025 – 12/31/2025	HS280100	55130	UCH00000	55130	<b>\$44,500.00</b>
			<b>TOTAL</b>		<b>\$77,875.00</b>

### CONTRACT HISTORY (to be completed by department)

CE/AG# (if applicable)		N/A			
Infor/Lawson PO# and PO Code (if applicable)		RFP			
Lawson RQ# (if applicable)		4542			
CM Contract#		1058			
	Original Amount	Amendment Amount	Original Time Period & End Date/ Amended End Date	Approval Date	Approval #
Original Amount (CM#1058)	\$88,000.00		4/1/2021 – 3/31/2023	5/11/2021	R2021-0121
	Prior Amendment Amounts (list separately)	\$44,000.00	4/1/2023-3/31/2024	4/11/2023	R2023-0090
		\$			
		\$			
	Pending Amendment	\$			
	Total Amendments	\$44,000.00			
Total Contact Amount	<b>\$132,000.00</b>				
New Contract Action: <i>Master Agreement</i> (CM#4278)	\$77,875.00		4/1/2024 - 12/31/2025	Pending	Pending

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

### PURCHASING USE ONLY

Prior Resolutions	R2021-0121; R2023-0090
CM#:	4278
Vendor Name:	The MetroHealth System
ftp:	4/1/2024 – 12/31/2025
Amount:	\$77,875.00
History/CE:	OK
EL:	OK
Procurement Notes:	N/A
Purchasing Buyer’s initials and date of approval	EB 3/12/2024

## CONTRACT EVALUATION FORM

<b>Contractor</b>	MetroHealth System				
<b>Current Contract History: CE/AG# (if applicable) Infor/Lawson PO#:</b>	210522				
<b>RQ#</b>	4542				
<b>Time Period of Original Contract</b>	April 1, 2021 thru March 31, 2024				
<b>Background Statement</b>					
<b>Service Description</b>	MetroHealth partners with hospitals within the Cleveland Clinic and University Hospital systems to provide the Boot Camps for New Dads program. Locations included in the collaboration are Fairview Hospital, Hillcrest Hospital, Stephanie Tubbs Jones Health Center, Parma General Hospital, MetroHealth, Southwest General Hospital, St. John's Medical Center, Garfield Heights Womankind and University Hospitals MacDonaldd Women's Hospital and Rainbow Babies and Children's Hospital.				
<b>Performance Indicators</b>	<ol style="list-style-type: none"> <li>1) Continued delivery of nationally recognized and award-winning Boot Camp for New Dads curriculum, complete with all related program evaluations.</li> <li>2) Successful recruitment of appropriate candidates at each program sites.</li> <li>3) Number of program attendees completing the curriculum.</li> <li>4) Delivery of high quality program services as evidenced through program evaluations.</li> <li>5) Completion of all required monthly reports within constraints of HIPAA regulations</li> </ol>				
<b>Actual Performance versus performance indicators (include statistics):</b>	The Cuyahoga County Fatherhood Initiative contracted with MetroHealth to conduct one hundred seventy four (174) Boot Camp for New Dads sessions spread across all nine (9) program locations to service a total of 2,100 fathers. During the first thirty-four (34) months of this contract period, the Boot Camp for New Dads program has provided its curriculum to 2,285 new fathers or fathers-to-be. Further, program evaluations indicate that over ninety percent (93%) of program participants continue to rank this program with the highest quality level and would recommend it to their friends and family members. MetroHealth has also completed all required monthly reports within HIPAA constraints.				
<b>Rating of Overall Performance of Contractor</b>	<b>Superior</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Poor</b>
<b>Select One (X)</b>	x				
<b>Justification of Rating</b>	See above				
<b>Department Contact</b>	Aldonis Grimes				
<b>User Department</b>	Cuyahoga County Fatherhood Initiative				
<b>Date</b>	02/26/2024				

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

Infor/Lawson RQ#:	13809
Infor/Lawson PO# Code (if applicable):	RFP
Event #	N/A
CM Contract#	4279

	<b>Department initials</b>	<b>Clerk of the Board</b>
Briefing Memo	LC	x EB

Late Submittal Required:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Why is the contract being submitted late?		
What is being done to prevent this from reoccurring?		

TAC or CTO Required or authorized IT Standard	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
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<b>FULL AND OPEN COMPETITION Formal RFP Reviewed by Purchasing</b>
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MURTIS TAYLOR (7 of 11)	Department initials	Purchasing
Notice of Intent to Award (sent to all responding vendors)	LC	EB
Bid Specification Packet	LC	EB
Final DEI Goal Setting Worksheet	LC	EB
Diversity Documents – <i>if required (goal set)</i>	LC	EB
Award Letter (sent to awarded vendor)	LC	EB
Vendor’s Confidential Financial Statement – <i>if RFP requested</i>	N/A	N/A
Tabulation Sheet	LC	EB
Evaluation with Scoring Summary ( <i>Names of evaluators to be included, must have minimum of three evaluators</i> ).	LC	EB
IG#	LC	EB
Debarment/Suspension Verified	LC	EB
Auditor’s Finding	LC	EB
Vendor’s Submission	LC	EB
Independent Contractor (I.C.) Requirement	LC	EB
Cover - <i>Master contracts only</i>	LC	EB
Contract Evaluation – <i>if required</i>	LC	EB
TAC/CTO Approval or IT Standards (attach and identify relevant page #s), if required.	N/A	N/A
Checklist Verification	SM	EB

Other documentation may be required depending upon your specific item

Glossary of Terms at: <https://intranet.cuyahoga.cc/policies-procedures/procurement-information>

<b>Reviewed by Law</b>	
	<b>Department initials</b>
Agreement/Contract and Exhibits	LC

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

Matrix Law Screen shot	SM
COI	LC -expires 5/1/2024
Workers’ Compensation Insurance	LC
Performance Bond, if required per RFP	N/A

### CONTRACT SPENDING PLAN

Time Period	Accounting Unit	Account	Activity	Account Category or Subaccount	Amount
4/1/2024 – 12/31/2024	HS280100	55130	UCH00000	55130	\$46,285.71
1/1/2025 – 12/31/2025	HS280100	55130	UCH00000	55130	\$61,714.29
			<b>TOTAL</b>		<b>\$108,000.00</b>

### CONTRACT HISTORY (to be completed by department)

CE/AG# (if applicable)		N/A			
Infor/Lawson PO# and PO Code (if applicable)		RFP			
Lawson RQ# (if applicable)		4542			
CM Contract#		1059			
	Original Amount	Amendment Amount	Original Time Period & End Date/ Amended End Date	Approval Date	Approval #
Original Amount (CM#1059)	\$120,000.00		4/1/2021 – 3/31/2023	5/11/2021	R2021-0121
Prior Amendment Amounts (list separately)	\$60,000.00		4/1/2023- 3/31/2024	4/11/2023	R2023-0090
	\$				
	\$				
Pending Amendment	\$				
Total Amendments	\$60,000.00				
Total Contact Amount	<del>\$180,000.00</del>				
New Contract Action: <i>Master Agreement</i> (CM#4279)	\$108,000.00		4/1/2024 - 12/31/2025	Pending	Pending

## Department of Purchasing – Required Documents Checklist

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Upload as “word” document in Infor

### PURCHASING USE ONLY

Prior Resolutions	R2021-0121; R2023-0090
CM#:	4279
Vendor Name:	Murtis Taylor Human Services System
ftp:	4/1/2024 – 12/31/2025
Amount:	\$108,000.00
History/CE:	ok
EL:	ok
Procurement Notes:	n/a
Purchasing Buyer’s initials and date of approval	EB 3/12/2024

## CONTRACT EVALUATION FORM

<b>Contractor</b>	Murtis Taylor Human Services System				
<b>Current Contract History: CE/AG# (if applicable) Infor/Lawson PO#:</b>	210523				
<b>RQ#</b>	4542				
<b>Time Period of Original Contract</b>	April 1, 2021, thru March 31, 2024				
<b>Background Statement</b>					
<b>Service Description</b>	Murtis Taylor’s Fatherhood Program is targeted at low-income males 25 or younger who reside in Cuyahoga County. The Strong Fathers Program uses the 24/7 Dad and Active Parenting curriculums integrated with organized league sports to teach young men what it means to be a strong supportive father.				
<b>Performance Indicators</b>	<ol style="list-style-type: none"> <li>1) Successful outreach, recruitment and engagement of fathers.</li> <li>2) Number of program participants within who complete the program as outlined in the contract specifications.</li> <li>3) Quality of program delivered as evidenced through formal program evaluations.</li> <li>4) Compliance with all required monthly reporting.</li> </ol>				
<b>Actual Performance versus performance indicators (include statistics):</b>	<p>The Cuyahoga County Fatherhood Initiative contracted with Murtis Taylor to provide its 24/7 Dads and Active Parenting Curriculum to fathers within Cuyahoga County with a minimum of one hundred and five (105) unduplicated fathers completing the six-week class. The contract also includes standards of deliverables for those completing the program including increased self-esteem, engagement and availability with their children, increase in participation by children and their fathers in community activities and increased knowledge of non-violent conflict management as measured by nationally recognized tools.</p> <p>During the first thirty- four months of this contract period the Murtis Taylor Fatherhood Program had 109 fathers complete (graduated) the six-week curriculum. Additionally, the program has reached out beyond the Murtis Taylor Center to Harbor Lights, the Community Assessment and Treatment Center and the Garfield Heights Neighborhood Collaborative to serve fathers. Further, the program completed all the monthly reporting requirements and demonstrated high ratings in meeting the deliverables based on program evaluations among participants.</p>				
<b>Rating of Overall Performance of Contractor</b>	<b>Superior</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Poor</b>
<b>Select One (X)</b>	X				
<b>Justification of Rating</b>	See above				



<b>Department Contact</b>	Aldonis Grimes
<b>User Department</b>	Cuyahoga County Fatherhood Initiative
<b>Date</b>	02/26/2024

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

Infor/Lawson RQ#:	13809
Infor/Lawson PO# Code (if applicable):	RFP
Event #	N/A
CM Contract#	4274

<b>FTHD 2024-Nueva Luz Resource Center</b>	<b>Department initials</b>	<b>Clerk of the Board</b>
Briefing Memo	LS	X EB

Late Submittal Required:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Why is the contract being submitted late?		
What is being done to prevent this from reoccurring?		

TAC or CTO Required or authorized IT Standard	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
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<b>FULL AND OPEN COMPETITION</b>				
<b>Formal RFP</b>				
<b>Reviewed by Purchasing</b>				
			<b>Department initials</b>	<b>Purchasing</b>
<b>FTHD 2024-Nueva Luz Resource Center</b>				
Notice of Intent to Award (sent to all responding vendors)			LS	EB
Bid Specification Packet			LS	EB
Final DEI Goal Setting Worksheet			LS	EB
Diversity Documents – <i>if required (goal set)</i>			LS	EB
Award Letter (sent to awarded vendor)			LS	EB
Vendor’s Confidential Financial Statement – <i>if RFP requested</i>			LS	N/A Not requested
Tabulation Sheet			LS	EB
Evaluation with Scoring Summary ( <i>Names of evaluators to be included, must have minimum of three evaluators</i> ).			LS	EB
IG# 23- 0466- REG	exp. 31DEC2027 20-0355-REG 31DEC2024		LS	EB
Debarment/Suspension Verified	Date:	2/8/2024 3/12/2024	LS	EB
Auditor’s Finding	Date:	2/8/2024 2/13/2024	LS	EB
Vendor’s Submission			LS	EB
Independent Contractor (I.C.) Requirement	Date:	2-9-2024 2/8/2024	LS	EB
Cover - <i>Master contracts only</i>			LS	EB
Contract Evaluation – <i>if required</i>			N/A	N/A
TAC/CTO Approval or IT Standards (attach and identify relevant page #s), if required.			N/A	N/A
Checklist Verification			LS	EB

Other documentation may be required depending upon your specific item

## Department of Purchasing – Required Documents Checklist

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Glossary of Terms at: <https://intranet.cuyahoga.cc/policies-procedures/procurement-information>

Reviewed by Law	
	<b>Department initials</b>
Agreement/Contract and Exhibits	LC
Matrix Law Screen shot	LS
COI exp. 6.1.24	LS-expires 5/20/2024
Workers’ Compensation Insurance exp. 7.1.24	LS
Performance Bond, if required per RFP	N/A

### CONTRACT SPENDING PLAN

Time Period	Accounting Unit	Account	Activity	Account Category or Subaccount	Amount
4/1/2024 – 12/31/2024	HS280100	55130	UCH00000		\$34,285.71
1/1/2025 – 12/31/2025	HS280100	55130	UCH00000		\$45,714.29
			<b>TOTAL</b>		<b>\$80,000.00</b>

### CONTRACT HISTORY (to be completed by department)

<b>CE/AG# (if applicable)</b>	N/A				
<b>Infor/Lawson PO# and PO Code (if applicable)</b>	RFP				
<b>Lawson RQ# (if applicable)</b>	13809				
<b>CM Contract#</b>	4274				
	<b>Original Amount</b>	<b>Amendment Amount</b>	<b>Original Time Period &amp; End Date/ Amended End Date</b>	<b>Approval Date</b>	<b>Approval #</b>
<b>Original Amount: New Vendor and Contract Action: Master Agreement (CM 4274)</b>	\$80,000.00		4/1/2024 - 12/31/2025	Pending	Pending
	<b>Prior Amendment Amounts (list separately)</b>	\$			
		\$			
		\$			
	<b>Pending Amendment</b>	\$			
	<b>Total Amendments</b>	\$			

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Revised 7/28/2022

## Department of Purchasing – Required Documents Checklist

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<b>Total Contact Amount</b>	<b>\$80,000.00</b>		<b>4/1/2024 - 12/31/2025</b>	<b>Pending</b>	<b>Pending</b>
<b>New Contract Action: Master Agreement (4274)</b>	<b>\$80,000.00</b>				

### PURCHASING USE ONLY

<b>Prior Resolutions</b>	N/A
<b>CM#:</b>	4274
<b>Vendor Name:</b>	Nueva Luz Urban Resource Center
<b>ftp:</b>	4/1/2024 – 12/31/2025
<b>Amount:</b>	\$80,000.00
<b>History/CE:</b>	OK
<b>EL:</b>	OK
<b>Procurement Notes:</b>	N/A
<b>Purchasing Buyer’s initials and date of approval</b>	EB 3/12/2024

## Department of Purchasing – Required Documents Checklist

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Infor/Lawson RQ#:	13809
Infor/Lawson PO# Code (if applicable):	RFP
Event #	5057
CM Contract#	4271

<b>Passages Connecting Fathers and Sons, Inc.- Fatherhood24 (9 of 11)</b>	<b>Department initials</b>	<b>Clerk of the Board</b>
Briefing Memo	AL	X EB

Late Submittal Required:	Yes	No X
Why is the contract being submitted late?	N/A	
What is being done to prevent this from reoccurring?	N/A	

TAC or CTO Required or authorized IT Standard	Yes <input type="checkbox"/>	No X
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FULL AND OPEN COMPETITION		
Formal RFP		
Reviewed by Purchasing		
Passages Connecting Fathers and Sons, Inc.- Fatherhood24 (9 of 11)	Department initials	Purchasing
Notice of Intent to Award (sent to all responding vendors)	AL	EB
Bid Specification Packet	AL	EB
Final DEI Goal Setting Worksheet	AL	EB
Diversity Documents – <i>if required (goal set)</i>	AL	EB
Award Letter (sent to awarded vendor)	AL	EB
Vendor’s Confidential Financial Statement – <i>if RFP requested</i>	N/A	N/A
Tabulation Sheet	AL	EB
Evaluation with Scoring Summary ( <i>Names of evaluators to be included, must have minimum of three evaluators</i> ).	AL	EB
IG# 23-0341-REG <b>23-0341-REG 31DEC2028</b>	AL	EB
Debarment/Suspension Verified Date: 2/28/24	AL	EB
Auditor’s Finding Date: 2/28/24	AL	EB
Vendor’s Submission	AL	EB
Independent Contractor (I.C.) Requirement Date: 2/12/24	AL	EB
Cover - <i>Master contracts only</i>	AL	EB
Contract Evaluation – <i>if required</i>	AG	EB
TAC/CTO Approval or IT Standards (attach and identify relevant page #s), if required.	N/A	N/A
Checklist Verification	AL	EB

Other documentation may be required depending upon your specific item

Glossary of Terms at: <https://intranet.cuyahoga.cc/policies-procedures/procurement-information>

Reviewed by Law	
	Department initials
Agreement/Contract and Exhibits	LC

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

Matrix Law Screen shot	SM
COI	AL -expires 6/1/2024
Workers’ Compensation Insurance	AL
Performance Bond, if required per RFP	N/A

### CONTRACT SPENDING PLAN

Time Period	Accounting Unit	Account	Activity	Account Category or Subaccount	Amount
4/1/2024 – 12/31/2024	HS280100	55130	UCH00000	55130	\$77,142.86
1/1/2025 – 12/31/2025	HS280100	55130	UCH00000	55130	\$102,857.14
			<b>TOTAL</b>		\$180,000.00

### CONTRACT HISTORY (to be completed by department)

CE/AG# (if applicable)		N/A			
Infor/Lawson PO# and PO Code (if applicable)		RFP			
Lawson RQ# (if applicable)		4542			
CM Contract#		1060			
	Original Amount	Amendment Amount	Original Time Period & End Date/ Amended End Date	Approval Date	Approval #
Original Amount (CM#1060)	\$200,000.00		4/1/2021 – 3/31/2023	5/11/2021	R2021-0121
	Prior Amendment Amounts (list separately)	\$100,000.00	4/1/2023- 3/31/2024	4/11/2023	R2023-0090
		\$			
		\$			
	Pending Amendment	\$			
	Total Amendments	\$100,000.00			
Total Contact Amount	\$300,000.00				
New Contract Action: <i>Master Agreement</i> (CM#4271)	\$180,000.00		4/1/2024 - 12/31/2025	Pending	Pending

PURCHASING USE ONLY

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Revised 7/28/2022

## Department of Purchasing – Required Documents Checklist

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Upload as “word” document in Infor

Prior Resolutions	R2021-0121; R2023-0090
CM#:	4271
Vendor Name:	Passages Connecting Fathers and Families, Inc
ftp:	4/1/2024 – 12/31/2025
Amount:	\$180,000.00
History/CE:	OK
EL:	OK
Procurement Notes:	N/A
Purchasing Buyer’s initials and date of approval	EB 3/12/2024

## CONTRACT EVALUATION FORM

<b>Contractor</b>	Passages Connecting Fathers and Sons, Inc				
<b>Current Contract History: CE/AG# (if applicable) Infor/Lawson PO#:</b>	210524				
<b>RQ#</b>	4542				
<b>Time Period of Original Contract</b>	April 1, 2021 thru March 31, 2024				
<b>Background Statement</b>					
<b>Service Description</b>	This program provides counseling, job referral/employment readiness services, development of individualized plans for strategic steps toward employment and independence, crisis intervention and mentoring for young fathers. This program focuses on the population of ex-offenders and men with limited skills. Passages has extensive experience working with incarcerated or newly released ex-offenders and provides career planning and re-entry counseling for these fathers.				
<b>Performance Indicators</b>	<ol style="list-style-type: none"> <li>1) Ability to successfully recruit contract specified number of program participants.</li> <li>2) Ability to successfully enroll contract specified number of program participants.</li> <li>3) Program completion by contract specified number of program participants.</li> <li>4) Successful job placement of a percentage of individuals completing the program.</li> <li>5) Program quality demonstrated by formal program evaluations.</li> <li>6) Completion of all required monthly reports.</li> </ol>				
<b>Actual Performance versus performance indicators (include statistics):</b>	According to the terms of this contract period, Passages' goal was to recruit and serve two hundred and forty (240) fathers through its job referral/employment readiness services with 90 fathers securing employment. During the thirty-four (34) months of this contract period Passages has assessed and served a total of three hundred and one (301) fathers with ninety-three (93) securing employment. Further, Passages' program has received excellent evaluations from program participants. Passages also have completed all required monthly reports.				
<b>Rating of Overall Performance of Contractor</b>	<b>Superior</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Poor</b>
<b>Select One (X)</b>	x				
<b>Justification of Rating</b>	See above				
<b>Department Contact</b>	Aldonis Grimes				
<b>User Department</b>	Cuyahoga County Fatherhood Initiative				
<b>Date</b>	02/26/2024				



## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

Infor/Lawson RQ#:	RQ 13809
Infor/Lawson PO# Code (if applicable):	RFP
Event #	5057
CM Contract#	4273

<b>Towards Employment-Fatherhood 2024</b>	<b>Department initials</b>	<b>Clerk of the Board</b>
Briefing Memo	DA	x EB

Late Submittal Required:	Yes	No X
Why is the contract being submitted late?		
What is being done to prevent this from reoccurring?		

TAC or CTO Required or authorized IT Standard	Yes <input type="checkbox"/>	No X
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<b>FULL AND OPEN COMPETITION Formal RFP Reviewed by Purchasing</b>
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<b>Towards Employment-Fatherhood 2024</b>	<b>Department initials</b>	<b>Purchasing</b>
Notice of Intent to Award (sent to all responding vendors)	DA	EB
Bid Specification Packet	DA	EB
Final DEI Goal Setting Worksheet	DA	EB
Diversity Documents – <i>if required (goal set)</i>	DA	EB
Award Letter (sent to awarded vendor)	DA	EB
Vendor’s Confidential Financial Statement – <i>if RFP requested</i>	N/A	N/A
Tabulation Sheet	DA	EB
Evaluation with Scoring Summary ( <i>Names of evaluators to be included, must have minimum of three evaluators.</i> )	DA	EB
IG# 12-2802-REG exp. 12/31/24	DA	EB
Debarment/Suspension Verified Date: 2.15.24	DA	EB
Auditor’s Finding Date: 2.14.24	DA	EB
Vendor’s Submission	DA	EB
Independent Contractor (I.C.) Requirement Date: 2.12.24	DA	EB
Cover - <i>Master contracts only</i>	DA	EB
Contract Evaluation – <i>if required</i>	AG	EB
TAC/CTO Approval or IT Standards (attach and identify relevant page #s), <i>if required.</i>	N/A	N/A
Checklist Verification	DA	EB

Other documentation may be required depending upon your specific item

Glossary of Terms at: <https://intranet.cuyahoga.cc/policies-procedures/procurement-information>

<b>Reviewed by Law</b>	
<b>Towards Employment-Fatherhood 2024</b>	<b>Department initials</b>
Agreement/Contract and Exhibits	DA
Matrix Law Screen shot	DA

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

COI	DA expires 6/1/2024, umbrellas 6/1/2023
Workers’ Compensation Insurance	DA
Performance Bond, if required per RFP	N/A

### CONTRACT SPENDING PLAN

Time Period	Accounting Unit	Account	Activity	Account Category or Subaccount	Amount
4/1/2024-12/31/2024	HS280100	55130	UCH00000	55130	\$77,142.86
1/01/2025-12/31/2025	HS280100	55130	UCH00000	55130	\$102,857.14
			<b>TOTAL</b>		\$180,000.00

### CONTRACT HISTORY (to be completed by department)

CE/AG# (if applicable)		N/A			
Infor/Lawson PO# and PO Code (if applicable)		RFP			
Lawson RQ# (if applicable)		4542			
CM Contract#		1062			
	Original Amount	Amendment Amount	Original Time Period & End Date/ Amended End Date	Approval Date	Approval #
	Original Amount (CM#1062)		4/1/2021 – 3/31/2023	5/11/2021	R2021-0121
	Prior Amendment Amounts (list separately)	\$97,500.00	4/1/2023-3/31/2024	4/11/2023	R2023-0090
		\$			
		\$			
	Pending Amendment	\$			
	Total Amendments	\$97,500.00			
	Total Contact Amount	\$292,500.00			
	New Contract Action: <i>Master Agreement</i> (CM#4273)	\$180,000.00	4/1/2024 - 12/31/2025	Pending	Pending

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

### PURCHASING USE ONLY

Prior Resolutions	R2021-0121; R2023-0090
CM#:	4273
Vendor Name:	Towards Employment, Incorporated
ftp:	4/1/2024 – 12/31/2025
Amount:	\$180,000.00
History/CE:	ok
EL:	ok
Procurement Notes:	N/A
Purchasing Buyer’s initials and date of approval	EB 3/12/2024

## CONTRACT EVALUATION FORM

<b>Contractor</b>	Towards Employment				
<b>Current Contract History: CE/AG# (if applicable) Infor/Lawson PO#:</b>	21056				
<b>RQ#</b>	4542				
<b>Time Period of Original Contract</b>	April 1, 2021, thru March 31, 2024				
<b>Background Statement</b>					
<b>Service Description</b>	<p>This is a Workforce Development/Training program at Towards Employment aimed at previously incarcerated fathers. It is a six-week training program with the goal of assisting fathers to reconnect with their families and preparing them to be a productive part of the workforce. This amendment component of the contract adds activities outlined in the Families Forward Demonstration Project which is designed to test a new employment-focused program for low-income noncustodial parents (NCPs) who are unable to fully meet their child support obligations. The key objective is to identify effective strategies to improve earning capacity and financial capacity-building of NCPs, thereby increasing their ability to support their children.</p>				
<b>Performance Indicators</b>	<ol style="list-style-type: none"> <li>1) Ability to successfully recruit number of contracts specified program participants.</li> <li>2) Number of program participants to successfully complete the program curriculum.</li> <li>3) Number of program participants successfully achieving employment.</li> <li>4) Overall quality of program as indicated on formal program evaluations.</li> <li>5) Successful completion of all required monthly reports.</li> </ol>				
<b>Actual Performance versus performance indicators (include statistics):</b>	<p>The Towards Employment program is contracted to recruit and serve 225 fathers with 162 of those program participants completing the curriculum and 105 to be successfully employed for the new contract year. The Towards Employment program has been able to provide the following services during the past thirty-four months of the current contract period: 233 fathers have been assessed, 176 fathers have completed the program and 108 have been successfully placed in jobs. (Additionally, the Covid-19 epidemic has had an impact on TE's ability to recruit new clients during this period, but they adjusted quickly to remote training.) Towards Employment has worked well with the OCSS.</p> <p>The Towards Employment has also met all monthly reporting requirements. goals.</p>				
<b>Rating of Overall Performance of Contractor</b>	<b>Superior</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Poor</b>
<b>Select One (X)</b>	x				

<b>Justification of Rating</b>	See above
<b>Department Contact</b>	Aldonis Grimes
<b>User Department</b>	Cuyahoga County Fatherhood Initiative
<b>Date</b>	02/26/2024

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

Infor/Lawson RQ#:	13809
Infor/Lawson PO# Code (if applicable):	RFP
Event #	N/A
CM Contract#	4275

<b>FTHD 2024-University Settlement</b>	<b>Department initials</b>	<b>Clerk of the Board</b>
Briefing Memo	LS	X EB

Late Submittal Required:	Yes	No X
Why is the contract being submitted late?		
What is being done to prevent this from reoccurring?		

TAC or CTO Required or authorized IT Standard	Yes <input type="checkbox"/>	No X
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<b>FULL AND OPEN COMPETITION</b> <b>Formal RFP</b> <b>Reviewed by Purchasing</b>
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	Department initials	Purchasing
<b>FTHD 2024-University Settlement</b>		
Notice of Intent to Award (sent to all responding vendors)	LS	EB
Bid Specification Packet	LS	EB
Final DEI Goal Setting Worksheet	LS	EB
Diversity Documents – <i>if required (goal set)</i>	LS	EB
Award Letter (sent to awarded vendor)	LS	EB
Vendor’s Confidential Financial Statement – <i>if RFP requested</i>	N/A	N/A
Tabulation Sheet	LS	EB
Evaluation with Scoring Summary ( <i>Names of evaluators to be included, must have minimum of three evaluators</i> ).	LS	EB
IG# 23- <del>0466-REG</del> exp. 31DEC2027 23-0424-REG 31DEC2027	LS	EB
Debarment/Suspension Verified	Date: 2/8/2024 3/12/2024	LS EB
Auditor’s Finding	Date: 2/8/2024 3/12/2024	LS EB
Vendor’s Submission	LS	EB
Independent Contractor (I.C.) Requirement	Date: 2-9-2024 3/13/2024	LS EB
Cover - <i>Master contracts only</i>	DA	EB
Contract Evaluation – <i>if required</i>		EB SUPERIOR RATING
TAC/CTO Approval or IT Standards (attach and identify relevant page #s), if required.	N/A	N/A
Checklist Verification	LS	EB

Other documentation may be required depending upon your specific item

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

Glossary of Terms at: <https://intranet.cuyahoga.cc/policies-procedures/procurement-information>

Reviewed by Law	
	<b>Department initials</b>
Agreement/Contract and Exhibits	LC
Matrix Law Screen shot	LS
COI exp. 6.1.24	LS
Workers’ Compensation Insurance exp. 7.1.24	LS
Performance Bond, if required per RFP	N/A

### CONTRACT SPENDING PLAN

Time Period	Accounting Unit	Account	Activity	Account Category or Subaccount	Amount
4/1/2024 – 12/31/2024	HS280100	55130	UCH000		\$42,107.14
1/1/2025 – 12/31/2025	HS280100	55130	UCH000		\$56,142.86
			<b>TOTAL</b>		<b>\$98,250.00</b>

### CONTRACT HISTORY (to be completed by department)

<b>CE/AG# (if applicable)</b>	N/A				
<b>Infor/Lawson PO# and PO Code (if applicable)</b>	RFP				
<b>Lawson RQ# (if applicable)</b>	4542				
<b>CM Contract#</b>	1063				
	<b>Original Amount</b>	<b>Amendment Amount</b>	<b>Original Time Period &amp; End Date/ Amended End Date</b>	<b>Approval Date</b>	<b>Approval #</b>
<b>Original Amount (CM#1063)</b>	\$104,000.00		4/1/2021 - 03/31/2023	5/11/2021	R2021-0121
	<b>Prior Amendment Amounts (list separately)</b>	\$52,000.00	4/1/2023 – 03/31/2024	4/11/2023	R2023-0090
		\$			
		\$			
	<b>Pending Amendment</b>	\$			
	<b>Total Amendments</b>	\$156,000.00			
<b>Total Contract Amount</b>	<b>\$156,000.00</b>				

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

<b>New Contract Action: Master Agreement (CM#4275)</b>	<b>\$98,250.00</b>		<b>4/1/2024 – 12/31/2025</b>	<b>Pending</b>	<b>Pending</b>
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### PURCHASING USE ONLY

<b>Prior Resolutions</b>	R2021-0121; R2023-0090
<b>CM#:</b>	4275
<b>Vendor Name:</b>	University Settlement Slavic Village, LLC
<b>ftp:</b>	4/1/2024 – 12/31/2025
<b>Amount:</b>	\$98,250.00
<b>History/CE:</b>	OK
<b>EL:</b>	OK
<b>Procurement Notes:</b>	N/A
<b>Purchasing Buyer’s initials and date of approval</b>	EB 3/13/2024



## CONTRACT EVALUATION FORM

<b>Contractor</b>	University Settlement, Inc				
<b>Current Contract History: CE/AG# (if applicable) Infor/Lawson PO#:</b>	210527				
<b>RQ#</b>	4542				
<b>Time Period of Original Contract</b>	April 1, 2021 thru March 31, 2024				
<b>Background Statement</b>					
<b>Service Description</b>	The Healthy Fathers Program engages fathers in school-based fatherhood programming at three K-8 CMSD schools; A.B. Hart, Mound and Warner Girls Leadership Academy in addition to fatherhood programs at University Settlement.				
<b>Performance Indicators</b>	<ol style="list-style-type: none"> <li>1) Outreach, recruitment and enrollment of fathers with children attending each of the targeted schools.</li> <li>2) Attendance at father/child focused events.</li> <li>3) Volunteer participation rates by fathers in targeted schools.</li> <li>4) Completion of all required monthly reports.</li> </ol>				
<b>Actual Performance versus performance indicators (include statistics):</b>	<p>During this contract period, University Settlement’s Healthy Fathers program has continued to be extremely successful in getting fathers engaged in their children’s educational process in their three targeted K-8 schools (A.B. Hart, Mound and Warner Girls Leadership Academy). The Cuyahoga County Fatherhood Initiative specified a goal of serving nine hundred and seventy-five (975) fathers in its three targeted schools for this contract period. During the past thirty-four months of the current contract period the Healthy Fathers program has served twelve hundred and thirty-two (1,232) community fathers.</p> <p>The Healthy Fathers program has also continued to successfully sponsor multiple family orientated programs at each of its three targeted schools, while also increasing the father’s volunteer rate at each school. Further, the Healthy Fathers program has also complied with all monthly reporting requirements. In addition to the high evaluations the program has received from the participating fathers, the program has also received very positive reviews and accolades from the administrators at each of the schools.</p>				
<b>Rating of Overall Performance of Contractor</b>	<b>Superior</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Poor</b>
<b>Select One (X)</b>	x				
<b>Justification of Rating</b>	See above				
<b>Department Contact</b>	Aldonis Grimes				
<b>User Department</b>	Cuyahoga County Fatherhood Initiative				
<b>Date</b>	02/26/2024				



## Department of Purchasing Tabulation Sheet

REQUISITION NUMBER: 13809 Event 5057	TYPE: (RFB/RFP/RFQ): RFP	ESTIMATE: \$1,444,625.00			
CONTRACT PERIOD:	RFB/RFP/RFQ DUE DATE: January 12, 2024	SOLICITATIONS ISSUED	MANUAL RESPONSES	ELECTRONIC RESPONSES	TOTAL RESPONSES
REQUESTING DEPARTMENT: Fatherhood Initiative	COMMODITY DESCRIPTION: Services for Custodial & Non-Custodial Fathers & Their Children in Cuyahoga County	34	7	6	
DIVERSITY GOAL/SBE 4 %	DIVERSITY GOAL/MBE 2 %	DIVERSITY GOAL/WBE 4 %			
Does CCBB Apply: <input type="checkbox"/> Yes <input type="checkbox"/> No-N/A, procurement method was RFP or RFQ, JW 1/17/2024 LL 1/18/2024	CCBB: Low Non-CCBB Bid\$:n/a	Add 2%, Total is: n/a			
Does CCBEIP Apply: <input type="checkbox"/> Yes <input type="checkbox"/> No N/A, procurement method was RFP or RFQ, JW 1/17/2024 LL 1/18/2024	CCBEIP: Low Non-CCBEIP Bid \$: n/a	Add 2%, Total is: n/a			
*PRICE PREFERENCE LOWEST BID REC'D \$n/a	RANGE OF LOWEST BID REC'D \$n/a	Minus \$, =			
PRICE PREF % & \$ LIMIT: n/a	MAX SBE/MBE/WBE PRICE PREF n/a	DOES PRICE PREFERENCE APPLY? <input type="checkbox"/> Yes <input type="checkbox"/> No N/A LL 1/18/2024			

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)
1 Career Development & Placement Services, Inc. 26300 Cedar Road Beachwood, OH 44122	N/A		Compliant: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IG Registration Complete: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IG Number: NCA: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A PH: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A CCBB (Form Attached) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Match)	<input type="checkbox"/> Yes <input type="checkbox"/> No	CCBB <input type="checkbox"/> Yes <input type="checkbox"/> No CCBEIP <input type="checkbox"/> Yes <input type="checkbox"/> No	SBE / MBE / WBE Subcontractor Name(s): N/A SBE/MBE/WBE Prime: (Y/N) <input type="checkbox"/> Yes <input type="checkbox"/> SBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/> No Total % SBE: <u>0</u> % MBE: <u>0</u> % WBE: <u>0</u> % SBE/MBE/WBE Comply: (Y/N) <input checked="" type="checkbox"/> Yes LL 1/18/2024 <input type="checkbox"/> No SBE/MBE/WBE Comments and Initials: Charles Bradford was put on the DIV-2, but Charles Bradford is not certified with Cuyahoga County. Full waiver requested due to being a non-profit organization. 01/16/2024-SS Div-1 signed, 501C information provided by vendor, verified non-profit status through state of Ohio business search, full		<input type="checkbox"/> Yes <input type="checkbox"/> No

Transaction ID:

Bidder's/ Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review:  SBE / MBE / WBE	Dept. Tech. Review w	Award : (Y/N)
			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  CCBEIP: (Form Attached) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Match) <input type="checkbox"/> Yes <input type="checkbox"/> No  COOP: (Form Attached) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Participate?) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  OPD Buyer Initials: __EB__			 waiver requested, JW 1/17/2024 LL 1/18/2024		

Transaction ID:

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)
2 East Cleveland Schools 1843 Stanwood Road East Cleveland, OH 44112			Compliant: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IG Registration Complete: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IG Number: NCA: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A PH: <input type="checkbox"/> Yes	<input type="checkbox"/> Yes <input type="checkbox"/> No	CCBB <input type="checkbox"/> Yes <input type="checkbox"/> No CCBEIP <input type="checkbox"/> Yes <input type="checkbox"/> No	Subcontractor Name(s): N/A SBE/MBE/WBE Prime: (Y/N) <input type="checkbox"/> Yes <input type="checkbox"/> SBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/> No Total % SBE: <u>0 %</u> MBE: <u>0 %</u> WBE: <u>0 %</u>		<input type="checkbox"/> Yes <input type="checkbox"/> No

Transaction ID:

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)
			<input checked="" type="checkbox"/> No <input type="checkbox"/> N/A  CCBB (Form Attached) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Match) <input type="checkbox"/> Yes <input type="checkbox"/> No  CCBEIP: (Form Attached) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Match) <input type="checkbox"/> Yes <input type="checkbox"/> No  COOP: (Form Attached) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			SBE/MBE/WBE Comply: (Y/N) <input checked="" type="checkbox"/> Yes LL 1/18/2024 <input type="checkbox"/> No  SBE/MBE/WBE Comments and Initials: Full waiver requested, stating they will collaborate with community partners rather than use subcontractors (community partners are not listed). 01/06/2024-SS Div-1 signed, full waiver requested, JW 1/17/2024 Political Subdivision LL 1/18/2024		

Transaction ID:

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials <input type="checkbox"/> N/A (Agree to Participate?) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No OPD Buyer Initials: _EB_____	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)

Bidder's / Vendors Name and Address 3 Iona Production, Inc 4 Deserving Dads 3193 Ludlow Road Cleveland, OH 44120	Bid Bond / Check N/A	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference <input type="checkbox"/> Yes <input type="checkbox"/> No	CCBB / CCBEIP Registered <input type="checkbox"/> Yes <input type="checkbox"/> No CCBEIP <input type="checkbox"/> Yes <input type="checkbox"/> No	Diversity Program Review: SBE / MBE / WBE Subcontractor Name(s): N/A SBE/MBE/WBE Prime: (Y/N) <input type="checkbox"/> Yes <input type="checkbox"/> SBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/> No Total % SBE: 0% MBE: 0% WBE: 0% SBE/MBE/WBE Comply: (Y/N) <input checked="" type="checkbox"/> Yes LL 1/18/2024 <input type="checkbox"/> No	Dept. Tech. Review	Award : (Y/N) <input type="checkbox"/> Yes <input type="checkbox"/> No
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Transaction ID:



	<p>No DIV-1,2 submitted. Full waiver requested due to being a non-profit agency. 01/16/2024-SS          No signed div-1, full waiver requested. Vendor provided 501C information, verified non-profit status via state of Ohio business search, 1/17/2024 JW LL 1/18/2024</p>	<p>SBE/MBE/WBE          Comments and          Initials:</p>	
		<p><input type="checkbox"/> Yes  <input checked="" type="checkbox"/> No  <input type="checkbox"/> N/A          (Agree to Match)  <input type="checkbox"/> Yes  <input type="checkbox"/> No</p> <p>CCBEIP:          (Form Attached)  <input type="checkbox"/> Yes  <input checked="" type="checkbox"/> No  <input type="checkbox"/> N/A          (Agree to Match)  <input type="checkbox"/> Yes  <input type="checkbox"/> No</p> <p>COOP:          (Form Attached)  <input checked="" type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A          (Agree to Participate?)  <input type="checkbox"/> Yes  <input checked="" type="checkbox"/> No</p> <p>OPD Buyer          Initials: _____                    EB_____</p>	

Transaction ID:



Vendors Name and Address	4 JDC Advertising 20245 Glen Russ Lane Euclid, OH 44117	Bond / Check	N/A	Bid Amount (enter "N/A" if RFP or RFQ)	Administrative Review: OPD Buyer Initials	Preference	CCBEIP Registered	SBE / MBE / WBE	Tech. Review	: (Y/N)	
		Compliant:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		CCBB <input type="checkbox"/> Yes <input type="checkbox"/> No		Subcontractor Name(s):		N/A	
		IG Registration Complete:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		CCBEIP <input type="checkbox"/> Yes <input type="checkbox"/> No		SBE/MBE/WBE Prime: (Y/N)		<input type="checkbox"/> Yes <input type="checkbox"/> SBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/> No	
		IG Number:						Total %		SBE: <u>0%</u> MBE: <u>0%</u> WBE: <u>0%</u>	
		NCA:		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A				SBE/MBE/WBE Comply: (Y/N)		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No LL 1/18/2024	
		PH:		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A				SBE/MBE/WBE Comments and Initials:		JDC Advertising stated they are a minority company. JDC Advertising is not certified with Cuyahoga County. Full waiver requested, but DIV-3 2 of 2 was not submitted. 01/16/2024-SS Signed div-1 provided, no div-2, vendor is not Cuyahoga county certified, div-3 page 1 provided for waiver, request	
		CCBB (Form Attached)		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Match)							

Transaction ID:

	<p>incomplete, no div-3 page 2, JW 1/17/2024 Diversity Goals not met and insufficient details and documentation of Good Faith Effort to achieve the goals. LL 1/18/2024</p>			<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>CCBEIP: (Form Attached) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Match) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>COOP: (Form Attached) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Participate?) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>OPD Buyer Initials: __ EB ____</p>			
--	---	--	--	---	--	--	--

Transaction ID:

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)
5 Journey Center for Safety & Healing P.O. Box 5466 Cleveland, OH 44101	N/A		Compliant: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IG Registration Complete: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IG Number: NCA: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A PH: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A CCBB	<input type="checkbox"/> Yes <input type="checkbox"/> No	CCBB <input type="checkbox"/> Yes <input type="checkbox"/> No CCBEIP <input type="checkbox"/> Yes <input type="checkbox"/> No	Subcontractor Name(s): N/A SBE/MBE/WBE Prime: (Y/N) <input type="checkbox"/> Yes <input type="checkbox"/> SBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/> No Total % SBE: <u>0%</u> MBE: <u>0%</u> WBE: <u>0%</u> SBE/MBE/WBE Comply: (Y/N) <input checked="" type="checkbox"/> Yes LL 1/18/2024 <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)
			(Form Attached) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Match) <input type="checkbox"/> Yes <input type="checkbox"/> No  CCBEIP: (Form Attached) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Match) <input type="checkbox"/> Yes <input type="checkbox"/> No  COOP: (Form Attached) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Participate?) <input type="checkbox"/> Yes			SBE/MBE/WBE Comments and Initials: Full waiver requested due to being a non-profit agency. 01/16/2024-SS Signed div-1 provided, full waiver requested, vendor provided 501C information, verified non-profit status through state of Ohio business search, JW 1/17/2024 LL 1/18/2024		

Transaction ID:

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)
			<input checked="" type="checkbox"/> No OPD Buyer Initials: _EB_____					

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)
6 Murtis Taylor Human Services 13422 Kinsman Road Cleveland, OH 44120	N/A		Compliant: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IG Registration Complete: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IG Number: 12-1963-REG 31DEC2024 NCA: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A PH: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A CCBB (Form Attached) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	CCBB <input type="checkbox"/> Yes <input type="checkbox"/> No CCBEIP <input type="checkbox"/> Yes <input type="checkbox"/> No	Subcontractor Name(s): N/A SBE/MBE/WBE Prime: (Y/N) <input type="checkbox"/> Yes <input type="checkbox"/> SBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/> No Total % SBE: <u>0%</u> MBE: <u>0%</u> WBE: <u>0%</u> SBE/MBE/WBE Comply: (Y/N) <input checked="" type="checkbox"/> Yes LL 1/18/2024 <input type="checkbox"/> No SBE/MBE/WBE Comments and Initials: Full waiver requested due to being a non-profit agency. 01/16/2024-SS Signed div-1 provided, full waiver requested, vendor provided 501C information, verified non-profit status through state of Ohio business search, JW 1/17/2024 LL 1/18/2024		<input type="checkbox"/> Yes <input type="checkbox"/> No

Transaction ID:



Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)
			(Agree to Match) <input type="checkbox"/> Yes <input type="checkbox"/> No CCBEIP: (Form Attached) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Match) <input type="checkbox"/> Yes <input type="checkbox"/> No COOP: (Form Attached) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Participate?) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No OPD Buyer Initials: <u>EB</u>					

Transaction ID:

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)
7 Nueva Luz Urban Resource Center 6600 Detroit Avenue Cleveland, OH 44102	N/A		Compliant: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IG Registration Complete: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	CCBB <input type="checkbox"/> Yes <input type="checkbox"/> No CCBEIP <input type="checkbox"/> Yes <input type="checkbox"/> No	Subcontractor Name(s): N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No

Transaction ID:

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)
			<p>IG Number: 20-0355-REG 31DEC2024</p> <p>NCA: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>PH: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>CCBB (Form Attached) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Match) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>CCBEIP: (Form Attached) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			<p>SBE/MBE/WBE Prime: (Y/N) <input type="checkbox"/> Yes <input type="checkbox"/> SBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/> No</p> <p>Total % SBE: <u>0%</u> MBE: <u>0%</u> WBE: <u>0%</u></p> <p>SBE/MBE/WBE Comply: (Y/N) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No LL 1/18/2024</p> <p>SBE/MBE/WBE Comments and Initials: No DIV 1,2,3 submitted. 01/16/2024-SS Verified vendor non-profit status through state of Ohio Business search, 1/17/2024 JW Missing DIV-1 Covenant of Non-discrimination. LL 1/18/2024</p>		

Transaction ID:

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials <input type="checkbox"/> N/A (Agree to Match) <input type="checkbox"/> Yes <input type="checkbox"/> No COOP: (Form Attached) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Participate?) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No OPD Buyer Initials: _____ EB _____	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)

Transaction ID:

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)								
8 Passages Connecting Families, Inc 4600 Carnegie Ave Cleveland, OH 44103	N/A		Compliant: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  IG Registration Complete: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  IG Number:  NCA: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A  PH: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  CCBB	<input type="checkbox"/> Yes <input type="checkbox"/> No	CCBB <input type="checkbox"/> Yes <input type="checkbox"/> No  CCBEIP <input type="checkbox"/> Yes <input type="checkbox"/> No	<table border="1"> <tr> <td data-bbox="544 863 797 1096">Subcontractor Name(s):</td> <td data-bbox="797 863 1385 1096">N/A</td> </tr> <tr> <td data-bbox="544 512 797 863">SBE/MBE/WBE Prime: (Y/N)</td> <td data-bbox="797 512 1385 863"><input type="checkbox"/> Yes <input type="checkbox"/> SBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/> No</td> </tr> <tr> <td data-bbox="544 331 797 512">Total %</td> <td data-bbox="797 331 1385 512">SBE: <u>0</u>% MBE: <u>0</u>% WBE: <u>0</u>%</td> </tr> <tr> <td data-bbox="544 220 797 331">SBE/MBE/WBE Comply: (Y/N)</td> <td data-bbox="797 220 1385 331"><input checked="" type="checkbox"/> Yes LL 1/18/2024 <input type="checkbox"/> No</td> </tr> </table>	Subcontractor Name(s):	N/A	SBE/MBE/WBE Prime: (Y/N)	<input type="checkbox"/> Yes <input type="checkbox"/> SBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/> No	Total %	SBE: <u>0</u> % MBE: <u>0</u> % WBE: <u>0</u> %	SBE/MBE/WBE Comply: (Y/N)	<input checked="" type="checkbox"/> Yes LL 1/18/2024 <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
Subcontractor Name(s):	N/A															
SBE/MBE/WBE Prime: (Y/N)	<input type="checkbox"/> Yes <input type="checkbox"/> SBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/> No															
Total %	SBE: <u>0</u> % MBE: <u>0</u> % WBE: <u>0</u> %															
SBE/MBE/WBE Comply: (Y/N)	<input checked="" type="checkbox"/> Yes LL 1/18/2024 <input type="checkbox"/> No															

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)
			(Form Attached) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Match) <input type="checkbox"/> Yes <input type="checkbox"/> No  CCBEIP: (Form Attached) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Match) <input type="checkbox"/> Yes <input type="checkbox"/> No  COOP: (Form Attached) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Participate?) <input type="checkbox"/> Yes			SBE/MBE/WBE Comments and Initials: Full waiver requested due to being a non-profit agency. 01/16/2024 SS Signed div-1 provided, full waiver requested, vendor provided 501C information, verified non-profit status through state of Ohio business search, JW 1/17/2024 LL 1/18/2024		

Transaction ID:

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials <input type="checkbox"/> No OPD Buyer Initials: <u>EB</u>	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)
9 The Centers 4500 Euclid Avenue Cleveland, OH 44103	N/A		Compliant: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  IG Registration Complete: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  IG Number:  NCA: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  PH: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  CCBB (Form Attached) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Match)	<input type="checkbox"/> Yes <input type="checkbox"/> No	CCBB <input type="checkbox"/> Yes <input type="checkbox"/> No  CCBEIP <input type="checkbox"/> Yes <input type="checkbox"/> No	SBE / MBE / WBE  Subcontractor Name(s): N/A  SBE/MBE/WBE Prime: (Y/N) <input type="checkbox"/> Yes <input type="checkbox"/> SBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/> No  Total % SBE: <u>0%</u> MBE: <u>0%</u> WBE: <u>0%</u>  SBE/MBE/WBE Comply: (Y/N) <input checked="" type="checkbox"/> Yes LL 1/18/2024 <input type="checkbox"/> No  SBE/MBE/WBE Comments and Initials: Full waiver requested due to being a non-profit agency. 01/16/2024-SS Signed div-1 provided, full waiver requested, vendor provided 501C information, verified non-profit status through state of Ohio business search, JW 1/17/2024 LL 1/18/2024		<input type="checkbox"/> Yes <input type="checkbox"/> No

Transaction ID:



Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials <input type="checkbox"/> Yes <input type="checkbox"/> No CCBEIP: (Form Attached) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Match) <input type="checkbox"/> Yes <input type="checkbox"/> No COOP: (Form Attached) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Participate?) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No OPD Buyer Initials: <u>EB</u>	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)

Transaction ID:

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)

Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award: (Y/N)

Vendors Name and Address	Bond / Check	Bid Amount (enter "N/A" if RFP or RFQ)	Administrative Review: OPD Buyer Initials	Preference	CCBEIP Registered	SBE / MBE / WBE	Tech. Review	: (Y/N)
1 The Children's Museum of Cleveland 3813 Euclid Avenue Cleveland, OH 44115	N/A		Compliant: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  IG Registration Complete: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  IG Number: 21-0345-REG 31DEC2025  NCA: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  PH: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  CCBB (Form Attached) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	CCBB <input type="checkbox"/> Yes <input type="checkbox"/> No  CCBEIP <input type="checkbox"/> Yes <input type="checkbox"/> No	Subcontractor Name(s): N/A  SBE/MBE/WBE Prime: (Y/N) <input type="checkbox"/> Yes <input type="checkbox"/> SBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/> No  Total % SBE: <u>0%</u> MBE: <u>0%</u> WBE: <u>0%</u>  SBE/MBE/WBE Comply: (Y/N) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No LL 1/18/2024  SBE/MBE/WBE Comments and Initials: DIV-3 Waiver requested, full or partial not specified, they stated they are not using any subcontractors. 01/16/2024-SS Signed div-1, full waiver requested vendor states they are not using any subcontractors per they manage all in-house components, JW 1/17/2024 Diversity Goals not met. Insufficient		<input type="checkbox"/> Yes <input type="checkbox"/> No



Name and Address	Check	t (enter "N/A" if RFP or RFQ)	Review: OPD Buyer Initials	Registered	Reviewed	Review
<p>1 The MetroHealth System 2500 MetroHealth Drive Cleveland, OH 44109</p>	<p>N/A</p>	<p>Compliant: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No            IG Registration Complete: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No            IG Number: N/A            NCA: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A            PH: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A            CCBB (Form Attached) <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A            (Agree to Match) <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>CCBB <input type="checkbox"/> Yes <input type="checkbox"/> No            CCBEIP <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Subcontractor Name(s): N/A            SBE/MBE/WBE Prime: (Y/N) <input type="checkbox"/> Yes <input type="checkbox"/> SBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/> No            Total % SBE: <u>0%</u> MBE: <u>0%</u> WBE: <u>0%</u>            SBE/MBE/WBE Comply: (Y/N) <input checked="" type="checkbox"/> Yes LL 1/18/2024 <input type="checkbox"/> No            SBE/MBE/WBE Comments and Initials: Full waiver requested due to operating under Chapter 339 of the Ohio Revised Code (they do not subcontract the services contemplated in the proposal). 01/16/2024-SS Signed div-1 provided, full waiver requested see div-3 page 2, JW 1/17/2024 Political subdivision LL 1/18/2024</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	

Transaction ID:



12	Towards Employment 3301 St. Clair Avenue Cleveland, OH 44114	Bid Bond / Check	N/A	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)
				Compliant: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IG Registration Complete: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IG Number: 12-2802-REG 31DEC2024 NCA: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A PH: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A CCBB (Form Attached) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No CCBEIP <input type="checkbox"/> Yes <input type="checkbox"/> No	(FAPA) ACE Taxi Service, Inc. SBE/MBE/WBE 10%  Subcontractor Name(s):  SBE/MBE/WBE Prime: (Y/N) <input type="checkbox"/> Yes <input type="checkbox"/> SBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/> No  Total % SBE: <u>0</u> % MBE: <u>10</u> % WBE: <u>0</u> %  SBE/MBE/WBE Comply: (Y/N) <input checked="" type="checkbox"/> Yes LL 1/18/2024 <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
								SBE/MBE/WBE Comments and Initials: No DIV-3 submitted. Only one subcontractor submitted. 01/16/2024-SS Signed div-1 provided, one vendor on div-1, no waiver requested. A Cuyahoga County certified vendor can only satisfy one(1) diversity category. Ace Taxi service is certified as SBE/MBE/WBE-only one (1) category will be satisfied. No waiver		

Transaction ID:





	Bidder's / Vendors Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)

13	University Settlement 4800 Broadway Avenue Cleveland, OH 44127	N/A		Compliant: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IG Registration Complete: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IG Number: 23-0424-REG 31DEC2027 NCA: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	CCBB <input type="checkbox"/> Yes <input type="checkbox"/> No CCBEIP <input type="checkbox"/> Yes <input type="checkbox"/> No	Diversity Program Review: SBE / MBE / WBE Subcontractor Name(s): N/A SBE/MBE/WBE Prime: (Y/N) <input type="checkbox"/> Yes <input type="checkbox"/> SBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/> No Total % SBE: 0% MBE: 0% WBE: 0%	Dept. Tech. Review	Award : (Y/N) <input type="checkbox"/> Yes <input type="checkbox"/> No
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14	Bidders / Vendor's Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)
				Compliant: <input type="checkbox"/> Yes <input type="checkbox"/> No IG Registration Complete: <input type="checkbox"/> Yes <input type="checkbox"/> No IG Number: NCA: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A PH: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A CCBB (Form Attached) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Match)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No CCBEIP <input type="checkbox"/> Yes <input type="checkbox"/> No	Subcontractor Name(s):  SBE/MBE/WBE Prime: (Y/N) <input type="checkbox"/> Yes <input type="checkbox"/> SBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> No Total % SBE: _____ % MBE: _____ % WBE: _____ % SBE/MBE/WBE Comply: (Y/N) <input type="checkbox"/> Yes <input type="checkbox"/> No SBE/MBE/WBE Comments and Initials:		<input type="checkbox"/> Yes <input type="checkbox"/> No

Transaction ID:

	Bidder's Vendor Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials <input type="checkbox"/> Yes <input type="checkbox"/> No CCBEIP: (Form Attached) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Match) <input type="checkbox"/> Yes <input type="checkbox"/> No COOP: (Form Attached) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (Agree to Participate?) <input type="checkbox"/> Yes <input type="checkbox"/> No OPD Buyer Initials: _____	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)

Transaction ID:

Bidder's / Vendor's Name and Address	Bid Bond / Check	Actual Bid Amount (enter "N/A" if RFP or RFQ)	Buyer Administrative Review: OPD Buyer Initials	Price Preference	CCBB / CCBEIP Registered	Diversity Program Review: SBE / MBE / WBE	Dept. Tech. Review	Award : (Y/N)

## GOAL SETTING WORKSHEET

**Department Name:** Fatherhood Initiative  
**Contact Name:** Aldonis Grimes  
**Contact Phone#:** 216-698-2869  
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**RQ#:** 13809

**NOTE:** User Department completes the **YELLOW AREAS ONLY.**

**RQ Description:** To secure effective programming to address the needs of non-custodial and custodial fathers

Work Category/Scope	NIGP Code (5 digits)	Work/Scope Amount (\$)	Disparity Study Work/Scope Availability # (All Vendors)	Disparity Study Work/Scope Availability # (MBE)	Disparity Study Work/Scope Availability % (MBE)	Disparity Study Work/Scope Availability \$ (MBE)	Disparity Study Work/Scope Availability # (WBE)	Disparity Study Work/Scope Availability % (WBE)	Disparity Study Work/Scope Availability \$ (WBE)
Employment Agency	96130	825000.00	40	2	0.05	41250.00	3	0.08	61875.00
Educational Services	92400	825000.00	1	0	0.00	0.00	0	0.00	0.00
Education and Training Consulting	91838	825000.00	86	2	0.02	19186.05	5	0.06	47965.12
<b>Totals (\$):</b>		<b>2475000.00</b>				<b>60436.05</b>			<b>109840.12</b>

**Project Diversity Goals:** LL 12/6/23

**Comments:**  
 NIGP 92400: 0t/0m/0w no  
 96130: 43t/2m/6w 96130: 40t/2m/3w 0t/0m/0w no  
 with duplicates without duplicates duplicates  
 91838: 93t/3m/9w 91838: 86t/2m/5w  
 with duplicates without duplicates

**MBE Goal** 2%  
**WBE Goal** 4%  
**SBE Goal (not calculated)** 4%