



**Cuyahoga County Board of Control Agenda  
Monday, April 14, 2024 - 11:00 A.M.  
County Headquarters  
2079 East Ninth Street  
4<sup>th</sup> Floor, Committee Room B**

**This meeting is open to the public and may also be accessed via livestream using the following link:**

**<https://www.YouTube.com/CuyahogaCounty>**

**I – CALL TO ORDER**

**II. – REVIEW MINUTES – 4/7/2025**

**III. – PUBLIC COMMENT**

**IV. – CONTRACTS AND AWARDS**

**A. – Tabled Items**

**B. – New Items for Review**

**BC2025-251**

Department of Public Works/Division of Public Utilities,

- a) Submitting an RFP exemption, which will result in an award recommendation to 21C LLC dba Compass Energy Platform in the amount not-to-exceed \$250,000.00 for general engineering and construction management services for Cuyahoga Green Energy, the County Utility effective upon signatures of all parties for the period 1/1/2025 – 12/31/2027.
- b) Recommending an award and enter into Contract No. 5350 with 21C LLC dba Compass Energy Platform in the amount not-to-exceed \$250,000.00 for general engineering and construction management services for Cuyahoga Green Energy, the County Utility effective upon signatures of all parties for the period 1/1/2025 – 12/31/2027.

Funding Source: 90% Utility Operations, 6% Cleveland Foundation Grant and 4% George Gund Foundation Grant

**BC2025-252**

Department of Information Technology, recommending an award on Purchase Order No. 25001430 with Integrated Precision Systems in the amount not-to-exceed \$21,508.43 for a state contract purchase of various access control equipment, (1) Double magnetic door lock system with ADA-compliant exit devices

and (1) Single magnetic door lock, related accessories, installation and programming services for 1801 Superior Avenue, Cleveland.

Funding Source: Capital Project – General Fund

**BC2025-253**

Department of Information Technology,

- c) Submitting an RFP exemption, which will result in an award recommendation to Citibot, Inc. in the amount not-to-exceed \$67,600.00 for integration of an automated chatbot to interact with users on the County Treasurer's Office website, effective upon signatures of all parties for a period of 5 years.
- d) Recommending an award and enter into Contract No. 5221 with Citibot, Inc. in the amount not-to-exceed \$67,600.00 for integration of an automated chatbot to interact with users on the County Treasurer's Office website, effective upon signatures of all parties for a period of 5 years.

Funding Source: Delinquent Tax Assessment Fund

**BC2025-254**

Department of Law,

- a) Submitting an RFP exemption which will result in a final payment to Calfee, Halter & Griswold LLP in the amount not-to-exceed \$10,757.00 for representing Cuyahoga County in connection with Internal Revenue Service's audit of the County's Various Purpose Sales Tax Revenue Bonds, Series 2014 in September and October 2023 and May 2024.
- b) Recommending an award on Purchase Order No. 25001464 to Calfee, Halter & Griswold LLP in the amount not-to-exceed \$10,757.00 as final payment for representing Cuyahoga County in connection with Internal Revenue Service's audit of the County's Various Purpose Sales Tax Revenue Bonds, Series 2014 in September and October 2023 and May 2024.

Funding Source: General Fund

**BC2025-255**

Department of Internal Audit, recommending an award on Purchase Order No. 25001314 to Carahsoft Technology Corp. in the amount not-to-exceed \$22,098.00 for a joint cooperative purchase for renewal of (6) TeamMate audit software subscriptions, maintenance and support for the period 5/7/2025 - 5/6/2026.

Funding Source: General Fund

**BC2025-256**

Court of Common Pleas/Domestic Relations Court Division, submitting an amendment to Contract No. 5326 (formerly Contract No. 4157 and 2985) with Justice Innovation Inc. dba Center for Justice Innovation fka Center for Court Innovation for the period 12/1/2022 – 6/30/2025 to extend the time period to 6/30/2026; no additional funds required effective upon signatures of all parties.

Funding Source: 50% State Justice Institute Project Grant and 50% Ohio State Bar Foundation Grant

**BC2025-257**

Medical Examiner's Office,

- a) Submitting an RFP exemption, which will result in an award recommendation to Charity Blasdel in the amount not-to-exceed \$42,000.00 for pathology assistant services, effective upon signatures of all parties through 12/31/2025.
- b) Recommending an award on Contract No. 5313 to Charity Blasdel in the amount not-to-exceed \$42,000.00 for pathology assistant services, effective upon signatures of all parties through 12/31/2025.

Funding Source: Coroner Lab Fund

**BC2025-258**

Department of Public Safety and Justice Services, recommending an award and enter into Contract No. 5324 with Camp Ho Mita Koda Foundation (40-1) in the amount not-to-exceed \$24,253.00 for the Camp HOPE America Model Program, effective upon signatures of all parties through 8/1/2025.

Funding Source: Health and Human Services Levy Fund

**BC2025-259**

Department of Health and Human Services/Office of the Director, recommending an award on Purchase Order No. 25001324 with MNJ Technologies Direct, Inc. in the amount not-to-exceed \$22,824.00 for a state contract purchase of (3) HPE ProLiant Servers, each to include Advanced Pack Subscription Licenses, operational support for HPE hardware and software for a period of 5 years, (4) solid state hard drives and (1) additional processor.

Funding Source: Health and Human Services Levy Fund

**BC2025-260**

Department of Health and Human Services/Community Initiatives Division/Office of Re-entry, submitting an amendment to Contract No. 3529 with Relink for production services of a comprehensive resource guide for the period 7/10/2023 – 7/9/2025 to update Exhibit 1 Scope of Work and Budget to include Exhibit I-A which represents the budget for the additional funds added through this amendment and for additional funds in the amount not-to-exceed \$20,580.00, effective upon signatures of all parties.

Funding Source: Health and Human Services Levy Fund

**C. – Consent Agenda**

**BC2025-261**

Department of Purchasing, presenting proposed purchases for the week of 4/14/2025.

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

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
25001204	(1) Rental of bridge snooper truck with mobilization of equipment, driver and operator	Department of Public Works	Pittsburgh Rigging Company	Not-to-exceed \$18,000.00	Road & Bridge Fund
25001406	(1) 32" standing mower for various County locations	Department of Public Works	Best Truck Equipment Inc.	\$7,799.00	General Fund
25001537	Miscellaneous hardware and supplies for the Road and Bridge Division	Department of Public Works	Sutton Industrial Hardware	Not-to-exceed \$15,000.00	Road & Bridge Fund
25001428	(75) Customized ID badges with (75) badge holders	Medical Examiner's Office	Novak Supply LLC	\$5,413.50	General Fund
25001474	Various replacement gas and chemical detection sensors for MultiRae detection units for the Cuyahoga County HazMat teams	Department of Public Safety and Justice Services	Safeware, Inc.	\$17,846.88	FY23 Urban Area Security Initiative Grant (UASI)
25001476	Various replacement gas and chemical detection sensors for AreaRae detection units for the Cuyahoga County HazMat teams	Department of Public Safety and Justice Services	Safeware, Inc.	\$11,319.24	FY23 Urban Area Security Initiative Grant (UASI)

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

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
25001451	Factory Authorized – (2) Variable frequency drive parts and labor*	Department of Public Works	Direct Air Systems, Inc.	\$12,936.00	General Fund
25001423	Out-of-home care placement services for the period of 1/1/2025-2/28/2025**	Division of Children and Family Services	Michael A Mitchell dba The Anthony House	\$28,200.00	66% Health and Human Services Levy Fund and 34% Title IV-E Reimbursement Fund

\*Approval No. BC2025-13, dated 1/6/2025, which amended BC2023-452 dated 7/17/2023, which approved an alternative procurement process and exemption from aggregation on various purchase orders, which will result in various award recommendations to various Factory Authorized Dealers for vehicle and equipment repairs, parts and services for the period 11/29/2022 – 12/31/2024 by changing the total amount not-to-exceed from \$1,475,000.00 to \$1,925,000.00 and extending the time period to 12/31/2025.

\*\*Approval No. BC2024-987, dated 12/23/2024, which amended BC2024-77 dated 1/29/2024, which amended multiple prior approved alternate procurement processes resulting in purchase orders to various licensed providers for reimbursement for out of home care placement services for the period 12/1/2022 – 12/31/2024 in the amount not-to- exceed \$1,000,000.00 by extending the time period to 12/ 31/ 2025 and by changing the amount not-to-exceed from \$1,000,000.00 to \$1,500,000.00.

## V- OTHER BUSINESS

### Item of Note (non-voted)

#### Item No. 1

Department of Public Works, submitting a Subaward Agreement from Ohio Lake Erie Commission to establish the duties and obligations for the completion of the Euclid Beach Connector Project in connection with the Lakefront Public Access plan in the amount of \$154,000.00 effective upon signatures of all parties through 6/30/2026.

Funding Source: Ohio EPA Lake Erie Management Assistance Grant

#### Item No. 2

### Contracts \$0.00 – \$10,000.00 – Processed and executed (no vote required)

RQ No.	Contract Number	Vendor	Service Description	Amount	Department	Date(s) of Service	Funding Source	Date of Execution
RQ No. 13600	4770	Leonardo US Cyber and Security Solutions, LLC	For the fixed Automated License Plate Reader Expansion Project for the purchase and installation of (9) new cameras at various intersections in Cuyahoga County and maintenance services and software warranty support	\$0.00	Department of Public Safety and Justice Services	9/30/2024 – 11/30/2027 to <b>extend the term for completion of all installation and implementation by April 30, 2025 and to extend the warranty period for 3 years after completion of the installation and implementation until 4/30/2028</b>	(Original) FY2022 Urban Area Security Initiative	(Executive) 4/2/2025 (Law) 4/3/2025

NA	4605	Brink's U.S., A Division of Brink's Incorporated	Armed guard and armored truck services for various County Departments <b>to revise the scope of services to reflect a change in service locations and times by removing Amendment Exhibit A in its entirety and replacing it with Amendment 2 Exhibit A</b>	\$0.00	Department of Purchasing	7/1/2024-6/30/2025	(original) 56% General Fund and 44% Other Health and Safety Fund	(Executive) 4/4/2025 (Law) 4/4/2025
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**Various Agreements – Processed and executed (no vote required)**

Approving Resolution	Public convenience and welfare project description	Total Estimated Project Cost	Total Actual Project Cost	Funding Source	Date of Execution
R2023-0321	Reconstruction of the Lake Road – Clifton Boulevard Project in the Cities of Lakewood and Rocky River in connection with the Cuyahoga County Lakefront Access Plan – Council Districts 1 and 2	\$9,500,000.00	\$10,941,271.00	25% County Motor Vehicle License Tax Funds 13% City of Lakewood 4% City of Rocky River 58% Northeast Ohio Areawide Coordinating Agency (NOACA)	(Executive) 4/9/2025

**VI – PUBLIC COMMENT**

**VII – ADJOURNMENT**

## Minutes

Cuyahoga County Board of Control  
Monday, April 7, 2025 - 11:00 A.M.  
County Headquarters  
2079 East Ninth Street  
Committee Room B

### **I – CALL TO ORDER**

The meeting was called to order at 11:00 a.m.

#### Attending:

Katherine A. Gallagher, Chief of Operations & Community Innovation County Executive Administration  
(Alternate for Chris Ronayne, County Executive)  
Michael Chambers, Fiscal Officer, serving as Chairman  
Michael Dever, Director Department of Public Works  
Paul Porter, Director, Department of Purchasing  
Councilmember Robert Schleper  
Joseph Nanni, County Council (Alternate for Michael Houser)  
Trevor McAleer, County Council (Alternate for Meredith Turner)

### **II. – REVIEW MINUTES – 3/31/2025**

Michael Chambers motioned to approve the minutes from the March 31, 2025, meeting; Robert Schleper seconded. The minutes were approved by unanimous vote, as written.

### **III. – PUBLIC COMMENT**

There was no public comment.

### **IV. – CONTRACTS AND AWARDS**

#### **A. – Tabled Items**

#### **B. – New Items for Review**

##### **BC2025-233**

Department of Public Works, submitting an amendment to Contract No. 3974 with CFM, Inc. for sprinkler system maintenance services at various County buildings for the period 1/1/2024 – 12/31/2025, for additional funds in the amount not-to-exceed \$20,000.00, effective upon signatures of all parties.

Funding Source: General Fund

Tom Pavich, Department of Public Works, presented. There were no questions. Michael Chambers motioned to approve the item; Trevor McAleer seconded. Item BC2025-233 was approved by unanimous vote.

**BC2025-234**

Department of Public Works, submitting an amendment to Contract No. 4372 with Anthony Allega Cement Contractor, Inc. for rehabilitation of Garfield Boulevard from Warner Road to Turney Road in the City of Garfield Heights for additional funds in the amount not-to-exceed \$238,486.36.

Funding Source: 40% Ohio Public Works Commission, 12% City of Garfield Heights, 48% County Motor Vehicle \$7.50 License Tax Funds.

Eric Mack, Department of Public Works, presented. There were no questions. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2025-234 was approved by unanimous vote.

**BC2025-235**

Department of Public Works, submitting an amendment to Contract No. 4751 (fka Contract No. 3392) nka Contract No. 4777 for organic lawn care and weed control services for the period 8/16/2023 – 12/31/2024 to extend the time period to 12/31/2025 with Weed Pro, Ltd. for an assignment and assumption of services to Lawn Squad Holdco, Inc. effective upon signatures of all parties, and for additional funds in the amount not-to-exceed \$49,000.00.

Funding Source: General Fund

Thomas Pavich, Department of Public Works, presented. There were no questions. Michael Chambers motioned to approve the item; Joseph Nanni seconded. Item BC2025-235 was approved by unanimous vote.

**BC2025-236**

Department of Information Technology,

- a) Submitting an RFP exemption, which will result in an award recommendation to Advizex Technologies LLC in the amount not-to-exceed \$90,885.81 for the purchase of HPE Synergy Hardware, various accessories, and support.
- b) Recommending an award on Purchase Order No. 25000626 to Advizex Technologies LLC in the amount not-to-exceed \$90,885.81 for the purchase of HPE Synergy Hardware, various accessories, and support.

Funding Source: Real Estate Assessment Fund

Brianna Witt, Department of Information Technology, presented. Michael Chambers asked you checked with law on that; presenter replied yes. Michael Chambers said he has a little bit of a problem with that one, said he also noticed the accounting unit on this one is general fund and not the real estate assessment one; presenter replied we can double check that, it should be IT305100; Michael Chambers replied double check that because I still have an issue if its going to be used for HHS those REA dollars can only be used for REA so if we buy it they can certainly pay something towards it but we can't supplant that to them so I think we need to look at that a little bit further. Michael Chambers asked if we can just approve it pending the correct code; Paul Porter replied yes, as long as the funding source is correct on there we can adjust the accounting unit in the system without having to hold it for approval;



Michael Chambers replied okay, but I do want to get that opinion again or else well bring it back, I want to look at that. Paul Porter replied it sounded like the opinion was we can make the purchase with the real estate assessment fund dollars and it was a question of if there's extra space that we can add a blade to later could we do that for HHS but this initial purchase is all real estate assessment fund; presenter replied that's correct, for the chassis there will be additional space that will be unused; Michael Chambers asked so at that time they can add a HHS blade; presenter replied yes, and if GIS needs the space then we will have to find another location for the HHS. Michael Chambers motioned to approve the item; Trevor McAleer seconded. Item BC2025-236 was approved by unanimous vote.

#### **BC2025-237**

Department of Information Technology,

- e) Submitting an RFP exemption, which will result in an award recommendation to Nearmap US, Inc. in the amount not-to-exceed \$182,292.19 for a joint cooperative purchase of Nearmap Ortho, Oblique Imagery and GIS Integration subscription services, effective upon signatures of all parties for a period of 1 year.
- f) Recommending an award on Purchase Order No. 25000965 to Nearmap US, Inc. in the amount not-to-exceed \$182,292.19 for a joint cooperative purchase of Nearmap Ortho, Oblique Imagery and GIS Integration subscription services, effective upon signatures of all parties for a period of 1 year.

Funding Source: Real Estate Assessment Fund

Brianna Witt, Department of Information Technology, presented. There were no questions. Michael Chambers motioned to approve the item; Michael Dever seconded. Item BC2025-237 was approved by unanimous vote.

#### **BC2025-238**

Department of Information Technology, recommending an award on RQ14169 and enter into Contract No. 5213 with Ooma Inc. (17-5) in the amount not-to-exceed \$100,000.00 for migration of analog telephones to cellular services, hardware, data, phone service, and support for a period of 2 years, effective upon signatures of all parties.

Funding Source: General Fund

Brianna Witt, Department of Information Technology, presented. There were no questions. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2025-238 was approved by unanimous vote.

#### **BC2025-239**

Court of Common Pleas/Juvenile Court Division, submitting amendments to agreements with various municipalities for Community Diversion Program services for the period 1/1/2024 – 12/31/2024 to extend the time period to 12/31/2026 to replace the insurance requirements effective 1/1/2025, and for additional funds in the total amount not-to-exceed \$10,200.00.

- a) Agreement No. 4377 with City of Brecksville in the amount not-to-exceed \$6,000.00.

b) Agreement No. 4472 with City of Maple Heights in the amount not-to-exceed \$4,200.00.

Funding Source: Health and Human Services Levy Fund

Jennifer Howard, Court of Common Pleas/Juvenile Court Division, presented. There were no questions. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2025-239 was approved by unanimous vote.

**BC2025-240**

Court of Common Pleas/Juvenile Court Division, submitting an amendment to Contract No. 4306 (fka Contract No. 4151) with Change the Narrative, LLC for positive youth development services for Court referred male youth ages 12 to 18 with high risk for recidivism for the period 7/1/2023 – 6/30/2024 to extend the time period to 6/30/2026, to change the insurance requirements, effective 7/1/2024 and for additional funds in the amount not-to-exceed \$19,932.90.

Funding Source: RECLAIM Grant

Jennifer Howard, Court of Common Pleas/Juvenile Court Division, presented. Robert Schleper asked when we talk about the change in insurance requirements, can you shed a little bit of light on that. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2025-240 was approved by unanimous vote.

**BC2025-241**

Sheriff's Department,

a) Submitting an RFP exemption, which will result in an award recommendation to FDL Marine, Inc. dba Edgewater Marina in the amount not-to-exceed \$22,550.25 for the purchase of fuel for marine patrol boat operations in connection with the Operation Stonegarden Grant Program, for the period 4/21/2025 – 12/31/2025.

b) Recommending an award on Purchase Order No. 25001348 to FDL Marine, Inc. dba Edgewater Marina in the amount not-to-exceed \$22,550.25 for the purchase of fuel for marine patrol boat operations in connection with the Operation Stonegarden Grant Program, for the period 4/21/2025 – 12/31/2025.

Funding Source: Operation Stonegarden Grants - 32% FY2021, 9% FY2022 and 59% FY2023

Chris Costin, Sheriff's Department, presented. Michael Chambers asked, does the grant cover their time too or is it just for the fuel; asked but this is strictly for fuel. Michael Chambers motioned to approve the item; Trevor McAleer seconded. Item BC2025-241 was approved by unanimous vote.

**BC2025-242**

Medical Examiner's Office,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Promega Corporation in the amount not-to-exceed \$366,068.60 for the purchase of (1) Spectrum CE System and (2) Maxwell RSC 48 Systems, system software, instrumentation and accessory packages, installation services, end-user training, maintenance and support services for a period of 2 years, effective upon signatures of all parties.
- b) Recommending an award and enter into Contract No. 5244 with Promega Corporation in the amount not-to-exceed \$366,068.60 for the purchase of (1) Spectrum CE System and (2) Maxwell RSC 48 Systems, system software, instrumentation and accessory packages, installation services, end-user training, maintenance and support services for a period of 2 years, effective upon signatures of all parties.

Funding Source: FY2023 Competitive DNA Capacity Enhancement for Backlog Reduction Grant

Hugh Shannon, Medical Examiner's Office, presented. There were no questions. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2025-242 was approved by unanimous vote.

#### **BC2025-243**

Department of Health and Human Services/Division of Children and Family Services,

- a) Submitting an RFP exemption, which will result in a payment to Bluestone Child and Adolescent Psychiatric Hospital in the amount not-to-exceed \$32,300.00 as final payment for April 2024 for psychiatric hospital services for children rendered under Contract No. 3606 during the contract term of 6/19/2023 – 6/18/2024.
- b) Recommending a payment on Purchase Order No. 25000707 to Bluestone Child and Adolescent Psychiatric Hospital in the amount not-to-exceed \$32,300.00 as final payment for April 2024 for psychiatric hospital services for children rendered under Contract No. 3606 during the contract term of 6/19/2023 – 6/18/2024.

Funding Source: 66% Health and Human Services Levy Fund, 34% Title IV-E reimbursement

Marcos Cortes, Department of Health and Human Services, presented. There were no questions. Michael Chambers motioned to approve the item; Michael Dever seconded. Item BC2025-243 was approved by unanimous vote.

#### **BC2025-244**

Department of Health and Human Services/Division of Children and Family Services,

- a) Submitting an RFP Exemption, which will result in an award recommendation to The Centers for Families and Children in the amount not-to-exceed \$200,000.00 to support the salary of the Cleveland Christian Home's Executive Director in connection with the launch of the Cuyahoga County Child Wellness Campus for the period 1/1/2025 – 12/31/2025.

- b) Recommending an award and enter into Contract No. 5247 with The Centers for Families and Children in the amount not-to-exceed \$200,000.00 to support the salary of the Cleveland Christian Home's Executive Director in connection with the launch of the Cuyahoga County Child Wellness Campus for the period 1/1/2025 – 12/31/2025.

Funding Source: Mt. Sinai Health Foundation

Marcos Cortes, Department of Health and Human Services, presented. Joseph Nanni asked the follow up answers to the questions that the 2-year grant award is contingent upon successful implementation of year one objectives do you have those so you can share, presenter replied its part of the proposal he can send them over. Michael Chambers motioned to approve the item as amended; Michael Dever seconded. Item BC2025-244 was approved by unanimous vote, as amended.

#### **BC2025-245**

Department of Health and Human Services/Community Initiatives Division/Family and Children First Council, submitting an amendment to Contract No. 4119 with The Literacy Cooperative for enrollment, supportive and analytic services for the Dolly Parton Imagination Library Program for the period 3/1/2024 – 2/28/2025 to extend the time period to 2/28/2026, to modify the services provided under the Statement of Work in accordance with Exhibit I-A, to add Exhibit II-A representing the budget for the amendment term, to replace the insurance requirements, effective 3/1/2025, and for additional funds in the amount not-to-exceed \$100,000.00.

Funding Source: Health and Human Services Levy Fund

Kathleen Stewart, Family and Children First Council, presented. There were no questions. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2025-245 was approved by unanimous vote.

#### **BC2025-246**

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

- a) Submitting an RFP Exemption, which will result in an award recommendation to Family Connections of Northeast Ohio in the amount not-to-exceed \$65,000.00 to administer a Community Engagement Project at the Greater Cleveland Food Bank's Community Resource Center effective upon signatures of all parties through 12/31/2025.
- b) Recommending an award and enter into Contract No. 5210 with Family Connections of Northeast Ohio in the amount not-to-exceed \$65,000.00 to administer a Community Engagement Project at the Greater Cleveland Food Bank's Community Resource Center effective upon signatures of all parties through 12/31/2025.

Funding Source: Health and Human Services Levy Fund

Marcos Cortes, Department of Health and Human Services, presented. There were no questions. Michael Chambers motioned to approve the item; Trevor McAleer seconded. Item BC2025-246 was approved by unanimous vote.

**BC2025-247**

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, submitting an amendment to a Grant Agreement with Emerald Development and Economic Network, Inc. (via Contract No. 4981) to provide funding to support the operation and administration of the temporary, emergency shelter for women located at 2710 Walton Avenue, Cleveland, for the period 4/1/2024 – 3/31/2025 to extend the time period to 3/31/2026, to add Exhibit A-1 Budget which represents the additional costs being added by this Amendment, effective 4/1/2025 and for additional funds in the amount not-to-exceed \$458,585.00.

Funding Source: Health and Human Services Levy Fund

Marcos Cortes, Department of Health and Human Services, presented. There were no questions. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2025-247 was approved by unanimous vote.

**BC2025-248**

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, submitting an amendment to Contract No. 5184 (fka Contract No. 3178) with Family Promise of Greater Cleveland for emergency shelter services for families in connection with the Continuum of Care program for the period 9/1/2022 – 8/31/2024 to extend the time period to 8/31/2025 to add Exhibit II-B which represents the budget for the term of this amendment, effective 9/1/2024, and for additional funds in the amount not-to-exceed \$68,800.00.

Funding Source: U. S. Department of Housing and Urban Development - Emergency Solutions Grant

Marcos Cortes, Department of Health and Human Services, presented. There were no questions. Michael Chambers motioned to approve the item; Paul Porter seconded. Item BC2025-248 was approved by unanimous vote.

**C. – Consent Agenda**

There were no questions or comments on the Consent Agenda items. Michael Chambers motioned to approve Consent Agenda Item No. BC2025-249 through BC2025-250; Joseph Nanni seconded. The Consent Agenda Items were approved by unanimous vote.

**BC2025-249**

Fiscal Department, presenting proposed travel/membership requests for the week of 4/7/2025:

Department	Organization	Membership Dues	Dates of Membership	Funding Source
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County Executive's Office	County Commissioner's Association of Ohio (CCAO)	\$16,549.00	1/1/25 – 12/31/25	General Fund
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**Purpose of Membership:**

The County Commissioner's Association of Ohio (CCAO) works to bring the most innovative ideas and efficiencies to local government by providing county commissioners and their staff with the necessary tools to achieve greater economic recovery for each of Ohio's 88 counties. In addition, it serves as a central organization for information and research, for collection, analysis and dissemination of data relating to county governments and to promote sound policies and programs across the state.

Dept:	Department of Health and Human Services/Cuyahoga Job and Family Services							
Event:	Welcoming Interactive							
Source:	Welcoming America							
Location:	Detroit, MI							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Tina Coleman	5/20/2025 – 5/22/2025	\$450.00	\$63.00	\$646.30	\$320.40	\$0.00	\$1,479.70	50% Health and Human Services Levy 50% State and Federal Reimbursement

\*Paid to host

\*\*Staff reimbursement

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

**Purpose:**

The Welcoming Interactive is an annual conference that highlights successful practices and inspiring stories about immigrant inclusion, programs, policies, and partnerships. From economic development to civic engagement, government leadership, and beyond, the conference features presentations and interactive sessions from a diverse range of inclusion experts. Attendees learn about local innovations from peer communities and come away with new ideas and energy to foster welcoming places for all. Cuyahoga County is currently going through the certification process of becoming a Welcoming Community for immigrants and refugees and this conference will assist with the development of strategies by learning national best practices.

**BC2025-250**

Department of Purchasing, presenting proposed purchases for the week of 4/7/2025:

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

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
25001352	Food and refreshments for Scam Squad conference attendees	Department of Consumer Affairs	Aramark Services, Inc. aka Aramark Corporation	\$1,903.66	General Fund-American Rescue Plan Act Revenue Replacement (ARPA)/Provision of Government Services
25001354	(6) Canister Extractors	Department of Public Works	W.W. Grainger, Inc dba Grainger	38,310.00	General Fund

Items/Services Received and Invoiced but not Paid:

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
25001374	Automotive Repair – Mechanical, body and paint repairs on 2015 Explorer*	Department of Public Works	Premier Auto Body & Collision Center, LLC	\$6,434.70	General Fund

\*Approval No. BC2023-513, dated 8/14/2023, which approved an alternative procurement process and exemption from aggregation on various purchase orders, which will result in various award recommendations to various vendors in the amount not-to-exceed \$125,000.00 for the purchase of various automotive repairs services in connection with vehicles involved in an accident for the Fleet Division on an as-needed basis for the period 8/14/2023 – 8/15/2025.

**V- OTHER BUSINESS**

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

**Item No. 1**

Department of Public Works, submitting an amendment to Contract No. 1646 with Tri Mor Corporation for reconstruction and widening of Sprague Road from West 130<sup>th</sup> Street to York Road in the Cities of Parma and North Royalton for a decrease in the amount of (\$667,615.11).

Funding Source: 47% Ohio Public Works Commission, 26.5% County Motor Vehicle \$7.50 License Tax Funds and 26.5% Municipalities.

**Item No. 2**

Department of Public Works, submitting an amendment to Contract No. 2779 with Perk Company, Inc. for resurfacing of South Green Road from Cedar Road to Mayfield Road in the City of South Euclid in connection with the 2021-2024 Transportation Improvement Program for a decrease in the amount of (\$79,601.63); recommending to accept construction as complete and in accordance with plans and specifications; requesting authority for the County Treasurer to release the escrow account, in accordance with Ohio Revised Code Section 153.63.

Funding Source: 76% Federal Funds; 12% \$5.00 Motor Vehicle License Tax Fund and 12% from the City of South Euclid;

**Item No. 3**

Department of Public Safety and Justice Services on behalf of the Local Emergency Planning Committee, requesting authority to apply for grant funds to the Ohio State Emergency Response Commission in the amount of \$182,936.02 for the Chemical Emergency Planning and Community Right-to-Know Fund in Connection with the Ohio Environmental Protection Agency Right-to-Know Program for the period 7/1/2025 – 6/30/2026.

Funding Source: Ohio State Emergency Response Commission

**Item No. 4**

Department of Health and Human Services/Division of Senior and Adult Services, submitting a grant agreement with Western Reserve Area Agency on Aging in the amount of \$26,095.45 for the Medicare Improvements for Patients and Providers Act (MIPPA) Medicare Savings Programs, Low-income Subsidy and Prescription Drug Assistance through the Aging Network, State Health Insurance Program (SHIP) and Aging and Disability Resource Centers for the period 9/1/2024 – 8/31/2025.

Funding Source: Western Reserve Area Agency on Aging through the Federal Medicare Improvements for Patients and Providers Act (MIPPA)

**Item No. 5**

**Contracts \$0.00 – \$4,999.99 – Processed and executed (no vote required)**

RQ No.	Contract Number	Vendor	Service Description	Amount	Department	Date(s) of Service	Funding Source	Date of Execution
NA	4451	MNJ Technologies Direct, Inc.	to provide professional services to augment staff with mission critical platforms, voice related infrastructure and related	\$0.00	Department of Information Technology	5/29/2024-5/28/2025 to extend the time period to 5/28/2027	(Original) General Fund	(Executive) 4/2/2025 (Law) 4/1/2025



			software in connection with the County's Wide Area and Local Area Networks to replace insurance requirements; no additional funds required					
NA	Amend Master Contract – Assign Contract No. 5187	Various providers	Adoption Services; to add The Barker Adoption Foundation, Inc.; no additional funds required	\$0.00	Department of Health and Human Services/ Division of Children and Family Services	1/1/2025-12/31/2026	(Original) State Child Protection Allocation	(Executive) 4/1/2025 (Law) 4/2/2025
NA	Amend Master Contract – Assign Contract No. 5188	Various providers	Adoption Services; to add Bethany Christian Services of Maryland, dba Bethany Christian Services	\$0.00	Department of Health and Human Services/ Division of Children and Family Services	1/1/2025-12/31/2026	(Original) State Child Protection Allocation	(Executive) 4/1/2025 (Law) 4/2/2025

**Various Agreements – Processed and executed (no vote required)**

Approving Resolution	Public convenience and welfare project description	Total Estimated Project Cost	Total Actual Project Cost	Funding Source	Date of Execution
R2024-0333	Resurfacing of Bradley Road from 80 feet north of Carlton Drive to Lake Road in the City of Bay Village- Council District 1	\$607,100.00		\$250,000 County Road and Bridge Funds \$357,100 City of Bay Village	(Executive) 3/31/2025

**VI – PUBLIC COMMENT**

There was no public comment.

**VII – ADJOURNMENT**

Michael Chambers motioned to adjourn; Michael Dever seconded. The motion to adjourn was unanimously approved at 11:24 am.

**Item Details as Submitted by Requesting Departments**

**IV. Contracts and Awards**

**A. – Tabled Items**

**B. – New Items for Review**

**BC2025-251**

Title	Utility general engineering and construction management services
Department or Agency Name	Department of Public Works/Division of Public Utilities
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
O	5350	Compass Energy Platform	1/1/2025 – 12/31/2027	\$250,000.00	Pending	Pending

Service/Item Description (include quantity if applicable). The Department of Public Works plans to contract with 21C LLC d/b/a Compass Energy Platform, from the effective date of January 1, 2025, through December 31, 2027, for general engineering and construction management services in connection with various projects of Cuyahoga Green Energy, the County Utility, in the amount of \$250,000.00. Services will be authorized on a task order basis as projects and funding arises.
Indicate whether: <input checked="" type="checkbox"/> New service/purchase <input type="checkbox"/> Existing service/purchase <input type="checkbox"/> Replacement for an existing service/purchase (provide details in Service/Item Description section above)
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of? _____
Project Goals, Outcomes or Purpose (list 3): The goal of this contract is to have technical services readily available to commence or advance Cuyahoga Green Energy projects. Engineering services are utilized at the beginning of a project to determine its feasibility and design. Construction management services are needed to ensure a project is constructed in line with Cuyahoga County's specifications and priorities.

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
Compass Energy Platform 4000 Division St. Los Angeles, CA 90065	Rick Bolton, Chief Executive Officer

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

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process.  Compass Energy Platform was contracted for a 10-year period to serve as the operator of Cuyahoga Green Energy, the county utility, pursuant to a competitive Request for Qualifications (RQ#11017/EVENT #3632) process. Section 5 of this operator agreement provides Compass with the exclusive right to be Cuyahoga County's utility manager and provide the services outlined in this requested contract.  *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received)    /	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): (    ) DBE (    ) SBE (    ) MBE (    ) WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.  If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	<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: _____	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment - (list original procurement) <input type="checkbox"/> Other Procurement Method, please describe: _____

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

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

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

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

90% Utility Operations Fund

6% Cleveland Foundation Grant

4% George Gund Foundation Grant

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

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

PW720100 - \$225,000.00

PW720200 - \$25,000.00

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

Provide status of project.

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

Reason: The form and function of the contract changed. Originally, the contract was going to be engineering services for one specific project. It has now been expanded into a task-based contract to allow Cuyahoga Green Energy flexibility and efficiency in advancing future projects. The last-minute change resulted in the composition and negotiation of a new contract.

Timeline

Project/Procurement Start Date (date your team started working on this item):	12/19/2024
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Date documents were requested from vendor:	3/27/2025 – Only needed independent contractor form; previous version expired.
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Date of insurance approval from risk manager:	4/2/2025
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Date Department of Law approved Contract:	4/3/2025
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Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: N/A

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

Compass Energy Platform has billed for services beginning in January 2025.

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

HISTORY (see instructions):

**BC2025-252**

Title	Additional Security Equipment for 1801 Superior Avenue	
Department or Agency Name	Department of Information Technology	
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):	

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
	25001430 STAC	Integrated Precision Systems, Inc.		\$21,508.43	PENDING	PENDING

<p>Service/Item Description (include quantity if applicable).</p> <p>The Department of Information Technology plans to contract with Integrated Precision Systems, Inc., for Additional Security Equipment for 1801 Superior Avenue in the amount of \$21,508.43.</p>
<p>Indicate whether: <input checked="" type="checkbox"/> New service/purchase <input type="checkbox"/> Existing service/purchase <input type="checkbox"/> Replacement for an existing service/purchase (provide details in Service/Item Description section above)</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p> <p>Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p> <p>This request is for the procurement, installation, and programming of various additional security equipment for the 1801 Superior Avenue Building. This includes access control equipment, surveillance camera mounts, door locking hardware, and other related equipment. This equipment is in addition to previously purchased equipment for this site.</p>

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
Integrated Precision Systems 8555 Sweet Valley Drive, Suite B Valley View, OH 44125	Rob Jackson Account Representative
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. A competitive process was completed through the State of Ohio with an award being made to Integrated Precision Systems. All State of Ohio state term contracts go through a competitive process with the vendors being vetted and the proposals reviewed prior to award. IPS is able to provide Cuyahoga County with Ohio State Term Schedule pricing under STS contract #010018, which expires January 31, 2026. *See Justification for additional information.
The total value of the solicitation: _____	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) _____ / _____	<input checked="" type="checkbox"/> State Contract, list STS number and expiration date 010018 expires 01/31/2026 <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date _____
Participation/Goals (%): ( <input type="checkbox"/> ) DBE ( <input type="checkbox"/> ) SBE ( <input type="checkbox"/> ) MBE ( <input type="checkbox"/> ) WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.  If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	<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: _____	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment - (list original procurement) <input type="checkbox"/> Other Procurement Method, please describe: _____

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

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed.  100% Capital Projects
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if “no” please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit.  PW600120
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

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

HISTORY (see instructions):
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### BC2025-253

Title	CM5221-2025- Contract agreement with Citibot, INC for Chatbot Services on behalf of the Treasury Department
Department or Agency Name	The Department of Information Technology
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
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O	CM5221	CITIBOT Inc	Effective Date- 5 Years from Effective Date	\$67,600.00	PENDING	PENDING
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Service/Item Description (include quantity if applicable).

The Cuyahoga County Department of Information Technology, on behalf of the Treasury Department intends to enter into a five-year contract with CITIBOT, Inc. for services totaling \$67,600.00.

Scope of Agreement: During the Term of this Contract, CITIBOT will provide a dynamic and responsive chatbot engine to integrate into the County's website to provide prompt and efficient automated assistance to users and to the County.

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

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

Project Goals, Outcomes or Purpose (list 3):

To enter into a Five- Year contract with CITIBOT, Inc for Chatbot Services on behalf of Treasury Department.

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

Vendor Name and address:	Owner, executive director, other (specify):
CITIBOT, Inc 551 Regimental Lane, Charleston, SC 29455	Bratton Riley CEO
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _14640_____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. The selected procurement method is supported by a competitive bidding process conducted by formal RFP 14640/ Event5630. During RFP process, the procurement was bid out to vendors, resulting in quotes from 14 responding Vendors.  We have opted to proceed with the exemption, as the selected vendor was initially non-compliant during the Purchasing review of the RFP due to the absence of a



	<p>Non-Collusion Affidavit form, which is now attached to the contract files.</p> <p>*See Justification for additional information.</p>
The total value of the solicitation: \$67,600	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) 614 / 14	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
<p>Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, please explain.</p> <p>Citibot is providing off the shelf, out of box solution which is plug and play system that does not have any participation requirements.</p> <p>Approved by DEI on 6.26.2024</p> <p>Vendor presented Good Faith Effort Certification on 11.22.2024</p> <p>If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?</p> <p>Approved by DEI on 6.26.2024</p> <p>Vendor presented Good Faith Effort Certification on 11.22.2024</p>	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
<p>How did pricing compare among bids received?</p> <p>1. Citibot Total: \$67,600 (including annual cost range of \$9,250-\$15,000)</p> <p>2. TIXS Total: \$75,000 (including \$3,500 implementation, \$10,000/year license, additional charges for web scanning, messages, and SMS)</p> <p>3. Chatsimple Total: \$79,000 (including \$15k customization fee, \$64k/year SaaS fee)</p> <p>4. GrayMatrix Total: \$84,000 (including \$36k implementation, \$12k/year after the first year for service, \$30/hr for customization, additional charges for messages)</p> <p>5. TotalCommunications Total: \$289,000 (including \$9,800 implementation, \$23k/year software licenses, \$3k/year maintenance)</p> <p>6. HumanAllabs Total: \$550,000 (including \$250k system fee, \$125k implementation, \$35k annual maintenance)</p>	<input type="checkbox"/> Contract Amendment - (list original procurement)  <input type="checkbox"/> Other Procurement Method, please describe:

7. CogAbility Total: \$486,000 for a 5-year term (including \$90k-\$104k/year) 8. Brown Enterprise Solutions Total: \$703,000 9. NICE Total: \$755,000 (including \$277k implementation, \$478k annual fee) 10. IvyAI Total: \$103,000 (including \$15k implementation, \$88k/year fee) 11. Connex Total: \$1.14M (including \$480k implementation charge, \$130k annual maintenance/support) 12. 22ndCentrury Total: \$1.13M (including \$460k for system, \$460k for implementation, \$207k annual cost) 13. Maximus Total: \$1.1M projected (including \$186k implementation, \$185-208k annually) 14. Novaluna \$2.85/Call.	
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Is Purchase/Services technology related <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval: TAC approval
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed.  100% DTAC (Delinquent Tax Assessment Fund)
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit.  FS251500
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
Is contract/purchase late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission	
Reason:	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	

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

HISTORY (see instructions):
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#### BC2025-254

Title	Legal Services for IRS Audit of Various Purpose Sales Tax Revenue Bonds, Series 2014
Department or Agency Name	Fiscal Department on behalf of the Law Department
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
O	25001464	Calfee Halter & Griswold LLP	N/A	\$10,757.00	Pending	Pending

<p>Service/Item Description (include quantity if applicable).</p> <p>In 2023 Cuyahoga County retained Calfee Halter &amp; Griswold LLP for legal services that included providing consultation, reviewing, assembling, and delivering financial documentation, preparing responsive documentation to the IRS as well as communicating with the IRS on matters relating to the IRS audit of Various Purpose Sales Tax Revenue Bonds Series 2014. The initial not to exceed amount was \$17,500, however since that time, it was determined additional legal services were necessary in the amount of \$10,414.50. This purchase order is to pay the outstanding invoices totaling \$10,757.00. There was \$342.50 left on the initial agreement plus the additional amount of \$10,414.50 totals \$10,757.00.</p>
<p>Indicate whether: <input type="checkbox"/> New service/purchase <input checked="" type="checkbox"/> Existing service/purchase <input type="checkbox"/> Replacement for an existing service/purchase (provide details in Service/Item Description section above)</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p> <p>Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p> <p>Consultation, reviewing, assembling, and delivering financial documentation.</p> <p>Preparing responsive documentation to the IRS.</p> <p>Communication with the IRS</p>

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
Calfee, Halter & Griswold LLP 1405 E. 6 <sup>th</sup> St. Cleveland, OH 44114	Blake Beachler Leader, Public Finance Practice
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process.  During the IRS audit it was determined additional services were required. Additionally, Calfee Halter & Griswold LLP served as bond counsel for the bond being audited.  *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.  If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	<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:	<input type="checkbox"/> Government Purchase  <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment - (list original procurement)

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

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed.  100 % General Fund
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if “no” please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit.  LW100100
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
Is contract/purchase late <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission	
Reason: The Law Department had to work with the Prosecutor’s Office to resolve the outstanding invoices and get a judgement entry to pay the outstanding balances.	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	03/28/2025
Date documents were requested from vendor:	N/A
Date of insurance approval from risk manager:	N/A
Date Department of Law approved Contract:	Law approved use of PO on 03/28/2025
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: The Law Department had to work with both the Prosecutor and Court for approval of the invoices. The approval was filed with the court on 03/14/2025 and Law approved the use of a Purchase Order to pay for the services on 03/28/2025.	
If late, have services begun? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (if yes, please explain) IRS audit required additional services	
Have payments been made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):						
Prior Original (O) and subsequent Amendments (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
O	3247	Calfee Halter & Griswold LLP	02/09/2023 – 12/31/2023	\$17,500	04/10/2023	BC2023-207

### BC2025-255

Title	PO 25001314 TeamMate Plus – Audit Management Software 05/07/2025 – 05/06/2026 \$22,098.00
Department or Agency Name	Department of Internal Auditing
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
O	25001314	Carahsoft Technology Group	05/07/2025 – 05/06/2026	\$22,098.00	TBD	TBD

Service/Item Description (include quantity if applicable). Audit management software to allow for effective and efficient management of the audit workflow.
Indicate whether: <input type="checkbox"/> New service/purchase <input checked="" type="checkbox"/> Existing service/purchase <input type="checkbox"/> Replacement for an existing service/purchase (provide details in Service/Item Description section above)
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of? _____
Project Goals, Outcomes or Purpose (list 3): Efficiently document compliance with IIA standards throughout the audit workflow including: Risk Assessment Audit Planning Work Paper Management Remediation Tracking Key Performance Indicators

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
Carahsoft Technology Corp 11493 Sunset Hills Rd, Suite 100 Reston, Virginia 20190	Jazmine Fitts, Senior Account Manager
Vendor Council District:	Project Council District:
N/A	N/A
If applicable provide the full address or list the municipality(ies) impacted by the project.	N/A

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process.  *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date  <input checked="" type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date GSA Schedule: 47QSWA18D008F Special Item #: 54151ECOM Exp: 08/21/2028
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.  If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	<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:	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment - (list original procurement) <input type="checkbox"/> Other Procurement Method, please describe:

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

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed.  100% General Fund
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit.  IA100100
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
Is contract/purchase late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission	
Reason:	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	February 2025
Date documents were requested from vendor:	February 2025
Date of insurance approval from risk manager:	March 9, 2025
Date Department of Law approved Contract:	N/A - PO
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: DoP Joint Co-Op instructions suggest an RQ is needed; however, DoP advised it is not.	
If late, have services begun? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments been made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

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



O	24001831	Carahshoft Technology Group	05/07/24 – 05/06/25	\$22,156.08	5/20/24	BC2024-375
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## BC2025-256

Title	Domestic Relations Court - 2022 Justice Innovation, Inc., doing business as The Center for Justice Innovation, Agreement for Services Parenting After Violence (PAVE) Program Curriculum Development Project – Amendment #
Department or Agency Name	Domestic Relations Court
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
0	#2985	Center for Justice Innovation	12/01/2022-08/31/2024	\$200,000	02/13/2023	BC2023-84
A-#1	#4157 (closed #2985)	Center for Justice Innovation	12/01/2022-06/30/2025	\$0	02/26/2024	Nonvoted Item #2
A-#2	#5326 (closed #2985 & #4157)	Center for Justice Innovation	12/01/2022-06/30/2026	\$0	TBD	TBD

<p>Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New or <input checked="" type="checkbox"/> Existing service or purchase.</p> <p>Phase I Planning: Conduct research and collaborate with local and national subject matter experts in developing a quality curriculum and learning resources.</p> <p>Phase II Development: Create the curriculum and other project deliverables including syllabus, program curriculum guide for facilitators, program handbook for participants, and supplemental materials. Develop methods to gauge effectiveness and evaluate the new curriculum.</p> <p>Phase III Implement and Evaluate: Pilot, evaluate and revise the curriculum if necessary. Provide “train the trainer” sessions.</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p> <p>Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p> <p>A. To design a single training curriculum that addresses violence and successful parenting after violence.</p>

B. To promote and encourage victim safety, offender accountability as a means to change behavior, and parenting interventions that provide effective, long-term strategies for successful parenting after violence.

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: Justice Innovation, Inc., dba Center for Justice Innovation 520 Eighth Avenue, 18 <sup>th</sup> Floor New York, New York 10018	Owner, executive director, other (specify): Courtney Bryan
Vendor Council District: N/A	Project Council District: All
If applicable provide the full address or list the municipality(ies) impacted by the project.	

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

Is Purchase/Services technology related ☐ Yes ☒ No. If yes, complete section below:

<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
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Is the item ERP related? ☐ No ☐ Yes, answer the below questions.

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

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source. DR285105 State Justice Institute Grant 50%      DR285105 Ohio State Bar Foundation Grant 50%
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project. The project is in progress and this is a no cost extension. The amended contract does not end until June 30, 2025.	
<input type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions): see chart above
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### BC2025-257

Title	The Medical Examiner's Office plans to contract with Charity Blasdel, for the period Execution thru 12/31/2025 for Pathology Assistant services in the amount not-to-exceed \$42,000.00.
Department or Agency Name	Medical Examiner's Office
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
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O	CM#5313	Charity Blasdel	Execution – 12/31/2025	\$42,000.00	Pending	Pending
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Service/Item Description (include quantity if applicable). Services, per the contract and Cuyahoga County Medical Examiner's Office Pathology Assistants Standard Operating Procedures Manual. Pathology Assistants will provide the highest quality, professional autopsy assistance possible. The P.A.'s will provide professional, ethical, and timely services to the decedents, their families, survivors, and law enforcement.

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

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

Project Goals, Outcomes or Purpose (list 3):

Insure accurate and reliable assistance to the Cuyahoga County Medical Examiner, Chief Deputy Medical Examiner, Deputy Medical Examiners and Fellows in all phases of the autopsy.

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

Vendor Name and address:	Owner, executive director, other (specify):
Charity Blasdel 1470 Cloverfield Dr. Copley, OH 44321	Contractor
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. Request for RFP Exemption due to time-sensitive nature of the services needed.  *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date

Participation/Goals (%): (   ) DBE (   ) SBE (   ) MBE (   ) WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.  If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	<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:	<input type="checkbox"/> Government Purchase  <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment - (list original procurement)  <input type="checkbox"/> Other Procurement Method, please describe:

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

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed.  100% Coroner Lab
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit.  ME105105 / 55130 / ME-Coroner Lab
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.
Is contract/purchase late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:
Timeline

Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments been made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):
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### BC2025-258

Title	5324- Camp Ho Mita Koda – Contract – Camp Hope 2025		
Department or Agency Name	Public Safety and Justice Services		
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):		

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
O	5324	Camp Ho Mita Koda	July 27, 2025 – August 1, 2025	\$24,253.00	TBD	TBD

<p>Service/Item Description (include quantity if applicable).</p> <p>Camp HOPE America is the first evidence-based camping and mentoring initiative in the US to focus on children exposed to domestic violence. Cuyahoga County would like to enter into a contract with Camp Ho Mita Koda to be the location for our residential summer camp experience for children impacted by the generational cycles of violence and trauma. The effective date of the contract will be from July 27, 2025 – August 1, 2025.</p>
<p>Indicate whether: <input type="checkbox"/> New service/purchase <input checked="" type="checkbox"/> Existing service/purchase <input type="checkbox"/> Replacement for an existing service/purchase (provide details in Service/Item Description section above)</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p> <p>Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p> <p>The goal of Camp HOPE America is to break the generational cycle of family violence by offering healing and hope to children who have witnessed family violence. Structured activities are provided through an evidence</p>

and value-based curriculum that focuses on praising children for observed and developing character traits through the course of the camp program.

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

Vendor Name and address:	Owner, executive director, other (specify):
Camp Ho Mita Koda Foundation 14040 Auburn Rd. Newbury, OH 44065	Alexandra Richardson Executive Director
Vendor Council District:	Project Council District:
N/A	All; County Wide
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input checked="" type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: 1/10/2025	Provide a short summary for not using competitive bid process.  *See Justification for additional information.
The total value of the solicitation: \$30,000	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) 49 / 1	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.  If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?  It was the only submitted bid.	<input type="checkbox"/> Contract Amendment - (list original procurement) <input type="checkbox"/> Other Procurement Method, please describe:

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

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed.  100% Health and Human Services Levy Fund
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit.  PJ325100
Payment Schedule: <input type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

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

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



	4608	Camp Ho Mita Koda	8/4/2024- 8/20/2024	\$22,500	6/24/2024	BC2024-481
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# BC2025-259

Title	HHS 2025: Print Servers
Department or Agency Name	Department of Health and Human Services
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
	25001324	MNJ Technologies Direct		\$22,824.00		

Service/Item Description (include quantity if applicable).

The purchase includes low-level print servers to support the PaperCut print management system across Health and Human Services (HHS) facilities. These servers will enhance printing security, efficiency, and document management, ensuring a streamlined and reliable print environment. This acquisition is necessary due to the 1801 move and other HHS relocations, requiring updates to our IT infrastructure. The procurement is being conducted through state term pricing, ensuring competitive pricing. These servers are new.

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

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

Project Goals, Outcomes or Purpose (list 3):

Essential for Printing – This purchase is essential for HHS to maintain secure, efficient, and managed printing across all facilities.  
Support IT Infrastructure Adjustments – Ensure seamless printing operations across HHS facilities, particularly following the 1801 move and other departmental relocations.  
Ensure Cost-Effective Procurement – Utilize state term pricing to acquire the necessary servers at a pre-negotiated, competitive rate, optimizing budget efficiency.

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

Vendor Name and address: MNJ Technologies Direct 1025 Busch Parkway Buffalo Grove, IL 60089	Owner, executive director, other (specify): Jimmy Lochner, Account Representative
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process.  *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input checked="" type="checkbox"/> State Contract, list STS number and expiration date STS 534515 04/05/2026 <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.  If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	<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:	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment - (list original procurement) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval: 02/27/2025

Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.
Are the purchases compatible with the new ERP system? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain.

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed.  100% Health and Human Services Levy
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if “no” please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit.  HS260100/55130/UCH09999
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project. Nothing purchased yet. Waiting on BOC approval	
Is contract/purchase late <input type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission	
Reason:	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments been made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):
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**BC2025-260**

Title	Amendment 1 Cuyahoga County HHS: Office of Reentry – 2023-2025 – Relink Contract for Comprehensive Resource Guide – CM#3529
Department or Agency Name	The Department of Reentry
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify): Alternative Procurement

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	3529	Relink	7/14/2023- 7/13/2025	\$42,215.00	7/10/2023	BC2023-435
A1	3529	Relink	7/14/2023- 7/13/2025	\$20,580.00	pending	pending

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

The Department of Health and Human Services Office of Reentry plans to amend contract number 3529 with Relink for additional funds of \$20,580.00 with no time extension.

Relink will research, gather, and synthesize current information, regarding any and all services and resources, available to the reentry population into a hard copy and electronic comprehensive guide; incorporate a detailed listing of all organization types that are related to reentry in Cuyahoga County; organize, format, and ensure the accuracy of all collected information; print up to 500 copies of a full-sized (8.5"x11") and up to 5000 copies of a pocket-sized (6"x8") guide per year and provide digital data of the information contained in the guide.

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

Project Goals, Outcomes or Purpose (list 3):

The primary goals of the project are to:

Identify all services and service providers available to the reentry population.

Create and publish a hard copy comprehensive reentry resource guide.

and publish an electronic version of the comprehensive reentry resource guide.

and provide digital data of services and service providers available to the reentry population.

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

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

Vendor Name and address:	Owner, executive director, other (specify):
Relink 1755 Enterprise Pkwy Ste 400 Twinsburg, OH 44807 Council District 7	Barbara Campbell, Executive Director
Vendor Council District: Countywide	Project Council District: County Wide

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

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

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

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

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

HISTORY (see instructions): see chart above
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### C. - Consent Agenda

**BC2025-261**

(See related items for proposed purchases for the week of 4/14/2025 in Section C above).

### V – OTHER BUSINESS

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

#### Item No. 1

TITLE	Ohio Lake Erie Commission Grant
DEPARTMENT OR AGENCY NAME	Cuyahoga County Department of Public Works

REQUESTED ACTION – PLEASE CHECK ALL THAT IS APPLICABLE	<input type="checkbox"/> Authority to Apply (for grants with Cash Match and/or Subrecipients). <input checked="" type="checkbox"/> Grant Application (for grants with no Cash Match or Subrecipients).
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*PLEASE INCLUDE SUPPORTING DOCUMENTS AS ATTACHMENTS TO THE SUBMISSION IN ONBASE.	➤ Is County Executive signature required <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Grant Agreement (when the signature of the County Executive is required). <input checked="" type="checkbox"/> Grant Award (when the signature of the County Executive is not required). <input type="checkbox"/> Grant Amendments <input type="checkbox"/> Pre-Award Conditions Forms (when no signature is required by the County Executive)
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GRANT CURRENT/HISTORICAL INFO	NAME OF GRANT	TIME PERIOD	AMOUNT	PREVIOUS APPROVAL (PLEASE PROVIDE BOC MEETING DATE)	APPROVAL NO.
ORIGINAL (O)	Ohio Lake Erie Commission Grant	1/1/25-6/30/26	\$154,000	PENDING	PENDING
AMENDMENT (A-1)					
AMENDMENT (A- )					
DESCRIPTION/ EXPLANATION OF THE GRANT:		The Euclid Beach Connector Project was identified as the top priority in the Lakefront Public Access Plan and vital to the goal of providing equitable access to Lake Erie while controlling erosion and restoring natural habitats along the shoreline in the underserved community of North Collinwood. This grant will contribute to the construction costs.			
PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):		This project will (1) provide new public access along a 2/3 mile stretch of shoreline via a new multipurpose trail.			
		(2) Stabilize an eroding shoreline and reintroduce natural vegetation			
		(3) Greatly improve the habitats of the Monarch Butterfly and many fish species			

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

PROJECT COUNCIL DISTRICT:	District 10
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PROVIDE FULL ADDRESS/LIST MUNICIPALITY(IES) IMPACTED BY GRANT/PROJECT, IF APPLICABLE.	Cuyahoga County, the City of Cleveland North Collinwood neighborhood
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FUNDING SOURCE:	Please provide the complete, proper name of the funding source (no acronyms) for receipt of this grant.
	Ohio EPA Lake Erie Management Assistance Grant, Sub-granted by Ohio Lake Erie Commission
	Does this require a Cash Match by the County? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	If yes, how much is required for the Cash Match by the County? Also, please provide the complete, proper name of the County funding source (no acronyms) that will be used for the Cash Match. Include percentages of funding if using more than one County funding source for the Cash Match.

## Item No. 2

(See related list of Contracts \$0.00 - \$10,000.00 and Various Agreements – processed and executed for the week of 4/14/2025 in Section V. above).

## VI – PUBLIC COMMENT

## VII – ADJOURNMENT