



**Cuyahoga County Board of Control Agenda
Tuesday, May 27, 2025 - 11:00 A.M.
County Headquarters
2079 East Ninth Street
4th Floor, Committee Room B**

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

I – CALL TO ORDER

II. – REVIEW MINUTES – 5/19/2025

III. – PUBLIC COMMENT

IV. – CONTRACTS AND AWARDS

A. – Tabled Items

B. – New Items for Review

BC2025-339

Fiscal Office,

- a) Submitting an RFP exemption, which will result in an award recommendation to Huntington Convention Center in the amount not-to-exceed \$18,977.47 for the rental of audio/visual equipment for use at the Cuyahoga County Forfeited Land Sale, to be held at the Huntington Convention Center, for the period 9/2/2025 – 9/5/2025.
- b) Recommending an award on Purchase Order No. 25002062 to Huntington Convention Center in the amount not-to-exceed \$18,977.47 for the rental of audio/visual equipment for use at the Cuyahoga County Forfeited Land Sale, to be held at the Huntington Convention Center, for the period 9/2/2025 – 9/5/2025.

Funding Source: Real Estate Assessment Fund

BC2025-340

Fiscal Office, submitting an amendment to Contract No. 5416 (fka 1149) with Manatron, Inc. for the purchase of Marshall & Swift Rate Tables Data Licenses for the period 1/1/2021 – 12/31/2024 to extend the time period to 12/31/2025, to change the terms of the End User License Agreement and to replace the insurance requirements, effective upon signature of all parties, and for additional funds in the amount not-to-exceed \$185,657.29.

Funding Source: Real Estate Assessment Fund

BC2025-341

Department of Information Technology on behalf of the Medical Examiner, recommending an award on Purchase Order No. 25001899 to MNJ Technologies Direct, Inc. in the amount not-to-exceed \$21,598.00 for a joint cooperative purchase of (2) Tangent Medix T13 V5 medical computers, (1) 27" TAA compliant monitor, (4) 27" surgical grade autopsy monitors, (1) monitor display stand, and (3) monitor wall mounts.

Funding Source: General Fund

BC2025-342

Department of Information Technology, recommending an award on Purchase Order No. 25002008 with MNJ Technologies Direct, Inc. in the amount not-to-exceed \$198,547.00 for a state contract purchase of (58) HP Z2 G9 Workstations, (57) HP Zbook G11 Mobile Workstations and related accessories, licenses, warranties, and support.

Funding Source: Capital Improvement Plan

BC2025-343

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 \$255,373.31 for the purchase of an HP Synergy Server Chassis and (8) Server Blades, various related accessories, and support to replace the end-of-life server chassis located at the Cleveland Data Center.
- b) Recommending an award on Purchase Order No. 25002063 to AdvizeX Technologies LLC in the amount not-to-exceed \$255,373.31 for the purchase of an HP Synergy Server Chassis and (8) Server Blades, various related accessories, and support to replace the end-of-life server chassis located at the Cleveland Data Center

Funding Source: Capital Improvement Plan

BC2025-344

Department of Public Safety and Justice Services, recommending an award and enter into Contract No. 5176 with Vasu Communications, Inc. (398-2) in the amount not-to-exceed \$10,440.00 for maintenance and repair of Mutual Aid Box Alarm System (MABAS) equipment and associated tower services, located at 4300 Robert Bishop Drive, Village of Highland Hills, effective upon signatures of all parties through 12/31/2026.

Funding Source: General Fund

BC2025-345

Department of Public Safety and Justice Services,

a) Submitting an RFP exemption, which will result in a Revenue Generating Agreement with Case Western Reserve University in the anticipated amount of \$119,088.00 for the continued use of (4) Motorola Next Generation 9-1-1 workstations located at the Public Safety Answering Points Communication Center, 1689 East 115th Street, Cleveland, effective upon signatures of all parties for the period 4/17/2025- 3/31/2028.

b) Recommending an award and enter into Revenue Generating Agreement No. 5417 with Case Western Reserve University in the anticipated amount of \$119,088.00 for the continued use of (4) Motorola Next Generation 9-1-1 workstations located at the Public Safety Answering Points Communication Center, 1689 East 115th Street, Cleveland, effective upon signatures of all parties for the period 4/17/2025- 3/31/2028.

Funding Source: Revenue Generating

BC2025-346

Department of Health and Human Services/Division of Children and Family Services, recommending an award on Purchase Order No. 25002028 with MNJ Technologies Direct, Inc. in the amount not-to-exceed \$60,945.00 for a state contract purchase of (85) Microsoft Surface Go 4 Tablets and (85) computer bookbags for children transitioning out of foster care.

Funding Source: 66% Health and Human Services Levy Fund and 34% Title IV-E Fund subject to 100% reimbursement by TANF-Independent Living Funds.

C. – Exemptions**BC2025-347**

Medical Examiner's Office, requesting approval to amend Board of Control Approval No. BC2024-369 dated 5/13/2024, which resulted in an award recommendation to Promega and Life Technologies to procure genetic testing kits and other consumable supplies for the FY2023 DNA Backlog Grant period 10/1/2023 – 9/30/2025, to change the amount not-to-exceed from \$281,394.00 to \$317,492.00.

Funding Sources: FY2023 DNA Backlog Grant from the U.S. Department of Justice

D. – Consent Agenda**BC2025-348**

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, requesting authority to apply for grant funds from the Ohio Department of Development in the amount of \$1,985,300.00 for the PY2025 Homeless Crisis Response Program for the period 7/1/2025- 12/31/2027.

Funding Source: Ohio Department of Development Homeless Crisis Response Program. This grant requires a 100% match, to be provided by either the recipient or subrecipient – this will be provided by the subrecipient, EDEN.

BC2025-349

Department of Information Technology, on behalf of the Sheriff's Department, recommending to declare excess County computers and IT Equipment as surplus County-owned property, no longer needed for public use; requesting authority to sell surplus property to Info@Ret3.org. for a fee in the total amount not-to-exceed \$1.00 for the month of May 2025 in accordance with EA02012-0001.

Funding Source: Revenue Generating

BC2025-350

Fiscal Department, presenting proposed travel/membership requests for the week of **5/27/2025**

Dept:	County Executive's Office							
Event:	Keynote Address-Conference							
Source:	Invest in Our Future							
Location:	Washington, DC							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Christopher Ronayne	6/9/2025 – 6/10/2025	\$0.00	\$120.00	\$450.00	\$80.00	\$450.00	\$1,100.00	18% General fund 82% Invest in Our Future

*Paid to host

**Staff reimbursement

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

Purpose:

Executive Ronayne will provide a keynote address for convening of national climate funders through Invest in our future (IOF). The invitation was extended through power to a clean future. Invest in Our Future will cover the Lodging and Airfare for this travel

Dept:	Department of Sustainability							
Event:	Keynote Address-Conference							
Source:	Invest in Our Future							
Location:	Washington, DC							

Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Melanie Knowles	6/9/2025 – 6/10/2025	\$0.00	\$120.00	\$450.00	\$80.00	\$450.00	\$1,100.00	18% General fund 82% Invest in Our Future

*Paid to host

**Staff reimbursement

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Purpose:

Executive Ronayne will provide a keynote address for convening of national climate funders through Invest in our future (IOF). The invitation was extended through power to a clean future. Invest in Our Future will cover the Lodging and Airfare for this travel

Dept:	County Executive's Office							
Event:	Naco Annual Conference							
Source:	National Association of Counties (NACO)							
Location:	Philadelphia, PA							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Chris Ronayne	7/12/2025- 7/13/2025	\$620.00	\$60.00	\$350.00	\$40.00	\$450.00	\$1,520.00	General Fund
Erik Janas	7/11/2025- 7/14/2025	\$620.00	\$240.00	\$1,050.00	\$160.00	\$450.00	\$2,520.00	General Fund

*Paid to host

**Staff reimbursement

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

Purpose:

The NACO Annual Conference & Exposition, which will be held at the Pennsylvania Convention center in Philadelphia, Pennsylvania.

Dept:	Department of Sustainability							
Event:	Naco Annual Conference							
Source:	National Association of Counties (NACO)							
Location:	Philadelphia, PA							

Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Jenita McGowan	7/12/2025-7/13/2025	\$620.00	\$60.00	\$350.00	\$40.00	\$450.00	\$1,520.00	General Fund

*Paid to host

**Staff reimbursement

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

Purpose:

The NACO Annual Conference & Exposition, which will be held at the Pennsylvania Convention center in Philadelphia, Pennsylvania.

Dept:	County Executive's Office							
Event:	EPA-Region 5 Convening							
Source:	US Environmental Protection Agency							
Location:	Chicago, IL							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Chris Ronayne	5/28/2025-5/29/2025	\$0.00	\$60.00	\$250.00	\$0.00	\$300.00	\$610.00	General Fund

*Paid to host

**Staff reimbursement

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

Purpose:

Executive Ronayne and Emily Bacha (Program Director, Fresh Water Institute) Will travel to Chicago, IL to attend a meeting with EPA-Region 5 administrator, Anne Vogel.

Dept:	Department of Sustainability							
Event:	EPA-Region 5 Convening							
Source:	US Environmental Protection Agency							
Location:	Chicago, IL							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source

Emily Bacha	5/28/2025-5/29/2025	\$0.00	\$60.00	\$0.00	\$0.00	\$300.00	\$360.00	General Fund
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*Paid to host

**Staff reimbursement

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

Purpose:

Executive Ronayne and Emily Bacha (Program Director, Fresh Water Institute) Will travel to Chicago, IL to attend a meeting with EPA-Region 5 administrator, Anne Vogel.

Dept:	Public Defender's Office							
Event:	All Rise Treatment Court Institute Practitioner Training Defense Attorney							
Source:	All Rise							
Location:	Oklahoma City, OK							
Staff	Travel Dates	Registration **	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
David Brown	9/22/2025-9/26/2025	\$850.00	\$228.00	\$546.94	\$205.00	\$542.37	\$2,372.31	General Fund 93% reimbursed by Office of the Ohio Public Defender

*Paid to host

**Staff reimbursement

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

Purpose:

The Treatment Court Institute's Practitioner Training is designed exclusively for defense attorneys who serve as treatment court team members. This four day in-person training offers an in-depth education on your role in treatment courts facilitated by national experts. During the Practitioner Training, they will receive dynamic education on their role, professionalism and ethics, constitutional and legal issues, drug testing, treatment issues, and other key topics.

V- OTHER BUSINESS

Item of Note (non-voted)

Item No. 1

Department of Public Safety and Justice Services, submitting a Memorandum of Understanding

agreement with Case Western Reserve University, Jack, Joseph and Morton Mandel School of Applied Social Sciences to provide Case Western Reserve University MSASS students with experience in their field by working in the County Witness Victims Services department, effective upon signatures of all parties for the period 6/1/2025- 5/31/2028.

Funding Source: N/A

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. 7469	5269 (fka 2353)	Advanced Engineering Consultants, Inc.	For general mechanical-electrical-plumbing, architectural and engineering services	\$0.00	Department of Public Works	5/12/2022-5/11/2025 to extend the time period to 9/30/2026	(Original) General Fund	(Executive) 5/14/2025 (Law) 5/14/2025

VI – PUBLIC COMMENT

VII – ADJOURNMENT

Minutes

Cuyahoga County Board of Control

Monday, May 19, 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 11:01 a.m.

Attending:

Katherine A. Gallagher, Chief of Operations & Community Innovation County Executive Administration
(Alternate for Chris Ronayne, County Executive)

Michael Chambers, Fiscal Officer, serving as Chairman

Mellany Seay, Finance and Operations Administrator, Department of Public Works
(Alternate for Michael Dever)

Paul Porter, Director, Department of Purchasing

Levine Ross, County Council (Alternate for Councilmember Meredith Turner)

Trevor McAleer, County Council (Alternate for Councilmember Michael Houser)

Joseph Nanni, County Council (Alternate for Councilmember Robert Schleper)

II. – REVIEW MINUTES – 5/12/2025

Michael Chambers motioned to approve the minutes from the May 12, 2025, meeting; Trevor McAleer 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

BC2025-327

Department of Public Works,

- a) Submitting an RFP exemption, which will result in an award recommendation to Ohio Desk Company in the amount not-to-exceed \$16,656.00 for the purchase of (40) frameless glass panels for workstations at the Board of Elections.
- b) Recommending an award on Purchase Order No. 25001641 to Ohio Desk Company in the amount not-to-exceed \$16,656.00 for the purchase of (40) frameless glass panels for workstations at the Board of Elections.

Funding Source: General Fund

Matthew Rymer, Department of Public Works, presented. There were no questions. Michael Chambers motioned to approve the item; Joseph Nanni seconded. Item BC2025-327 was approved by unanimous vote.

BC2025-328

Department of Sustainability,

- a) Submitting an RFP exemption, which will result in an award recommendation to The Student Conservation Association, Inc. in the amount not-to-exceed \$110,000.00 to engage SCA to assist the County's Fresh Water Institute with training climate-ready workers to fulfill the specialized workforce needs of the water industry in the Great Lakes effective upon signatures of all parties for a period of 2 years.
- b) Recommending an award and enter into Contract No. 5423 with The Student Conservation Association, Inc. in the amount not-to-exceed \$110,000.00 to engage SCA to assist the County's Fresh Water Institute with training climate-ready workers to fulfill the specialized workforce needs of the water industry in the Great Lakes effective upon signatures of all parties for a period of 2 years.

Funding Source: U.S. Department of Housing and Urban Development Cuyahoga County Fresh Water Institute Development Project Grant

Brianna Witt, Department of Information Technology, presented. Trevor McAleer asked if we received federal funds for this or are we still waiting for it. Michael Chambers motioned to approve the item; Trevor McAleer seconded. Item BC2025-328 was approved by unanimous vote.

BC2025-329

Department of Information Technology, submitting an amendment to Contract No. 4144 (fka Contract Nos. 674 and CE1600276) with Infor Public Sector, Inc. for annual subscription fees, system upgrades to MyTime Workforce Management platform to support project implementation, and for additional funds in the amount-not-to-exceed \$40,949.08, 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; Paul Porter seconded. Item BC2025-329 was approved by unanimous vote.

BC2025-330

Court of Common Pleas/Juvenile Court Division,

- a) Submitting an RFP exemption, which will result in an award recommendation to the City of Cleveland, Community Relations Board in the amount not-to-exceed \$150,000.00 for the PASS (Pre-Arrest Diversion Support Services) Program to provide needs assessments to at risk youth and their families for the period 3/1/2025-6/30/2026.

- b) Recommending an award and enter into Contract No. 5349 with the City of Cleveland, Community Relations Board in the amount not-to-exceed \$150,000.00 for the PASS (Pre-Arrest Diversion Support Services) Program to provide needs assessments to at risk youth and their families for the period 3/1/2025-6/30/2026.

Funding Source: RECLAIM Grant

Jennifer Howard, Court of Common Pleas/Juvenile Court Division, presented. Levine Ross asked with the citations do we know what level the citations will be issued as far as criminal activity, asked what would be an example of issuing a citation to the youth, asked is there a possibility Council can get more information on the program once it gets built up so we can follow it. Michael Chambers motioned to approve the item; Levine Ross seconded. Item BC2025-330 was approved by unanimous vote.

BC2025-331

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 Third Sector Capital Partners, Inc. in the amount not-to-exceed \$195,000.00 to establish a cross-agency continuous improvement process to improve economic opportunity for Cuyahoga County youth and young adults transitioning out of foster care, effective upon signature of all parties through 1/31/2026.
- b) Recommending an award and enter into Contract No. 5352 with Third Sector Capital Partners, Inc. in the amount not-to-exceed \$195,000.00 to establish a cross-agency continuous improvement process to improve economic opportunity for Cuyahoga County youth and young adults transitioning out of foster care, effective upon signature of all parties through 1/31/2026.

Funding Source: 53.85% Health and Human Services Levy Fund and 46.15% U.S. Department of Housing and Urban Development Planning Grant

Marcos Cortes, Department of Health and Human Services, presented. There were no questions. Michael Chambers motioned to approve the item; Mellany Seay seconded. Item BC2025-331 was approved by unanimous vote.

BC2025-332

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

- a) Requesting authority to apply for grant funds from U.S. Department of Housing and Urban Development in the amount of \$1,013,070.00 for Continuum of Care Coordinated Entry System in connection with FY2024 Continuum of Care Homeless Program Competition grant for the period 2/1/2025 – 1/31/2026.
- b) Submitting a grant agreement with U.S. Department of Housing and Urban Development in the amount of \$1,013,070.00 for Continuum of Care Coordinated Entry System in connection with FY2024 Continuum of Care Homeless Program Competition grant for the period 2/1/2025 – 1/31/2026.

Funding Source: 75% U.S. Department of Housing and Urban Development Continuum of Care Program and 25% Cash Match (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; Levine Ross seconded. Item BC2025-332 was approved by unanimous vote.

BC2025-333

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

- a) Requesting authority to apply for grant funds from U.S. Department of Housing and Urban Development in the amount of \$517,613.00 for Rapid Re-housing services for families in connection with FY2024 Continuum of Care Homeless Program Competition Grant for the 6/1/2025 – 5/31/2026.
- b) Submitting a grant award from U.S. Department of Housing and Urban Development in the amount of \$517,613.00 for Rapid Re-housing services for families in connection with FY2024 Continuum of Care Homeless Program Competition Grant for the 6/1/2025 – 5/31/2026.

Funding Source: 75% U.S. Department of Housing and Urban Development Continuum of Care Program and 25% Cash Match (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; Joseph Nanni seconded. Item BC2025-333 was approved by unanimous vote.

BC2025-334

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

- a) Requesting authority to apply for grant funds from U.S. Department of Housing and Urban Development in the amount of \$584,302.00 for Rapid Re-housing services for single adults in connection with FY2024 Continuum of Care Homeless Program Competition Grant for the 10/1/2025 – 9/30/2026.
- b) Submitting a grant award from U.S. Department of Housing and Urban Development in the amount of \$584,302.00 for Rapid Re-housing services for single adults in connection with FY2024 Continuum of Care Homeless Program Competition Grant for the 10/1/2025 – 9/30/2026.

Funding Source: 75% U.S. Department of Housing and Urban Development Continuum of Care Program and 25% Cash Match (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; Mellany Seay seconded. Item BC2025-334 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. BC2025-335 through BC2025-338; Trevor McAleer seconded. The Consent Agenda Items were approved by unanimous vote.

BC2025-335

Department of Public Works, submitting an amendment to Contract No. 4478 with Terrace Construction Company, Inc. for rehabilitation of East 200th Street from Mohican Avenue to Lakeshore Boulevard in the Cities of Cleveland & Euclid in connection with the 2021-2024 Transportation Improvement Program; no additional funds required, effective upon signatures of all parties.

Funding Source: 61.5% Municipal, 22.9% Federal, 13.4% Ohio Public Works Commission Grant Fund, 2.2% Road and Bridge \$5.00 Motor Vehicle Fund

BC2025-336

Department of Housing and Community Development, submitting an amendment to Contract No. 4890 with Cleveland Mediation Center for eviction prevention and Shelter Mediation Program services for the period 8/1/2024 – 4/30/2025 to extend the time period to 6/30/2025; no additional funds required effective upon signatures of all parties.

Funding Source: U.S. Treasury Emergency Rental Assistance 2 Funds

BC2025-337

Fiscal Department, presenting proposed travel/membership requests for the week of **5/19/2025**:

Dept:	Department of Public Works							
Event:	WEF/WEAT Collection Systems and Stormwater Conference 2025							
Source:	Water Environment Federation and Water Environment Association of Texas							
Location:	Houston, TX							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Douglas Dietzel	7/14/2025 - 7/18/2025	\$745.00	\$180.00	\$750.00	\$400.00	\$755.00	\$2,830.00	Sanitary Sewer Fund
Brandon Skufca	7/14/2025 - 7/18/2025	\$745.00	\$180.00	\$750.00	\$400.00	\$755.00	\$2,830.00	Sanitary Sewer Fund

*Paid to host

**Staff reimbursement

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

Purpose:

The conference aims to explore sustainable infrastructure solutions, focusing on resilience, adaptability, and innovation in response to urban flooding, stormwater runoff, and aging infrastructure. The event will feature 26 technical sessions, 3 workshops, and 2 tours, providing a comprehensive program for professionals in the field. Dynamic environment for networking, knowledge sharing, and professional development, with opportunities to engage with experts, regulators, and technology providers.

Dept:	Sheriff's Department							
Event:	Axon Week 2025							
Source:	Axon							
Location:	Phoenix, AZ							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Padraig Devlin	4/21/2025-4/26/2025	\$1,149.00	\$360.00 \$171.66	\$1,500.00 \$1,682.95	\$800.00 \$1,071.34	\$800.00 \$645.67	\$4,609.00 \$4,720.62	Continued Professional Training Fund

Purpose:

Attendance at the conference will help ensure that our team understand the latest in public safety technology and learning about the innovative solutions of the future. Axon Week is Public Safety's premier Technology and training conference and will feature keynotes on the future of public safety technology, training, and breakout sessions on innovative solutions in the public safety sector. Expert speakers and panels will address highly requested topics on public safety policy, training, crime reduction, communication, and officer wellness among other topics.

***Previously Approval BC2025-80 in the amount of \$4,609.00. Traveler is seeking additional funds due to exceeding travel approval.

BC2025-338

Department of Purchasing, presenting proposed purchases for the week of 5/19/2025:

Direct Open Market Purchases
(Purchases between \$10,001 - \$200,000.00 unless requiring assistance from the Department of Purchasing – See Below):

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
25001723	(1) Pipehunter Easement Machine with various accessories	Department of Public Works	The Safety Company LLC dba MTech Company	\$72,216.24	Sanitary Sewer Fund

25001746	(2) Tag- along trailer with beavertail and ramps	Department of Public Works	Ohio Machinery Co. dba Ohio CAT	\$63,668.00	Sanitary Sewer Fund
25001811	Various pavement repair supplies for the Road and Bridge Division	Department of Public Works	Unique Paving Materials Corp.	Not-to-exceed \$15,000.00	Road and Bridge Fund
25001594	(24,500) rounds of rifle ammunition and (250,000) rounds of pistol ammunition	Sheriff's Department	Suppressor Co LLC	\$89,676.50	General Fund
25001949	(55) CBRN Breathing Respirators and (316) Canister Filters	Department of Public Safety and Justice Services	Drellishak & Drellishak dba Pro-Tech Sales	\$44,767.00	FY2022 Urban Area Security Initiative (UASI)

Items/Services Received and Invoiced but not Paid:

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
25001896	Out-of-home care placement services for the period of 11/19/2023-11/30/2023*	Division of Children and Family Services	KMI Acquisitions, LLC dba The Brook Hospital KMI	\$19,800.00	66% Health and Human Services Levy Fund and 34% Title IV-E Reimbursement

*Approval No. BC2025-324, dated 5/12/2025, which amended BC2024-987 dated 12/23/2024, 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 – 12/31/2025 in the amount not-to- exceed \$1,500,000.00 by changing the amount not-to-exceed from \$1,500,000.00 to \$1,750,000.00.

V- OTHER BUSINESS

Item of Note (non-voted)

Item No. 1

Department of Public Works, submitting an agreement of cooperation with City of Rocky River for the replacement of Hilliard Boulevard Bridge No. 08.57 over Rocky River, Valley Parkway and Trail.

Funding Source: \$27,500,000.00 - Federal, \$8,000,000.00 - Issue 1 and \$ 4,500,000.00 - Road and Bridge Fund

Item No. 2

Department of Workforce Development, in partnership with City of Cleveland as designated Local Workforce Area 3, submitting a subgrant agreement with Ohio Department of Job and Family Services to define the roles and responsibilities of the administration of workforce development activities in connection with the allocation of Workforce Innovation and Opportunity Act grant funds for the period 7/1/2025 - 6/30/2027.

Funding Source: N/A

Item No. 3

Department of Workforce Development, submitting a Memorandum of Understanding with Local Workforce Area 3 partners to define the terms, roles responsibilities, and funding commitments the parties have negotiated and mutually agreed upon for the operation and funding of the local area Workforce Development System and the OhioMeansJobs Centers in Local Area 3 for the period 7/1/2025- 6/30/2027.

Funding Source: N/A

Item No. 4

Department of Public Safety and Justice Services, submitting a subgrant award agreement from Ohio Department of Public Safety/Office of Criminal Justice Services in the total amount of \$764,802.41 for the Regional Planning Unit Project in connection with the FY2024 STOP Violence Against Women Act Block Grant for the period 1/1/2025 – 3/31/2026

Funding Source: 84.5% (\$646,311.90) FY2024 STOP Violence Against Women Act Block Grant from the Ohio Department of Public Safety, Office of Criminal Justice Services, 15.5% (\$118,490.51) Local Cash Match paid by political subdivision subrecipients (not paid by Cuyahoga County or nonprofit subrecipients)

Item No. 5

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
NA	4436	The City of South Euclid	For the Playground of Possibilities Restoration project at Bexley Park	\$0.00	Department of Development	3/12/2024-12/31/2024 to extend the time period to 8/31/2025	(Original) Community Development Supplemental Grant Program Funds	(Executive) 5/12/2025 (Law)

VI – PUBLIC COMMENT

There was no public comment.

VII – ADJOURNMENT

Michael Chambers motioned to adjourn; Mellany Seay seconded. The motion to adjourn was unanimously approved at 11:16 am.

Item Details as Submitted by Requesting Departments

IV. Contracts and Awards

A. – Tabled Items

B. – New Items for Review

BC2025-339

Title	Forfeited Land Sale at the Huntington Convention Center		
Department or Agency Name	Fiscal 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.
A	25002062 -GOVP	Huntington Convention Center	9/2/2025- 9/5/2025	18,977.47	Pending	Pending

Service/Item Description (include quantity if applicable). This is a purchase order for Audio, Visual, IT, Safety and Security at the Huntington Convention Center for the annual forfeited land sale.
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): Audio and Visual Equipment for forfeited land sale

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):
Huntington Convention Center 1 St. Clair Ave NE Cleveland, Ohio 44114	Monai Stone Accounting Manager
Vendor Council District:	Project Council District:

If applicable provide the full address or list the municipality(ies) impacted by the project.	
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COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (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. RFP Exemption was used because Mills, James is the only equipment provider at the Huntington Convention Center and the Convention Center is billing us directly for the use of this equipment *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? <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.
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100% Real Estate 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. FS305100
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):						
Prior Original (O) and subsequent Amendments (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
	24002334	Mills James Production	8/26/2024-8/30/2024	\$16,000.00	BC2024-459	6/17/2024

BC2025-340

Title	Fiscal Department Marshall & Swift rate tables for property valuation assessments
Department or Agency Name	Fiscal Department
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/Council Approved	Approval No.
O	1149	Manatron , Inc.	01/01/2021 – 12/31/2021	\$125,462.93	05/03/2021	BC2021-200
A-1	1149	Manatron , Inc.	01/01/2022 – 12/31/2022	\$138,905.76	04/18/2022	BC2022-237
A-2	1149	Manatron , Inc.	01/01/2023 – 12/31/2023	\$154,931.60	01/09/2023	BC2023-03
A-3	1149	Manatron , Inc.	01/01/2024 – 12/31/2024	\$173,875.63	02/20/2024	BC2024-122
A-4	5416	Manatron , Inc.	01/01/2025 – 12/31/2025	\$185,657.29	Pending	Pending

Service/Item Description (include quantity if applicable). Access to the Marshall & Swift rate tables needed for valuation assessments
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): -Calculate replacement cost. -Calculate depreciation values of property -Provide property Valuations

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):
Manatron Inc. 2429 Military Rd Ste 300 Niagara Falls, NY 14304	Jillian Alcott VP Customer Operations

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. No competitive process was used due to the vendor being the only option to provide maintenance for the MVP Tax software *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 checked="" type="checkbox"/> Contract Amendment - (list original procurement) Sole Source <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval: 04/10/2025 Pg. 4
Is the item ERP related? <input type="checkbox"/> No <input checked="" 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% Real Estate 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. FS305100
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 vendor cannot provide a license fee agreement until the new rates are received by Marshall & Swift. This happens in late November every year. Additionally, there have been ongoing contract negotiations regarding the insurance requirements.	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	01/10/2025
Date documents were requested from vendor:	01/16/2025
Date of insurance approval from risk manager:	Conditional Approval 05/02/2025
Date Department of Law approved Contract:	02/18/2025
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (if yes, please explain) Rates are available for 6 years put the price can only be calculated yearly once the parcel count and price is received	
Have payments been made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

BC2025-341

Title	Clinical and Surgical Grade Monitors for the Medical Examiner’s Autopsy Unit
Department or Agency Name	Department of Information Technology on behalf of the Medical Examiner

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):
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Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
	25001899 JCOP	MNJ Technologies Direct, Inc		\$21,598.00	PENDING	PENDING

<p>Service/Item Description (include quantity if applicable).</p> <p>The Department of Information Technology on behalf of the Medical Examiner plans to contract with MNJ Technologies Direct, Inc., for Clinical and Surgical Grade Monitors for the Medical Examiner's Autopsy Unit in the amount of \$21,598.00.</p> <p>Qty. 1 27" TAA Compliant Monitor Qty. 4 LCD Monitor Qty. 1 Monitor Stand Qty. 3 Monitor Wall Mount Qty. 2 Tangent Medix</p>
<p>Indicate whether: <input type="checkbox"/> New service/purchase <input type="checkbox"/> Existing service/purchase <input checked="" 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 Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p> <p>The Medical Examiner seeks to replace antiquated technology and better utilize systems of identification for the Autopsy department. 27" surgical grade monitors will replace the existing monitors at the three autopsy stations, as well as one at the demonstration autopsy station, The existing monitors are 22" and more than ten years old . The users have voiced that working on these small monitors makes their jobs more difficult. The 27" clinical review monitor will replace a 22" monitor at the bench in the autopsy suite that is used for reviewing images. The clinical review monitor is 8MP, a medical specification similar to 4k resolution, which will provide technicians and pathologists the ability to more accurately review medical imaging. The quoted tablets will replace an antiquated computer that is currently used to operate our dental imaging hardware, which allows us to identify decedents based on their dental records. MNJ Technologies Direct is able to provide Cuyahoga County with joint cooperative contract pricing.</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):
MNJ Technologies Direct, Inc. 1086 Busch Parkway	Jimmy Lochner Account Representative

Buffalo Grove, Illinois	
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 formal competitive process has been completed through NCPA with a joint cooperative award being made to MNJ Technologies. All vendors awarded through NCPA have undergone a formal competitive bid process. MNJ Technologies Direct is able to provide Cuyahoga County with joint cooperative contract pricing. *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 Contract NCPA-01-148 expires November 30, 2025.
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: CTO 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 ME105105
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.
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):

BC2025-342

Title	PO25002008STAC -2025- Procurement of 58 HP Z2 Workstations and 57 HP Zbook G11 Mobile workstations and associated accessories.
Department or Agency Name	The 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.
	PO250020 08STAC	MNJ Technologies Direct	2025	\$198,547.00	PENDING	PENDING

Service/Item Description (include quantity if applicable).

The Department of Information Technology plans to contract with MNJ Technologies Direct, for the procurement of 58 HP Z2 G9 Workstations, 57 HP Zbook G11 Mobile Workstations and associated accessories in the amount of \$198,547.00.

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

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

Project Goals, Outcomes or Purpose (list 3):

1. To Procure 58 HP Z2 G9 Workstations, 57 HP Zbook G11 Mobile Workstations and associated accessories.

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

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (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. MNJ Technologies Direct is able to provide Cuyahoga County the requested hardware equipment using Ohio State Term Schedule pricing. All vendors awarded an Ohio state contract have gone through formal bidding processes and have been vetted by the State of Ohio prior to award. STS#534486 Expires on 7.2.2028 *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#534486 Expires on 7.2.2028 <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 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 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. IT600100 COTEC0001301
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):

BC2025-343

Title	PO25002063EXMT -2025- Procurement of Server Chassis for the Cleveland Datacenter
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.
	PO250020 63EXMT	Advizex Technologies	2025	\$255,373.31	PENDING	PENDING

<p>Service/Item Description (include quantity if applicable).</p> <p>The Department of Information Technology plans to contract with Advizex Technologies, for procurement of HP Synergy Server Chassis and eight Server Blades to begin the replacement of the End of Life / End of Support server chassis that exists today at the Cleveland Datacenter in the amount of \$255,373.31.</p> <p>This request is for a new HP Synergy Server Chassis and eight Server Blades to begin the replacement of the End of Life / End of Support server chassis that exists today at the Cleveland Datacenter. The current server chassis in place today will no longer be supported by the Virtualization Platform provider by October of 2025, thus will introduce Security Risk if not replaced within 1-3 months after October.</p>
Indicate whether: <input type="checkbox"/> New service/purchase <input type="checkbox"/> Existing service/purchase <input checked="" 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):

Procurement of:

1. Memory Modules (RAM) – \$82,984.32
2. Processors (CPUs) – \$42,798.72
3. Base Server Units – \$20,755.84
4. Support for Server Units – \$14,812.40
5. Startup Service for Main Equipment – \$13,431.01
6. High-Speed Network Modules – \$28,368.02
7. Control Devices (Composers) – \$8,207.78
8. Power Supply Units – \$6,594.48
9. Fast Storage Drives (SSDs) – \$6,176.64
10. Network Adapters – \$6,138.00
11. Main Server Cabinet (Frame) – \$5,389.21
12. Cooling Fans – \$1,803.50
13. High-Speed Cables – \$3,162.30
14. Link Modules – \$2,540.98
15. Support for Networking Devices – \$2,104.58
16. Storage Kits for Server Units – \$884.96
17. Adapters for Power Supply Units – \$1,362.84
18. Cooling Hardware for Servers (Rear & Front) – \$2,562.48 total
19. Support for Server Cabinet – \$1,070.52
20. Support for Control Devices – \$901.88
21. Controller Boards for Storage – \$1,779.52
22. Shipping Costs – \$912.36
23. Mounting Rails – \$201.06
24. Lift Handles – \$121.11
25. Cables for Data Connections – \$308.80

****For more detail and part numbers please see the quote attached to the Purchase Order.**

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):
Advizex Technologies 6480 Rockside Woods Boulevard Independence, Ohio 44131	Keith McLeod Account Executive
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	Provide a short summary for not using competitive bid process. Advizex is able to provide Cuyahoga County with pricing that is better than what is offered on Ohio STS contract

<input type="checkbox"/> Formal Closing Date:	number: 534515, which is considered lowest and best negotiated pricing for this purchase *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 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 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. IT600100 COTEC0001601
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):

BC2025-344

Title	2025 CECOMS Communications Tower Maintenance – Vasu Communications CM 1576
Department or Agency Name	Department of 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	5176	Vasu Communicati ons	3/11/2025 – 12/31/2026	\$10,440.00	TBD	TBD

Service/Item Description (include quantity if applicable). The purpose of the contract is to provide labor for the maintenance, diagnoses and/or repair of previously installed MABAS equipment, a 2-channel UHF repeater system and a tower with shelter leased from Cuyahoga Community College, located at 4300 Robert Bishop Drive, Highland Hills, Ohio 44122
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): This project will allow us to have a vendor to contact, as needed, for maintenance and repair of this communications equipment and tower.

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):
Vasu Communications, Inc. 2432 Ridgeland Dr. Avon, OH 44011	Owner Donna Vasu
Vendor Council District:	Project Council District:
N/A – Lorain County	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: _____	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation: 6,000.00	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) / 398/2	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () 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?	<input type="checkbox"/> Contract Amendment - (list original procurement)

Vasu was 23,832.00 compared to Harb Security which was 43,898.00	<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 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. PJ100115 55130
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: There were delays in getting the COI verified and getting the contract signed by the vendor
<p>Timeline:</p> <p>9/3/2024: Request insurance requirements from Risk Management</p> <p>9/12/2024: Specs sent to Project Owner 9/11 (include insurance requirements);</p> <p>9/17/2024: Has not heard from Project Owner, sent f/u 9/16.</p> <p>9/24/2024: Have okay from Project Owner for specs, Still need to do DEI, Risk Management already set insurance,</p> <p>10/1/2024: Specs Being Reviewed</p> <p>10/8/2024: Specs Being updated</p> <p>10/15/2024: Specs Being Reviewed</p> <p>11/5/2024: Event Released today, closing Fri 11/08 @ 3 pm.</p> <p>11/12/2024: Event extended to 11/15, 2 bids received.</p> <p>11/19/2024: Two bids sent to Project Owner today.</p> <p>11/27/2024: Sent f/u to Project Owner</p> <p>12/3/2024: Sent f/u to Project Owner; Submitted Request for Contract Draft to Law</p> <p>12/6/2024: 1st Draft received from law</p> <p>1/6/2025: Contract Edits sent to law/ Draft 2 of edits received by law</p>

1/7/2025: Contract edits sent to Law 1/10/2025: Draft 3 received from Law 1/28/2025; Final edits sent to Law 2/04/2025: Final Contract Draft received from Law; requested vendor documents 2/13/2025: Contract Sent to VASU 2/20/2025: Followed up with vendor regarding signature of contract 2/25/2025: Followed up with Vendor, 3/3/2025: received approval from risk management 3/5/2025: Released in Infor 3/12/2025: Returned due to error in pricing; Reached out to Vendor 3/13/2025: Received updated pricing sheet from vendor 4/4/2025: Received OK from Project owner to move forward 4/7/2025: Made corrections to contract 4/22/2025: Will give MBV final hard copy 4/29/2025: MBV completed review 5/1/2025: Sent contract to Vasu 5/1/2025: Vasu sent contract back after hours	
Project/Procurement Start Date (date your team started working on this item):	9/11/2024
Date documents were requested from vendor:	2/4/2025
Date of insurance approval from risk manager:	3/3/2025
Date Department of Law approved Contract:	2/4/2025
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: There was a two week delay in getting the contract back (Sent 2/13/25 received 2/27/25).	
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	4260	VASU Communications	3/11/2024-3/10/2025	4,000.00	3/11/2024	ION 3

BC2025-345

Title	2025 – Case Western Reserve University – Revenue Generating Agreement for use of Motorola NG911 Workstations	
Department or Agency Name	Public Safety & Justice Services	
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input checked="" 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	5417	Case Western Reserve University	April 17 2025 – March 31 2029 2028	\$119,088.00	Pending	Pending

<p>Service/Item Description (include quantity if applicable).</p> <p>The revenue generating agreement will allow Case Western Reserve University Division of Public Safety use of four (4) Motorola NG9-1-1 workstations at the current PSAP located at the Communications Center located at 1689 East 115th Street, Cleveland, Ohio. This agreement will reimburse the County for costs associated with maintaining these workstations on its emergency communications system contact with Motorola.</p>
<p>Indicate whether: <input 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>N/A – Not a Purchase. This is a revenue generating agreement</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> <ul style="list-style-type: none"> • Provide the Case Western Reserve University Division of Public Safety with four (4) Motorola NG9-1-1 workstations. • Receive reimbursement from the Case Western Reserve University Division of Public Safety for the support and maintenance fees associated with the Motorola NG 91-1-1 equipment, software, and licensing.

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):
Case Western Reserve University	Eric W. Kaler President

Vendor Council District:	Project Council District:
District 10	District 10
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. This is a Revenue Generating Agreement. This option is available to any PSAP that wants more workstations than called for in the County's 9-1-1 plan *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 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.

The revenue generated monies will be deposited in the Wireless fund.

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

Revenue Generating Agreement

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

N/A – Revenue Generating Agreement

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 state partner did not return the contract until 4/23/2025

Timeline

Project/Procurement Start Date (date your team started working on this item):	4/29/2025
Date documents were requested from vendor:	4/17/2025
Date of insurance approval from risk manager:	N/A
Date Department of Law approved Contract:	4/17/2025

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

If late, have services begun? ☐ No ☒ Yes (if yes, please explain) The contract started On April 17th 2025. Case Western is currently in use off the 911 workstations

Have payments been made? ☒ No ☐ Yes (if yes, please explain) N/A – Revenue Generating

HISTORY (see instructions): N/A						
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	3488	Case Western Reserve University	6/12/2023-3/10/2025	\$58,800.00	6/12/2023	BC2023-377

BC2025-346

Title	DCFS 2025: Laptops for Graduation Seniors
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Department or Agency Name	Division of Children and Family Services
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
	25002028	MNJ Technologies Direct		\$60,945.00		

Service/Item Description (include quantity if applicable).
85 Microsoft Surface Go 4 Tablets 30 Bookbags- Black 30 Bookbags- Gray 25 Bookbags- Tan
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 purchase is to equip children transitioning out of care with the necessary technology to support their education, personal development, and successful transition to independent living on their way to self-sufficiency. Three Goals: <ol style="list-style-type: none"> 1. Educational Advancement: Providing laptops ensures that children have access to online learning resources, educational software, and virtual classrooms, helping them to stay on track academically. 2. Skill Development: These devices enable children to develop essential digital skills that are crucial for future employment and daily life in a technology-driven world. 3. Facilitating Independence: Access to technology helps children manage their personal affairs, such as online banking, job applications, and communication, fostering a smoother transition to independent living.

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 1025 Busch Parkway Buffalo Grove, IL 60089	Owner, executive director, other (specify): The Seller Administrator for the contractor/vendor is Jimmy Lochner
Vendor Council District:	Project Council District:

If applicable provide the full address or list the municipality(ies) impacted by the project.	
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COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (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 procurement method utilized was the State Term Schedule (STS) contract. (STS 534354 Expiring 12/19/2026) These prices have been competitively bid by the State of Ohio. As a public entity, we are permitted to utilize this platform, ensuring that the items procured meet competitive bidding requirements without the need for a separate solicitation 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 <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 checked="" type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, please explain. N/A	

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. We will pay upfront through 66% Health and Human Services Levy and 34% Title IV-E. Then will receive 100% Reimbursement through TANF-Independent Living Funds.
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. HS215100/56010/UCH05613
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. Nothing purchased yet, Waiting on BOC approval	
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):

C.- Exemptions

BC2025-347

TITLE	AMEND BC2024-369 TO REVISE NOT-TO-EXCEED AMOUNT TO \$317,492.00
DEPARTMENT OR	Medical Examiner's Office

REQUESTED ACTION	<input type="checkbox"/> Alternative Procurement <input checked="" type="checkbox"/> Amendment to Alternative Procurement
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LIST MOST RECENT/PRIOR ALTERNATIVE PROCUREMENT APPROVALS FOR THIS REQUEST; INCLUDING	DATE BOC APPROVED/COUNCIL'S JOURNAL DATE	APPROVAL NO.
	5/13/2024	BC2024-369

AMENDMENTS, AS APPLICABLE		
DESCRIPTION/ EXPLANATION REQUEST:	OF	Medical Examiner's Office requesting approval of an Amendment to BC2024-369 (approved by the BOC on 5/13/2024), to add funds in the amount of \$36,098.00; changed the amount Not to Exceed to \$317,492.00 for the Alternative Purchase approval of procurement of DNA genetic testing kits and other consumables from Promega Corporation and Life Technologies, for the period FY2023 DNA Backlog Grant period of 10/01/2023 thru 9/30/2025. Additional funding noted after review of the grant. Requesting the amendment to exhaust these funds under the chemical supplies line item relative to DNA genetic testing and consumable supplies.

FUNDING SOURCE:	Is funding for this included in the approved budget?
	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (if "no" please explain): Grant Funded
	Please provide the complete, proper name of the funding source (no acronyms). Include percentages of funding if using more than one source.
	FY 2023 DNA Capacity Enhancement and Backlog Reduction (CEBR) Program (Formula) Grant U.S. Dept. of Justice

D. - Consent Agenda

BC2025-348

TITLE	FY25 OHIO DEPARTMENT OF DEVELOPMENT HOMELESS CRISIS RESPONSE PROGRAM - REQUEST FOR GRANT APPLICATION AUTHORITY (SIGNATURE REQUIRED)
DEPARTMENT OR	Office of Homeless Services

REQUESTED ACTION – PLEASE CHECK ALL THAT IS APPLICABLE *PLEASE INCLUDE SUPPORTING DOCUMENTS AS ATTACHMENTS TO THE SUBMISSION IN ONBASE.	<input checked="" type="checkbox"/> Authority to Apply <i>(for grants with Cash Match and/or Subrecipients).</i> <input type="checkbox"/> Grant Application <i>(for grants with no Cash Match or Subrecipients).</i> ➤ <i>Is County Executive signature required</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Grant Agreement <i>(when the signature of the County Executive is required).</i> <input type="checkbox"/> Grant Award <i>(when the signature of the County Executive is not required).</i> <input type="checkbox"/> Grant Amendments <input type="checkbox"/> Pre-Award Conditions Forms <i>(when no signature is required by the County Executive)</i>
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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)	Homeless Crisis Response Program	7/1/25 – 12/31/27	\$1,985,300.00	7/31/23	CON2023-84
AMENDMENT (A-1)					
AMENDMENT (A-)					

DESCRIPTION/ EXPLANATION OF THE GRANT:	<p>The Homeless Crisis Response Program (HCRP) is designed to prevent individuals and families from entering homelessness, provide for emergency shelter operations, and rapidly move persons from homelessness to permanent housing. HCRP consists of two components: 1) Emergency shelter operations; and 2) Housing stability which includes homelessness prevention and rapid re-housing activities.</p> <p>Eligible applicants include nonprofit organizations, local governments, public housing authorities and consortia of eligible applicants that are currently funded through the HCRP. Requests for funding must be for project-based emergency shelters, homelessness prevention and rapid re-housing activities that meet the housing needs of homeless families and individuals.</p> <p>The Office of Homeless Services has applied for and received funding through this program since 2013, and was most recently awarded in 2023. Locally, these funds are used for rapid re-housing. EDEN, which serves as the rapid re-housing provider for the Continuum of Care, is designated as the subrecipient.</p>
PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):	<p>Prevent individuals and families from experiencing homelessness</p> <p>Provide assistance to rapidly move persons from shelter into permanent housing when homelessness does occur</p> <p>Better meet national objectives and the needs of Ohio's homeless persons</p>

GRANT SUBRECIPIENTS – ARE THERE ANY SUBRECIPIENTS THAT ARE WRITTEN INTO THE GRANT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
<p align="center"><i>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.</i></p>	
SUBRECIPIENT'S NAME AND ADDRESS:	Emerald Development and Economic Network (EDEN), Inc.
LIST THE (OWNERS, EXECUTIVE DIRECTOR, OTHER(specify) FOR THE CONTRACTOR/VENDOR	Elaine Gimmel, Executive Director 7812 Madison Ave Cleveland, Ohio 44102
SUBRECIPIENT'S COUNCIL DISTRICT:	7
DOLLAR AMOUNT ALLOCATED:	\$1,985,300.00
PROJECT COUNCIL DISTRICT:	County-wide
PROVIDE FULL ADDRESS/LIST MUNICIPALITY(IES) IMPACTED BY GRANT/PROJECT, IF APPLICABLE.	County-wide

FUNDING SOURCE:	Please provide the complete, proper name of the funding source (no acronyms) for receipt of this grant.
	Ohio Department of Development Homeless Crisis Response Program
	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.
	This grant requires a 100% match. While the county is responsible for ensuring that the match is documented, ODOD allows for either the recipient or subrecipient to provide the match. For this grant, EDEN will provide the cash match.

BC2025-349

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

Funding Source: Revenue Generating

Agency: Department of IT

Sale of property to:

Info@Ret3.org

1814 E. 40th Street

Cleveland, Ohio 44103

Kenny Kovach-Director

Sheriff's Office Scrapped Equipment List							
Type of Equipment	ISC#	Model#	Age of Service	Type of Equipment	ISC#	Model#	Age of Service
Computer	2UA4411LS7	Pro Desk	??	Monitor	51821	Dell	8+
-	77364	HP Z220	11+	-	73288	-	-
-	78761	-	-				
-	78352	-	-				
-	84467	-	-				
-	78331	-	-				
-	84410	-	-				
-	2UA3440N23	-	-				
-	80046	HP Z230	8+				
-	79239	-	-				
-	79532	-	-				
-	79345	-	-				
-	90090	HP Z240	6+				
-	89100	-	-				
-	89094	-	-				
-	88680	-	-				
-	88789	-	-				
-	89096	-	-				
-	90483	-	-				

Laptop	90536	HP Elitebook	5+				
Tablet	90697	Surface Pro	3+				
Monitor	79579	HP	5+				
-	85007	-	-				
-	3CM23338VV	-	-				
-	3CM23338QT	-	-				
-	84417	-	-				
-	3CM23338R5	-	-				
-	H17E195BCP02 17	Sceptre	5+				
-	CN-0GFXN4	Dell	8+				
-	64504	-	-				
-	63521	-	-				

BC2025-350

See related items for proposed travel/memberships for the week of **5/27/2025** in Section **D** above.

V – OTHER BUSINESS

Item of Note (non-voted)

Item No. 1

TITLE	Affiliation Agreement between Case Western Reserve University and Cuyahoga County
DEPARTMENT OR	Public Safety and Justice Services

REQUESTED ACTION	<input checked="" type="checkbox"/> Memorandum of Understanding (MOU) <input type="checkbox"/> MOU Amendment
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CURRENT/HISTORICAL AGREEMENT INFORMATION	VENDOR NAME	TIME PERIOD	DATE BOC APPROVED/ COUNCIL'S JOURNAL DATE	APPROVAL NO.
Original (O)	Case Western Reserve University, Jack, Joseph and Morton Mandel School of Applied Social Sciences	Upon execution and for three years after execution date with the option to renew annually after the initial three-year contract	Pending	Pending
Amendment (A)				

STATUS OF PROJECT:	<input checked="" type="checkbox"/> New Agreement <input type="checkbox"/> Recurring Agreement
DESCRIPTION/ EXPLANATION OF REQUEST:	Case Western Reserve University MSASS students will be provided with experience in their field by working in the County Witness Victims Services department.

PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):	Provides field experience to Case Western's MSASS students.
	Student will provide extra help with clients seeking civil protection orders and other victim services.
VENDOR DETAILED INFORMATION	
VENDOR NAME AND ADDRESS:	Case Western Reserve University, Jack, Joseph and Morton Mandel School of Applied Social Sciences
ROLE OF AUTHORITY (SPECIFY, I.E. OWNER, EXECUTIVE DIRECTOR):	Brian Burnett Executive VP & CFO
VENDOR COUNCIL DISTRICT (IF APPLICABLE):	District 7
PROVIDE FULL ADDRESS/LIST MUNICIPALITY(IES) IMPACTED BY PROJECT (IF APPLICABLE)	All
PROJECT COUNCIL DISTRICT (IF APPLICABLE):	All

REASON FOR LATE SUBMITTAL	
EXPLANATION FOR LATE SUBMITTAL (PROVIDE DETAIL INFORMATION THAT MAY HAVE AFFECTED TIMELY PROCESSING OF REQUEST):	
HAVE WORK/SERVICES BEGUN?	<input type="checkbox"/> YES <input type="checkbox"/> NO (if "yes" please explain):
PROJECT START DATE (DATE YOUR TEAM STARTED WORKING ON THIS ITEM):	
DATE ITEM WAS ENTERED AND RELEASED IN ONBASE	

Item No. 2

See related list of Contracts \$0.00 - \$10,000.00 processed and executed for the week of **5/27/2025** in Section V. above

VI – PUBLIC COMMENT

VII – ADJOURNMENT