



**Cuyahoga County Board of Control Agenda
Tuesday, February 18, 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 – 2/10/2025

III. – PUBLIC COMMENT

IV. – CONTRACTS AND AWARDS

A. – Tabled Items

B. – New Items for Review

BC2025-99

Department of Public Works, submitting an amendment to a Master Contract with various providers for purchase of various materials and supplies on an as needed basis, for road and bridge related maintenance and repairs, including special projects for use by the Road and Bridge Division for the period 3/14/2023 – 3/13/2025 to extend the time period to 3/13/2027, to replace Sections 1.4 Insurance requirements (Types and Limits) and I.5 Insurance Coverage Terms and Conditions, effective upon signatures of all parties and for additional funds in the total amount not-to-exceed \$400,000.00:

- a) Contract No. 3192 with Crown Cleaning Systems and Supply, Inc., dba Crown Cleaning Systems in the anticipated amount of \$2,000.00.
- b) Contract No. 3195 with LumberOne Supply, LLC in the anticipated amount of \$10,000.00.
- c) Contract No. 3196 with PPG Architectural Finishes, Inc. in the anticipated amount of \$1,000.00.
- d) Contract No. 3197 with SiteOne Landscape Supply in the anticipated amount of \$7,500.00.
- e) Contract No. 3198 with The Chas E. Phipps Company in the anticipated amount of \$85,000.00.
- f) Contract No. 3963 with Carr Brothers, Inc. in the anticipated amount of \$200,000.00.
- g) Contract No. 3964 with W. W. Grainger, Inc. in the anticipated amount of \$12,500.00.
- h) Contract No. 3965 with Hilti, Inc. in the anticipated amount of \$10,000.00.
- i) Contract No. 3967 with Industrial Safety Products, Inc. in the anticipated amount of \$2,000.00.
- j) Contract No. 3968 with The Sherwin Williams Company in the anticipated amount of \$5,000.00.
- k) Contract No. 3969 with Stoneco, Inc. dba Allied Corporation in the anticipated amount of \$65,000.00.

Funding Source: Road and Bridge Fund

BC2025-100

Department of Public Works, submitting an amendment to Contract No. 4862 with Pitney Bowes Inc. for lease, maintenance and support services of mailing equipment located at various County buildings for the period 11/28/2024 – 11/27/2027 to expand the scope of services to include the services listed in Exhibit C, effective upon signatures of all parties, and for additional funds in the amount not-to-exceed \$33,880.11.

Funding Source: General Funds

BC2025-101

Department of Public Works, submitting an amendment to Contract No. 5168 (fka Contract No. 2432) with Orkin LLC for integrated pest management services for various County buildings for the period 4/1/2022 – 3/31/2025 to extend the time period to 3/31/2026 and for additional funds in the amount not-to-exceed \$150,000.00.

Funding Source: General Fund

BC2025-102

Department of Development, requesting authority to amend Board Approval No. BC2024-438, dated 6/10/2024, which authorized a United States Environmental Protection Agency Brownfield Revolving Fund Loan to Global Ambassadors Language Academy (GALA) in the amount not-to-exceed \$498,884.00 for the environmental remediation of asbestos and lead-based paint associated with the former McKinley School, 3349 West 125th Street, Cleveland, for the renovation and utilization as a charter school for the neighborhood, to change the name of the borrower to McKinley School Landlord LLC or their designee.

Funding Source: United States Environmental Protection Agency Brownfield Revolving Loan Fund

BC2025-103

Department of Information Technology,

- a) Submitting an RFP exemption, which will result in an award recommendation to SHI International Corp. in the amount not-to-exceed \$8,882.82 for a joint cooperative purchase of (1) SolarWinds IP Address Manager IPX unlimited IP subscription upgrade license and software maintenance for the period 2/18/2025 – 7/28/2025.
- b) Recommending an award on Purchase Order No. 25000508 to SHI International Corp. in the amount not-to-exceed \$8,882.82 for a joint cooperative purchase of (1) SolarWinds IP Address Manager IPX unlimited IP subscription upgrade license and software maintenance for the period 2/18/2025 – 7/28/2025.

Funding Source: General Fund

BC2025-104

Department of Information Technology,

- a) Submitting an RFP exemption, which will result in an award recommendation to MNJ Technologies Direct, Inc. in the amount not-to-exceed \$8,505.00 for a joint cooperative purchase of (3) HP ZBook Firefly mobile workstations, each to include HP Care Pack Absolute Control for Education, HP Care Pack Premium Onsite Support, 5-year warranty, docking stations and (6) monitors for the Sheriff's Department.

- b) Recommending an award on Purchase Order No. 25000525 to MNJ Technologies Direct, Inc. in the amount not-to-exceed \$8,505.00 for a joint cooperative purchase of (3) HP ZBook Firefly mobile workstations, each to include HP Care Pack Absolute Control for Education, HP Care Pack Premium Onsite Support, 5-year warranty, docking stations and (6) monitors for the Sheriff's Department.

Funding Source: General Fund

BC2025-105

Court of Common Pleas/Juvenile Court Division, submitting an amendment to Contract No. 3226 (fka Contract Nos. 265 and CE1700028) with UKG Kronos Systems, LLC (formerly known as Kronos Incorporated) for maintenance and software support services on the Comprehensive Human Resources Management System for the period 4/1/2017 – 3/31/2025 to extend the time period to 9/30/2025 and for additional funds in the amount not-to-exceed \$21,822.93.

Funding Source: General Fund

BC2025-106

Court of Common Pleas/Juvenile Court Division, submitting amendments to agreements with various municipalities for Community Diversion Program services for the period 1/1/2024 – 12/31/2024 to extend the time period to 12/31/2026, to replace the insurance requirements effective 1/1/2025, and for additional funds in the total amount not-to-exceed \$6,000.00.

- a) Agreement No. 4375 with City of Bedford in the amount not-to-exceed \$3,600.00.

- b) Agreement No. 4464 with City of Fairview Park in the amount not-to-exceed \$2,400.00.

Funding Source: Health and Human Services Levy Fund

BC2025-107

Court of Common Pleas/Juvenile Court Division,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Cordant Health Solutions in the amount not-to-exceed \$40,000.00 for drug screening and testing services for the period 1/1/2025-12/31/2025.

- b) Recommending an award and enter into Contract No. 5130 with Cordant Health Solutions in the amount not-to-exceed \$40,000.00 for drug screening and testing services for the period 1/1/2025-12/31/2025.

Funding Source: Health and Human Services Levy Fund

BC2025-108

Sheriff's Department,

- a) Submitting an RFP exemption, which will result in an award recommendation to Integrated Precision Systems, Inc. in the amount not-to-exceed \$10,000.00 for emergency repairs on an as needed basis to security equipment no longer covered under the warranty for the period 2/18/2025 – 12/31/2025.
- b) Recommending an award on Purchase Order No. 25000336 to Integrated Precision Systems, Inc. in the amount not-to-exceed \$10,000.00 for emergency repairs on an as needed basis to security equipment no longer covered under the warranty for the period 2/18/2025 – 12/31/2025.

Funding Source: General Fund

BC2025-109

Sheriff's Department,

- a) Submitting an RFP exemption, which will result in an award recommendation to Vance Outdoors, Inc. dba Vance's Law Enforcement in the amount not-to-exceed \$12,855.00 for a state contract purchase of (30) Glock handguns, night sights, magazine pouches, and various accessories.
- b) Recommending an award on Purchase Order No. 25000532 to Vance Outdoors, Inc. dba Vance's Law Enforcement in the amount not-to-exceed \$12,855.00 for a state contract purchase of (30) Glock handguns, night sights, magazine pouches, and various accessories.

Funding Source: Federal Equitable Sharing Account

BC2025-110

Sheriff's Department, submitting an amendment to Contract No. 167 with Guardian Alarm Company for monitoring services on alarm systems located in various County buildings for the period 1/1/2019 – 12/31/2024 to extend the time period to 12/31/2026 and for additional funds in the amount not-to-exceed \$9,000.00.

Funding Source: General Fund

BC2025-111

Medical Examiner's Office,

- a) Submitting an RFP exemption, which will result in an award recommendation to Fisher Scientific Company LLC in the amount not-to-exceed \$6,408.78 for a joint cooperative purchase of various supplies for the DNA Lab.

- b) Recommending an award on Purchase Order No. 25000568 to Fisher Scientific Company LLC in the amount not-to-exceed \$6,408.78 for a joint cooperative purchase of general lab supplies for the DNA Lab.

Funding Source: General Fund

C. – Exemptions

BC2025-112

Department of Public Works, recommending an alternative procurement process, which will result in award recommendations to various municipalities in the total amount not-to-exceed \$4,460,953.76 for the 2025 Preventative Maintenance Program for the period 1/17/2025 – 9/30/2026:

- a) City of Bay Village in the amount not-to-exceed \$80,450.00.
- b) City of Beachwood in the amount not-to-exceed \$66,000.00.
- c) City of Bedford in the amount not-to-exceed \$50,572.50.
- d) City of Bedford Heights in the amount not-to-exceed \$99,383.75.
- e) Village of Bentleyville in the amount not-to-exceed \$57,023.00.
- f) City of Berea in the amount not-to-exceed \$102,150.00.
- g) Village of Bratenahl in the amount not-to-exceed \$98,725.00.
- h) City of Brecksville in the amount not-to-exceed \$109,380.62.
- i) City of Broadview Heights in the amount not-to-exceed \$33,589.00.
- j) City of Brook Park in the amount not-to-exceed \$92,500.00.
- k) City of Brooklyn in the amount not-to-exceed \$71,415.00.
- l) Village of Brooklyn Heights in the amount not-to-exceed \$126,600.00.
- m) Village of Chagrin Falls in the amount not-to-exceed \$60,250.00.
- n) City of Cleveland in the amount not-to-exceed \$176,359.23.
- o) City of Cleveland Heights in the amount not-to-exceed \$3,422.15.
- p) Village of Cuyahoga Heights in the amount not-to-exceed \$105,000.00.
- q) City of East Cleveland in the amount not-to-exceed \$112,500.00.
- r) City of Fairview Park in the amount not-to-exceed \$50,000.00.
- s) City of Garfield Heights in the amount not-to-exceed \$200,000.00.
- t) Village of Gates Mills in the amount not-to-exceed \$125,000.00
- u) Village of Glenwillow in the amount not-to-exceed \$54,870.00.
- v) City of Highland Heights in the amount not-to-exceed \$84,423.31.
- w) Village of Highland Hills in the amount not-to-exceed \$200,000.00.
- x) Village of Hunting Valley in the amount not-to-exceed \$30,900.00
- y) City of Independence in the amount not-to-exceed \$69,000.00.
- z) City of Lakewood in the amount not-to-exceed \$104,400.00.
- aa) Village of Linndale in the amount not-to-exceed \$3,000.00.
- bb) City of Lyndhurst in the amount not-to-exceed \$27,843.00.
- cc) City of Maple Heights in the amount not-to-exceed \$183,000.00.
- dd) City of Mayfield Heights in the amount not-to-exceed \$56,000.00.
- ee) Mayfield Village in the amount not-to-exceed \$8,250.00.

- ff) City of Middleburg Heights in the amount not-to-exceed \$95,500.00.
- gg) Village of Moreland Hills in the amount not-to-exceed \$48,084.00.
- hh) Village of Newburgh Heights in the amount not-to-exceed \$70,000.00.
- ii) City of North Olmsted in the amount not-to-exceed \$25,436.00.
- jj) Village of North Randall in the amount not-to-exceed \$100,800.00.
- kk) City of North Royalton in the amount not-to-exceed \$23,370.00.
- ll) Village of Oakwood in the amount not-to-exceed \$75,000.00.
- mm) City of Olmsted Falls in the amount not-to-exceed \$129,500.00.
- nn) Orange Village in the amount not-to-exceed \$82,533.25.
- oo) City of Parma in the amount not-to-exceed \$188,005.00.
- pp) City of Parma Heights in the amount not-to-exceed \$39,000.00.
- qq) City of Pepper Pike in the amount not-to-exceed \$163,600.00.
- rr) City of Richmond Heights in the amount not-to-exceed \$80,000.00.
- ss) City of Rocky River in the amount not-to-exceed \$47,760.00.
- tt) City of Seven Hills in the amount not-to-exceed \$33,200.00.
- uu) City of Shaker Heights in the amount not-to-exceed \$23,000.00.
- vv) City of South Euclid in the amount not-to-exceed \$124,808.95.
- ww) City of Strongsville in the amount not-to-exceed \$200,000.00.
- xx) City of University Heights in the amount not-to-exceed \$7,350.00.
- yy) Village of Valley View in the amount not-to-exceed \$25,000.00.
- zz) Village of Walton Hills in the amount not-to-exceed \$75,000.00.
- aaa) City of Warrensville Heights in the amount not-to-exceed \$15,000.00.
- bbb) City of Westlake in the amount not-to-exceed \$117,000.00.
- ccc) Village of Woodmere in the amount not-to-exceed \$30,000.00.

Funding Source: Road and Bridge Fund

D. – Consent Agenda

BC2025-113

Fiscal Department, presenting proposed travel/membership requests for the week of 2/18/2025:

Dept:	Department of Development							
Event:	2025 NACCED Legislative Conference							
Source:	National Association for County Community and Economic Development							
Location:	Washington, DC							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Paul Herdeg	2/27/2025 – 2/28/2025	\$100.00	\$0.00	\$0.00	\$0.00	\$0.00	\$100.00	General Fund

*Paid to host

**Staff reimbursement

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

**** Paul wishes to pay for his own lodging, meal, and airfare

- Lodging – \$254.00
 - Airfare – \$314.00
 - Meals - \$72.00
- Total: \$640.00

Purpose:

Paul will represent Cuyahoga County at the National Association for County Community and Economic Development (NACCED) 2025 Legislative Conference. The conference includes meetings with senior federal officials.

Dept:	Department of Communications							
Event:	Meetings with Congressional Leadership							
Source:	United States Congress							
Location:	Washington, DC							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
David Razum	2/5/2025 – 2/5/2025	\$0.00	\$60.00	\$0.00	\$40.00	\$450.00	\$550.00	General Fund

*Paid to host

**Staff reimbursement

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

**** Travel previously approved BC2025-51 amending approval to cover the increase in airfare

Purpose:

Executive Ronayne and Deputy Chief of Staff David Razum will travel to Washington, DC to attend meetings with congressional leadership related to federal investment in Cuyahoga County.

Dept:	Department of Sustainability							
Event:	2025 NACo Legislative Conference and Great Lakes Commission Semiannual Meeting							
Source:	National Association of Counties and Great Lakes Commission							
Location:	Washington, DC							

Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Emily Bacha	3/2/2025 – 3/5/2025	\$915.00	\$240.00	\$750.00	\$120.00	\$450.00	\$2,475.00	General Fund

*Paid to host

**Staff reimbursement

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

**** Travel previously approved BC2025-51 amending approval to remove Jenita McGowan and add Emily Bacha

Purpose:

The purpose of this trip is for executive office leadership to attend the National Association of Counties (NACo) Legislative Conference held in Washington, DC. The conference is attended by elected and appointed county officials throughout the county and includes sessions and meetings with topics that focus on federal policy issues that impact counties and residents. Additionally, Emily will join Executive Ronayne at the Great Lakes Commission Semi-Annual Meeting.

Dept:	County Executive’s Office							
Event:	2025 NACo Legislative Conference and Great Lakes Commission Semiannual Meeting							
Source:	National Association of Counties and Great Lakes Commission							
Location:	Washington, DC							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Christopher Ronayne	3/1/2025 – 3/6/2025	\$915.00	\$300.00	\$1,075.00	\$140.00	\$750.00	\$3,180.00	General Fund

*Paid to host

**Staff reimbursement

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

**** Travel previously approved BC2025-51 amending approval to extend travel dates, cover the increased airfare, and increased registration.

Purpose:

The purpose of this trip is for executive office leadership to attend the National Association of Counties (NACo) Legislative Conference held in Washington, DC. The conference is attended by elected and appointed county officials throughout the county and includes sessions and meetings with topics that

focus on federal policy issues that impact counties and residents. Additionally, Executive Ronayne will attend the Great Lakes Commission Semi-Annual Meeting.

Dept:	County Executive's Office							
Event:	Meetings with Congressional Leadership							
Source:	United States Congress							
Location:	Washington, DC							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Christopher Ronayne	2/5/2025 – 2/5/2025	\$0.00	\$60.00	\$0.00	\$40.00	\$450.00	\$550.00	General Fund

*Paid to host

**Staff reimbursement

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

**** Travel previously approved BC2025-51 amending approval to cover the increase in airfare

Purpose:

Executive Ronayne and Deputy Chief of Staff David Razum will travel to Washington, DC to attend meetings with congressional leadership related to federal investment in Cuyahoga County.

Dept:	Sheriff's Department							
Event:	2025 Policy Conference							
Source:	Major County Sheriffs of America							
Location:	Washington, DC							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Harold Pretel	1/26/2025 – 1/29/2025	\$0.00	\$200.00	\$1,098.70	\$237.34	\$764.96	\$2,301.00	Law Enforcement Trust Fund
Aaron Reese	1/26/2025 – 1/29/2025	\$500.00	\$200.00	\$1,050.00	\$200.00	\$565.96	\$2,515.96	Law Enforcement Trust Fund
Richard Peters	1/26/2025 – 1/29/2025	\$500.00	\$200.00	\$1,050.00	\$200.00	\$565.96	\$2,515.96	Law Enforcement Trust Fund

*Paid to host

**Staff reimbursement

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

Purpose:

To address national, state, and local issues and to bring diverse experiences and best practices back to our community to enhance safety, security, and quality of life to those we serve.

BC2025-114

Department of Purchasing, presenting proposed purchases for the week of 2/18/2025:

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

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
25000382	(1) 2025 Dodge Ram 1500 Tradesman	Department of Public Works	Kufleitner CDJR of Boardman	\$47,122.00	Sanitary Sewer Fund
25000414	(1) 2024 FORD F-350	Department of Public Works	Ken Ganley Ford Parma	\$49,990.00	Sanitary Sewer Fund
25000522	(1) Skyjack Lift and a 3 year service agreement	Department of Public Works	SunBelt Rentals, Inc.	\$27,055.00	General Fund
25000603	(10) HD Door closers, (16) locksets and (16) Cylinders	Department of Public Works	Commercial Opening Services Inc. a Division of Functional Building Supply	\$8,590.00	General Fund
25000363	Various promotional items for various events	Division of Family and Children First Council	Promo Solutions	Not-to-exceed \$25,000.00	Health and Human Services Levy Fund

Items/Services Received and Invoiced but not Paid:

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
25000598	Control panel repair at the Harvard Garage due to water damage*	Department of Public Works	Building Control Integrators (BCI)	\$8,199.00	General Fund
25000453	Law Enforcement Automated Data System (LEADS) subscription services for the period 1/1/2025 – 12/31/2025**	Medical Examiner's Office	Treasurer, State of Ohio/Ohio State Highway Patrol	\$7,200.00	General Fund

25000464	Out-of-home placement services for the period 1/1/2025 – 1/31/2025***	Division of Children and Family Services	Compassion Care Group	\$28,900.00	66% Health and Human Services Levy/34% Title IV-E Reimbursement Fund
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*Approval No. BC2025-13, dated 1/6/2025, which amended BC2023-452 dated 7/17/2023, which approved an alternative procurement process and exemption from aggregation on various purchase orders, which will result in various award recommendations to various Factory Authorized Dealers for vehicle and equipment repairs, parts and services for the period 11/29/2022 – 12/31/2024 by changing the total amount not-to-exceed from \$1,475,000.00 to \$1,925,000.00 and extending the time period to 12/31/2025.

**Approval No. BC2021-249 dated 5/24/2021, which approved an updated Administrative List of Procurement Exemptions in accordance with County Code Section 501.12(D), effective 5/24/2021.

***Approval No. BC2024-987, dated 12/24/2024, which amended BC2024-77 dated 1/29/2024, which approved an alternate procurement process resulting in purchase orders to various licensed providers for reimbursement for out of home care placement services for the period 12/1/2022 – 12/31/2024 by changing the amount not-to-exceed from exceed from \$1,000,000.00 to \$1,500,000.00 and extending the time period to 12/31/2025.

VI – PUBLIC COMMENT

VII – ADJOURNMENT

Minutes

Cuyahoga County Board of Control
Monday, February 10, 2025 - 11:00 A.M.
County Headquarters
2079 East Ninth Street
Committee Room B

I – CALL TO ORDER

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

Attending:

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

II. – REVIEW MINUTES – 2/3/2025

Michael Chambers motioned to approve the minutes from the February 3, 2025, meeting; Meredith Turner seconded. The minutes were approved by unanimous vote, as written.

III. – PUBLIC COMMENT

There was no public comment.

IV. – CONTRACTS AND AWARDS

A. – Tabled Items

B. – New Items for Review

BC2025-82

Department of Public Works, recommending an award on RQ15059 and enter into Purchase Order No. 25000393 with Valley Motor City, Inc. (18-1) in the amount not-to-exceed \$58,500.00 for the purchase of (1) replacement, new, never titled 2025 Chrysler Voyager Van with conversion for the Sheriff's Department.

Funding Source: General Fund

Thomas Pavich, Department of Public Works, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2025-82 was approved by unanimous vote.

BC2025-83

Department of Public Works, recommending an award on RQ15391 and enter into Purchase Order No. 25000394 with Dave Hallman Chevrolet, Inc. (13-1) in the amount not-to-exceed \$62,000.00 for the purchase of (2) replacement, new, never titled 2025 Chevy Equinoxes for Protective Services.

Funding Source: General Fund

Thomas Pavich, Department of Public Works, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2025-83 was approved by unanimous vote.

BC2025-84

Department of Housing and Community Development,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Historic Preservation Group LLC in the amount not-to-exceed \$135,000.00 for consulting services to complete the HUD 5-Year Consolidated Plan, first year Annual Action Plan and Consolidated Annual Performance and Evaluation Report, effective upon signatures of all parties through 12/31/2025.
- b) Recommending an award and enter into Contract No. 5164 with Historic Preservation Group LLC in the amount not-to-exceed \$135,000.00 for consulting services to complete the HUD 5-Year Consolidated Plan, first year Annual Action Plan and Consolidated Annual Performance and Evaluation Report, effective upon signatures of all parties through 12/31/2025.

Funding Source: Community Development Block Grant

Kellie Glenn, Department of Housing and Community Development, presented. Michael Houser asked was this consulting services contract competitively bid; asked can you clarify whether the contractor is going to help with our 5-year consolidate plan as well as the first year annual review. Do we have metrics in place to show the consultants services success and whether the plans were effective. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2025-84 was approved by unanimous vote.

BC2025-85

Department of Information Technology,

- a) Submitting an RFP exemption, which will result in an award recommendation to MNJ Technologies Direct, Inc. in the amount not-to-exceed \$13,644.00 for a joint cooperative purchase of (18) Pluralsight Skills Enterprise licenses for the period 1/31/2025 – 1/30/2026.
- b) Recommending an award on Purchase Order No. 25000101 to MNJ Technologies Direct, Inc. in the amount not-to-exceed \$13,644.00 for a joint cooperative purchase of (18) Pluralsight Skills Enterprise licenses for the period 1/31/2025 – 1/30/2026.

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 BC2025-85 was approved by unanimous vote.

BC2025-86

Department of Information Technology,

- a) Submitting an RFP exemption, which will result in an award recommendation to MNJ Technologies Direct, Inc. in the amount not-to-exceed \$222,364.00 for a joint cooperative purchase of Barracuda Gateway appliances for email security, Advanced Threat Protection, Energize Updates software subscriptions and instant replacement extended services for the period 2/21/2025 – 2/20/2026.
- b) Recommending an award on Purchase Order No. 25000123 to MNJ Technologies Direct, Inc. in the amount not-to-exceed \$222,364.00 for a joint cooperative purchase of Barracuda Gateway appliances for email security, Advanced Threat Protection, Energize Updates software subscriptions and instant replacement extended services for the period 2/21/2025 – 2/20/2026.

Funding Source: General Fund

Brianna Witt, Department of Information Technology, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2025-86 was approved by unanimous vote.

BC2025-87

Department of Information Technology,

- a) Submitting an RFP exemption, which will result in an award recommendation to SHI International Corp. in the amount not-to-exceed \$51,603.74 for a joint cooperative purchase for the renewal of (20) BitSight software licenses and various BitSight Cybersecurity Risk Management platform subscriptions for the period of 3/22/2025 – 3/21/2026.
- b) Recommending an award on Purchase Order No. 25000152 to SHI International Corp. in the amount not-to-exceed \$51,603.74 for a joint cooperative purchase for the renewal of (20) BitSight software licenses and various BitSight Cybersecurity Risk Management platform subscriptions for the period of 3/22/2025 – 3/21/2026.

Funding Source: General Fund

Brianna Witt, Department of Information Technology, presented. There were no questions. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2025-87 was approved by unanimous vote.

BC2025-88

Department of Information Technology,

- a) Submitting an RFP exemption, which will result in an award recommendation to Constant Contact, Inc. in the amount not-to-exceed \$7,828.80 for Email Plus subscription services to manage content, press releases and other communications across email and social media platforms for the period 2/20/2025 – 2/19/2026.
- b) Recommending an award on Purchase Order No. 25000275 to Constant Contact, Inc. in the amount not-to-exceed \$7,828.80 for Email Plus subscription services to manage content, press releases and other communications across email and social media platforms for the period 2/20/2025 – 2/19/2026.

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 BC2025-88 was approved by unanimous vote.

BC2025-89

Court of Common Pleas/Corrections Planning Board, submitting an amendment to Agreement No. 3343 with Alcohol, Drug Addiction and Mental Health Services Board of Cuyahoga County for implementing the Essential Behavioral Health Interventions and Criminogenic Needs Program for Severely Mentally Ill Offenders (BHI-CN Program) on behalf of the Cuyahoga County Adult Probation Department for the period 4/1/2023 – 6/30/2024 to extend the time period to 6/30/2025; to amend the Liability Section of the original contract in accordance with Attachment 1 and for additional funds in the amount not-to-exceed \$392,493.00.

Funding Source: 22% General Funds, 22% Health and Human Services Levy Fund, 56% Targeted Community Alternatives to Prison (CTAP) Grant.

Meghan Patton, Court of Common Pleas/Corrections Planning Board, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2025-89 was approved by unanimous vote.

BC2025-90

Court of Common Pleas/Corrections Planning Board, recommending an award and enter into Agreement No. 5124 with Alcohol, Drug Addiction, and Mental Health Services Board of Cuyahoga County in the amount not-to-exceed \$89,700.00 for Piloting a Mental Health Docket Incorporating a Drug Court Model to Improve Outcomes for Adults with Co-Occurring Disorders for the period 7/1/2024 – 12/31/2025.

Funding Source: Ohio Department of Rehabilitation and Correction (ODRC) Targeted Community Alternatives to Prison Grant

Meghan Patton, Court of Common Pleas/Corrections Planning Board, presented. There were no questions. Michael Chambers motioned to approve the item; Mellany Seay seconded Item BC2025-90 was approved by unanimous vote.

BC2025-91

Court of Common Pleas/Juvenile Court Division, submitting an amendment to Contract No. 2881 with Edwins Leadership & Restaurant Institute for professional and technical services for a culinary and hospitality program for youth residents of the Cuyahoga County Juvenile Detention Center for the period 11/8/2022 – 12/31/2024 to extend the time period 12/31/2026, to replace the insurance requirements, effective 1/1/2025, and for additional funds in the amount not-to-exceed \$247,200.00.

Funding Source: General Fund

Jennifer Howard, Court of Common Pleas/Juvenile Court Division, presented. Meredith Turner asked how much the Chef's salary is; commented she been over there and is going back this week to hang out; it is a really amazing experience for the young people in the program and what he does is amazing; he is someone who returned to the community as is doing a great service. Michael Houser asked how many youths are currently in the program. Presenter will follow up on the chef's salary and number of participants in the program. Michael Chambers motioned to approve the item; Michael Houser seconded. Item BC2025-91 was approved by unanimous vote.

BC2025-92

Court of Common Pleas/Juvenile Court Division, submitting amendments to agreements with various municipalities for Community Diversion Program services for the period 1/1/2024 – 12/31/2024 to extend the time period to 12/31/2026, to replace the insurance requirements effective 1/1/2025, and for additional funds in the total amount not-to-exceed \$14,400.00.

- a) Agreement No. 4244 (fka Agreement No. 4002) with City of Olmsted Falls in the amount not-to-exceed \$1,800.00.
- b) Agreement No. 4378 with Broadview Heights in the amount not-to-exceed \$6,000.00.
- c) Agreement No. 4479 with City of Rocky River in the amount not-to-exceed \$6,600.00.

Funding Source: Health and Human Services Levy Fund

Jennifer Howard, Court of Common Pleas/Juvenile Court Division, presented. There were no questions. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2025-92 was approved by unanimous vote.

BC2025-93

Medical Examiner's Office,

- a) Submitting an RFP exemption, which will result in an award recommendation to Pipette Pros, LLC in the amount not-to-exceed \$6,308.25 for annual calibrations and certification services for various single and multi-channel pipettes for the Regional Forensic Science Lab.

- b) Recommending an award on Purchase Order No. 25000308 to Pipette Pros, LLC in the amount not-to-exceed \$6,308.25 for annual calibrations and certification services for various single and multi-channel pipettes for the Regional Forensic Science Lab.

Funding Source: General Fund

Hugh Shannon, Medical Examiner's Office, presented. There were no questions. Michael Chambers motioned to approve the item; Mellany Seay seconded. Item BC2025-93 was approved by unanimous vote.

BC2025-94

Medical Examiner's Office,

- a) Submitting an RFP exemption, which will result in an award recommendation to Lake Balance Calibration Solutions in the amount not-to-exceed \$7,915.00 for calibration services on various lab equipment, calipers, analytical weights and centrifuges.
- b) Recommending an award on Purchase Order No. 25000330 to Lake Balance Calibration Solutions in the amount not-to-exceed \$7,915.00 for calibration services on various lab equipment, calipers, analytical weights and centrifuges.

Funding Source: General Fund

Hugh Shannon, Medical Examiner's Office, presented. Meredith Turner asked what's the difference between this item and the previous item. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2025-94 was approved by unanimous vote.

BC2025-95 Held at the request of the Department

~~Sheriff's Department, submitting an amendment to Contract No. 167 with Guardian Alarm Company for monitoring services on alarm systems located in various County buildings for the period 1/1/2019 – 12/31/2024 to extend the time period to 12/31/2026 and for additional funds in the amount not to exceed \$9,000.00.~~

BC2025-96

County Prosecutor,

- a) Submitting an RFP exemption, which will result in an award recommendation to Precision Industrial Services in the amount not-to-exceed \$13,999.98 for a state contract purchase and installation of Mannington carpet tiles and related flooring materials for the replacement of carpeting on the 8th and 9th floor of the Justice Center.
- b) Recommending an award on Purchase Order No. 25000310 to Precision Industrial Services in the amount not-to-exceed \$13,999.98 for a state contract purchase and installation of Mannington carpet

tiles and related flooring materials for the replacement of carpeting on the 8th and 9th floor of the Justice Center.

Funding Source: General Fund

James Ginley, County Prosecutor’s Office, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2025-96 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. BC2025-97 through BC2025-98; Robert Schleper seconded. The Consent Agenda Items were approved by unanimous vote.

BC2025-97

Fiscal Department, presenting proposed travel/membership requests for the week of 2/10/2025:

Dept:	Department of Public Works							
Event:	State Association Summit 2025							
Source:	National Animal Care and Control Association							
Location:	Las Vegas, NV							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Deborah Conway	4/13/2025 – 4/15/2025	\$0.00	\$120.00	\$0.00	\$40.00	\$331.48	\$491.48	Dick Goddard Best Friends Fund

*Paid to host

**Staff reimbursement

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

**** Lodging will be covered by the National Animal Care and Control Association through a grant from Maddie’s fund

- Lodging - \$235.72
Total: \$235.72

Purpose:

Requested by NACA to actively participate in the summit as a representative of the State of Ohio. As the President of the Ohio County Dog Warden's Association, Debbie was an ideal candidate to represent Ohio.

Dept:	Department of Public Works
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Event:	Animal Care Expo 2025							
Source:	Humane Society of the United States							
Location:	Las Vegas, NV							
Staff	Travel Dates	Registration **	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Deborah Conway	4/15/2025 – 4/18/2025	\$375.00	\$164.00	\$493.20	\$40.00	\$331.48	\$1,403.68	Dick Goddard Best Friends Fund

*Paid to host

**Staff reimbursement

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

Purpose:

Requested by NACA to actively participate in the Summit as a representative of the State of Ohio. As the President of the Ohio County Dog Warden's Association, Debbie was an ideal candidate to represent Ohio. The Summit is one day prior to the HSUS Expo Animal Welfare Conference.

Dept:	Fiscal Office							
Event:	2025 Professional Development Training							
Source:	AGA							
Location:	Nashville, TN							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Brad Cromes	7/27/2025 – 7/30/2025	\$975.00	\$0.00	\$651.00	\$50.00	\$309.00	\$1,985.00	Delinquent Tax Assessment Collections Fund

*Paid to host

**Staff reimbursement

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

Purpose:

The 2025 Professional Development Training provides valuable insights from leading government financial management professionals and industry experts. With over 3,000 attendees, PDT offers three and a half days of educational sessions designed to equip federal, state, local government, and private sector financial professionals with the skills and knowledge needed to enhance leadership, improve performance in cost-constrained environments, and address shared challenges using best practices.

Dept:	Public Defender's Office							
Event:	DWI Detection & SFST Student Training Course							
Source:	National Highway Traffic Safety Administration							
Location:	Atlanta, GA							
Staff	Travel Dates	Registration **	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Tara Murray	3/27/2025 – 3/30/2025	\$750.00	\$144.00	\$497.68	\$159.84	\$523.96	\$2,075.48	General Fund 78% reimbursed by Office of the Ohio Public Defender
Krista Wallace	3/27/2025 – 3/30/2025	\$750.00	\$144.00	\$497.68	\$159.84	\$523.96	\$2,075.48	General Fund 78% reimbursed by Office of the Ohio Public Defender
Abraham Del Rio	3/27/2025 – 3/30/2025	\$750.00	\$144.00	\$497.68	\$159.84	\$523.96	\$2,075.48	General Fund 78% reimbursed by Office of the Ohio Public Defender
Hannah Scifres	3/27/2025 – 3/30/2025	\$750.00	\$144.00	\$497.68	\$159.84	\$523.96	\$2,075.48	General Fund 78% 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:

Hands on training to become certified in the administering the standardized field sobriety testing allowing the attorneys to understand the procedures behind the tests given in OVI traffic stops.

Dept:	Sheriff's Department
Event:	2025 National Sheriff's Association Winter Conference

Source:	National Sheriff's Association							
Location:	Washington, DC							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Harold Pretel	1/31/2025 – 2/5/2025	\$750.00	\$332.00	\$2,000.00	\$350.00	\$650.00	\$4,082.00	Law Enforcement Trust Fund

*Paid to host

**Staff reimbursement

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

Purpose:

To attend the annual NSA Winter Conference/Training

Dept:	Department of Public Safety and Justice Services							
Event:	2025 National AMBER Alert Symposium							
Source:	National Criminal Justice Training Center							
Location:	Washington, DC							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Jacquelynn Costa	02/24/2025 – 2/26/2025	\$0.00	\$136.00	\$392.00	\$250.00	\$332.44	\$1,110.44	General Fund

*Paid to host

**Staff reimbursement

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

Purpose:

This training request is to attend the National AMBER Alert Conference being held in Washington D.C. February 25-26, 2025. As the regional AMBER Alert Coordinator for Northeast Ohio, I believe this training will be an excellent opportunity to meet with peers who also work with missing children and AMBER Alerts and possibly learn ways to improve our AMBER Alert Program and processes here in Northeast Ohio. This training will also provide an opportunity to learn more about the investigative process when handling missing children, providing a larger scope of understanding, and fostering collaboration among both responders and CECOMS in an AMBER Alert situation. Lastly, I would use the material I have learned to train our local responders and CECOMS staff.

BC2025-98

Department of Purchasing, presenting proposed purchases for the week of 2/10/2025:

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

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
25000411	Aircraft Rescue & Fire Fighting Siren Repair	Department of Public Works	Paladin Protective Systems Inc.	\$10,646.25	General Fund
25000418	Various sizes of promotional t-shirts for Animal Shelter	Department of Public Works	Axent Graphics	Not-to-exceed \$20,000.00	Animal Shelter Operating Fund
25000475	Spay, Neuter and Transportation Services for the Cuyahoga County Animal Shelter	Department of Public Works	PetFix Northeast Ohio	Not-to-exceed \$12,000.00	Animal Shelter Operating Fund

V- OTHER BUSINESS

Item of Note (non-voted)

Item No. 1

Sheriff’s Department, submitting a grant award from the U.S. Department of Justice/Office of Justice Programs/Bureau of Justice Assistance in the amount of \$54,219.00 for reimbursement of expenses associated with associated with Foreign Born Inmates booked into the County Jail in connection with the FY2024 State Criminal Alien Assistance Grant Program for the period ~~7/1/2012~~ **7/1/2022** – 12/31/2025.

Funding Source: FY2024 State Criminal Alien Assistance Grant

Item No. 2

Department of Public Safety and Justice Service, submitting a Subaward Adjustment Notice from Ohio Department of Youth Services for youth diversion programming services in connection with the FY2024 Juvenile Justice and Delinquency Prevention Title II Formula Block Grant Program for the period 10/1/2024 – 12/31/2025 to extend the time period to 6/30/2026.

Funding Source: : Ohio Department of Youth Services, Title II Formula Block Grant Subaward

Item No. 3

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

RQ No.	Contract Number	Vendor	Service Description	Amount	Department	Date(s) of Service	Funding Source	Date of Execution
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n/a	4921 (fka Contract No. 2525)	Applewood Centers, Inc.	Emergency respite and crisis bed services for youth referred by the Coordinated Approach to Misdemeanors (CALM) Program to modify Unit Rate to discontinue the Courts residential respite bed hold, effective 30 days after execution.	\$0.00	Court of Common Pleas/Juvenile Court Division	7/1/2021 – 6/30/2026	(Original) RECLAIM Grant	2/2/2024 (Executive)
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VI – PUBLIC COMMENT

There was no public comment.

VII – ADJOURNMENT

Michael Chambers motioned to adjourn; Meredith Turner seconded. The motion to adjourn was unanimously approved at 11:23 a.m.

Item Details as Submitted by Requesting Departments

IV. Contracts and Awards

A. – Tabled Items

B. – New Items for Review

BC2025-99

Title	Public Works - Master Contract Amendment 2 - Road & Bridge Parts and Supplies
Department or Agency Name	Department of Public Works
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)		Various Vendors-See Below	03/14/2023- 03/12/2025	\$400,000.00	03/13/2023	BC2023-160
	CM3192	Crown Cleaning Systems & Supply, Inc. dba Crown Cleaning Systems		\$50,000.00		
	CM3195	LumberOne Supply, LLC		\$50,000.00		
	CM3196	PPG Architectural Finishes, Inc.		\$50,000.00		
	CM3197	SiteOne Landscape Supply		\$50,000.00		
	CM3198	The Chas E Phipps Company		\$200,000.00		
(A-1)		Various Vendors-See Below	01/01/2024- 03/13/2025	\$400,000.00	02/12/2024	BC2024-98
	CM3192	Crown Cleaning		\$0.00		

		Systems & Supply, Inc. dba Crown Cleaning Systems				
	CM3195	LumberOne Supply, LLC		\$0.00		
	CM3196	PPG Architectural Finishes, Inc.		\$0.00		
	CM3197	SiteOne Landscape Supply		\$0.00		
	CM3198	The Chas E Phipps Company		\$0.00		
	CM3963	Carr Bros, Inc.		\$280,000.00		
	CM3964	W.W. Grainger, Inc.		\$20,000.00		
	CM3965	Hilti, Inc.		\$15,000.00		
	CM3967	Industrial Safety Products, Inc.		\$15,000.00		
	CM3968	The Sherwin Williams Company		\$25,000.00		
	CM3969	Stoneco Inc., dba Allied Corporation		\$45,000.00		
(A-2)		Various Vendors-See Below	03/14/2025-03/13/2027	\$400,000.00	Pending	Pending
	3192	Crown Cleaning Systems & Supply, Inc. dba Crown Cleaning Systems		\$2,000.00	Pending	Pending
	3195	LumberOne Supply, LLC		\$10,000.00	Pending	Pending
	3196	PPG Architectural Finishes, Inc.		\$1,000.00	Pending	Pending
	3197	SiteOne Landscape Supply		\$7,500.00	Pending	Pending
	3198	The Chas E Phipps Company		\$85,000.00	Pending	Pending
	3963	Carr Bros, Inc.		\$200,000.00	Pending	Pending
	3964	W.W. Grainger, Inc.		\$12,500.00	Pending	Pending
	3965	Hilti, Inc.		\$10,000.00	Pending	Pending
	3967	Industrial Safety Products, Inc.		\$2,000.00	Pending	Pending

	3968	The Sherwin Williams Company	\$5,000.00	Pending	Pending
	3969	Stoneco Inc., dba Allied Corporation	\$65,000.00	Pending	Pending

Service/Item Description (include quantity if applicable).
This amendment will extend the contract end date through 03/13/2027 and will add an additional \$400,000.00 to an existing master contract for the Public Works Road & Bridge Division. The contract provides as-needed materials and equipment used in the maintenance of County roads and bridges.

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

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

Project Goals, Outcomes or Purpose (list 3):
The contract is with vendors that can provide as-needed materials and equipment used in the maintenance of County roads and bridges.

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):
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. NA-Amendment 2 *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 RFQ and then a secondary RFQ to add more vendors) <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. Road & Bridge 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. PW270165 52500
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):	10.9.24
Date documents were requested from vendor:	10.16.24
Date of insurance approval from risk manager:	10.9.24
Date Department of Law approved Contract:	10.11.24
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): see chart above

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):
Carr Brothers, Inc. 7177 Northfield Rd. Bedford, Ohio 44146	Michael Carr, President
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

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):
WW Grainger, Inc. 1035 Valley Belt Rd. Brooklyn Heights, Ohio 44131	Jeremy Loder, Account Manager
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

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):
Hilti Inc. 5350 Transportation Blvd., Ste.3	Kristen Cappelli, Account Manager

Garfield, Ohio 44125	
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

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):
Industrial Safety Products, Inc. 6091 Carey Drive #1 Cleveland, Ohio 44125	Joseph Miller, Account Manager
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

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):
The Sherwin Williams Company 2402 E. 24 th Street Cleveland, Ohio 44114	Brian Conroy, Account Manager
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

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):
Stoneco Inc., dba Allied Inc. 8920 Canyon Falls Blvd., Suite 120 Twinsburg, Ohio 44087	Ryan Antrom, Account Manager
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

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):
Crown Cleaning Systems & Supply, Inc. 7720 Harvard Avenue Cleveland, Ohio	James W. Crowe, Sales Representative
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

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):
LumberOne Supply 4800 Van Epps Brooklyn, Ohio 44131	Heather Husak, Managing Member
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

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):
PPG Architectural Finishes 7580 Northcliffe Ave., Suite 900 Brooklyn, Ohio 44144	Ken Cassel, Account Development Manager
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

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):
SiteOne Landscape Supply 1354 Lear Industrial Parkway	Matthew Rudnik, Branch Manager #492

Avon, Ohio 44011	
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

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):
The Chas E. Phipps Company 4560 Willow Parkway Cleveland, Ohio 44125	Ben Brown, President
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	NA

BC2025-100

Title	Public Works - Pitney Bowes- CM 4862
Department or Agency Name	Department of Public Works
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)	CM4862	Pitney Bowes, Inc.	11/28/2024-11/27/2027	\$255,028.80	BC2024-682	09/23/2024
(A1)	CM4862	Pitney Bowes, Inc.	Upon Execution-11/27/2027	\$33,880.11	PENDING	PENDING

<p>Service/Item Description (include quantity if applicable). This amendment will add an additional \$33,880.11 to an existing contract for Public Works for the lease of mail machine equipment. This is being procured using the Ohio State Contract #RSI008354 exp. 05/14/2025.</p>
<p>Indicate whether: <input type="checkbox"/> New service/purchase <input checked="" type="checkbox"/> Existing service/purchase <input type="checkbox"/> Replacement for an existing service/purchase (provide details in Service/Item Description section above)</p>

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 contract provides mail machines and related equipment for use in County mailroom centers. This amendment will add one additional needed machine for the Virgil Brown Building.

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):
Pitney Bowes, Inc. 27 Waterview Dr. Shelton, CT 06484	Lori Rossio, Government Major Account Manager State of Ohio
Vendor Council District:	Project Council District:
NA	NA
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (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. STATE Contract - AMENDMENT *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 RSI008354 exp. 05/14/2025 <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)
	<input type="checkbox"/> Other Procurement Method, please describe:

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

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 100% General Funds
Is funding for this included in the approved budget? <input 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. PW775100 54400
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):	1.9.25
Date documents were requested from vendor:	1.27.25
Date of insurance approval from risk manager:	NA
Date Department of Law approved Contract:	1.27.25
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): see chart above

BC2025-101

Title	Public Works - Facilities Division -Integrated Pest Management Services – Contract Amendment	
Department or Agency Name	Department of Public Works	
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)	CM2432	Rollins, Inc. dba Orkin, LLC	4/1/2022 – 3/3/2024	\$117,120.00	5/16/2022	BC2022-297
(A-1)	CM2432	Rollins, Inc. dba Orkin, LLC	3/4/2024 - 3/31/2025	\$50,000.00	3/4/2024	BC2024-167
(A-2)	CM5168/ CM2432	Rollins Inc., Inc. dba Orkin, LLC	4/1/2025 3/31/2026	NTE \$150,000.00	Pending	Pending

Service/Item Description (include quantity if applicable).
 This contract is for Preventative Maintenance and as-needed pest control services at various County buildings. The amendment will add an additional not-to-exceed amount of \$150,000.00 and extend the contract one year to ensure a continuation of pest control services.

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

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

Project Goals, Outcomes or Purpose (list 3):
 This contract amendment will add an additional not-to-exceed amount of \$150,000.00 and extend the contract one additional year for required pest control services for various County owned buildings.

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):
Rollins, inc. dba Orkin, LLC 6940 W. Snowville Rd. Brecksville, Ohio 44141	Dylan Campbell, Commercial Operations Manager
Vendor Council District:	Project Council District:

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

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation: _____	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) _____ / _____	<input type="checkbox"/> State Contract, list STS number and expiration date <input 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) CM2432 – Formal RFB <input type="checkbox"/> Other Procurement Method, please describe: _____

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

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

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

List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit.
PW750100 - 55130

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

Provide status of project.

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

Reason:

Timeline

Project/Procurement Start Date (date your team started working on this item):	8/1/2024
Date documents were requested from vendor:	10/21/2024
Date of insurance approval from risk manager:	N/A
Date Department of Law approved Contract:	

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

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

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

HISTORY (see instructions): see chart above

BC2025-102

TITLE	2024 –Global Ambassadors Language Academy; USEPA Brownfield Revolving Loan
DEPARTMENT OR AGENCY NAME	Department of Development

REQUESTED ACTION	<input checked="" type="checkbox"/> Amendment to Approval (BOC or Council) <input type="checkbox"/> Other action; please describe
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DESCRIPTION/ EXPLANATION OF REQUEST:	The Department of Development is requesting an amendment to BOC Approval BC2024 to amend the Borrower name from Global Ambassadors Language Academy to McKinley School Landlord LLC or designee. This change is needed to accommodate a New Markets Tax Credit Transaction.
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CURRENT/HISTORICAL INFORMATION	DATE BOC APPROVED/ COUNCIL'S JOURNAL DATE	APPROVAL NO.
ORIGINAL (O)	June 10, 2024	BC2024-438

AMENDMENT (A)	Pending	Pending
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BC2025-103

Title	PO25000508JCOP-2025- Procurement of Solarwinds IP Manager Licenses
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.
	PO25000508 JCOP	SHI International Corp	2/18/2025-7/28/2025	\$8,882.82	PENDING	PENDING

Service/Item Description (include quantity if applicable).
 The Department of Information Technology plans to contract with SHI International Corp for procurement of Upgrade of SolarWinds IP Address Manager in the amount of \$8,882.82.

SolarWinds provides IT infrastructure management software to help businesses manage their networks, systems, and IT infrastructure. Solarwinds software quickly detects, diagnoses, and resolves network performance problems and outages.

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. Procurement of IP Manager Maintenance Licenses from SHI international Corp.

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):
SHI International Corp. 290 Davidson Avenue Somerset, New Jersey 08873	Mark Brum Inside Account 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. SHI is able to provide the County with Cooperative purchasing pricing under contract Name: OMNIA Partners 2018011 SHI Contract #: 2018011-SHI Expiration Date: 9.28.2025 SolarWinds provides IT infrastructure management software to help businesses manage their networks, systems, and IT infrastructure. Solarwinds software quickly detects, diagnoses, and resolves network performance problems and outages. *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 #: 2018011-SHI Expiration Date: 9.28.2025
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 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? No Yes, answer the below questions.

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

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

100% General Fund

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

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

IT100140

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

Provide status of project.

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

Reason:

Timeline

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

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

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

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

HISTORY (see instructions):

Prior Original (O) and subsequent Amendments (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
	PO24002051-JCOP	SHI International Corp	7/28/2024-7/28/2025	\$86,439.61	7/8/2024	BC2024-513

BC2025-104

Title	Department of Information Technology
Department or Agency Name	Three Mobile Workstations for the County Sheriff
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.
	25000525 JCOP	MNJ Technologies Direct, Inc.		\$8,505.00	PNDING	PENDING

<p>Service/Item Description (include quantity if applicable). The Department of Information Technology plans to contract with MNJ Technologies Direct, Inc., for Three Mobile Workstations for the County Sheriff in the amount of \$8,505.00.</p>
<p>Indicate whether: <input checked="" type="checkbox"/> New service/purchase <input type="checkbox"/> Existing service/purchase <input type="checkbox"/> Replacement for an existing service/purchase (provide details in Service/Item Description section above)</p>
<p>For purchases of furniture, computers, vehicles: <input checked="" 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): The Department of Information Technology plans to contract with MNJ Technologies Direct, Inc., for Three Mobile Workstations for the County Sheriff in the amount of \$8,505.00. Qty. 3 HP ZBook Firefly Touchscreen Mobile Workstations Qty. 3 HP Carepack Absolute Data Control Qty. 3 HP Carepack Warranty Qty. 3 HP USB-C Docking Stations Qty. 6 HP LCD Monitors</p>

<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)</p>	
Vendor Name and address:	Owner, executive director, other (specify):
MNJ Technologies Direct, Inc. 1025 Busch Parkway Buffalo Grove, IL 60089	Jimmy Lochner Account Representative
Vendor Council District:	Project Council District:

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

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (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 with joint cooperative contract pricing. Contract NCPA-01-148 expires November 30, 2025. *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 checked="" type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

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

100% General Fund SH100140

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

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

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

Provide status of project.

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

Reason:

Timeline

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

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

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

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

HISTORY (see instructions):

BC2025-105

Title	Juvenile Court HR and Payroll System Maintenance Services
Department or Agency Name	Cuyahoga County Juvenile Court
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
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O	CE1700028	UKG Kronos	4/1/2017 – 3/31/2018	\$41,656.36	02/27/2017	BC2017-170
A1	CE1700028	UKG Kronos	3/31/2019	\$43,630.06	4/2/2018	BC2018-202
A2	CE1700028	UKG Kronos	3/31/2020	\$45,239.09	11/19/2018	BC2018-813
A3	CE1700028	UKG Kronos	3/31/2020	\$52,890.00	5/28/2019	BC2019-403
A4	265	UKG Kronos	3/31/2021	\$47,132.23	5/20/2020	BC2020-276
A5	265	UKG Kronos	3/31/2021	\$6,030.95	7/20/2020	BC2020-414
A6	265	UKG Kronos	3/31/2022	\$39,541.74	7/12/2021	BC2021-342
A7	3226	UKG Kronos	3/31/2023	\$41,771.33	3/7/2022	BC2021-134
A8	3226	UKG Kronos	3/31/2024	\$44,055.32	4/3/2023	BC2023-192
A9	3226	UKG Kronos	3/31/2025	\$48,056.78	4/29/2024	BC2024-320
A10	3226	UKG Kronos	9/30/2025	\$21,822.93	Pending	Pending

Service/Item Description (include quantity if applicable).
 To provide support services including software support services, equipment support services and education support services

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

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

Project Goals, Outcomes or Purpose (list 3):
 To provide HR Management Resources
 To provide Payroll Management Resources
 To provide ongoing system maintenance

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: UKG Kronos Systems	Owner, executive director, other (specify): John O'Brien, Chief Revenue Officer
900 Chelmsford Street, Massachusetts 01851	
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. *See Justification for additional information.

The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input 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) RFP <input type="checkbox"/> Other Procurement Method, please describe:

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

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 100% 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. JC100100-55030
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):	11/19/2024
Date documents were requested from vendor:	12/02/2024
Date of insurance approval from risk manager:	1/30/2025
Date Department of Law approved Contract:	1/29/2025
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <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): see chart above

BC2025-106 a)

Title	CCJC 25-26 Community Diversion Program contract with the City of Bedford
Department or Agency Name	Cuyahoga County Juvenile Court
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue <input type="checkbox"/> 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	4375	City of Bedford	01/01/24-12/31/24	\$5,400.00	05/20/2024	BC2024-381
A-1	4375	City of Bedford	01/01/25-12/31/26	\$3,600.00	Pending	Pending

<p>Service/Item Description (include quantity if applicable). Implements effective services with a focus on rehabilitation and accountability versus deterrence-based sanctions. This includes skills building groups, Restorative Justice programs, community service and mentoring to name a few.</p>
<p>Indicate whether: <input type="checkbox"/> New service/purchase <input checked="" type="checkbox"/> Existing service/purchase <input type="checkbox"/> Replacement for an existing service/purchase (provide details in Service/Item Description section above)</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3): 80% of YOUTH served during the AGREEMENT period will successfully complete the program without referral to the COURT for official COURT processing. 80% of YOUTH referred will be engaged in and complete services with no new charges.</p>

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

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address: City of Bedford	Owner, executive director, other (specify): Penny Jarrell (Programmatic Contact)
165 Center Road Bedford, Ohio 44146	
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	City of Bedford

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. Government Purchase *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) Government Purchase <input type="checkbox"/> Other Procurement Method, please describe:

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

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 100 % Health and Human Services Levy
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. JC280105-55130
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: Issues with providing insurance requirements	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	09/13/2024
Date documents were requested from vendor:	09/20/2024
Date of insurance approval from risk manager:	01/29/2025
Date Department of Law approved Contract:	09/19/2024
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)	
Have payments been made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions): see chart above

BC2025-106 b)

Title	CCJC 25-26 Community Diversion Program contract with the City of Fairview Park
Department or Agency Name	Cuyahoga County Juvenile Court

<input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Government Purchase *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) Government Purchase <input type="checkbox"/> Other Procurement Method, please describe:

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

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 100 % Health and Human Services Levy
Is funding for this included in the approved budget? <input 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. JC280105-55130
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: The vendor turned in their documents late.	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	09/13/2024
Date documents were requested from vendor:	09/20/2024
Date of insurance approval from risk manager:	01/23/2025
Date Department of Law approved Contract:	09/19/2024
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): see chart above

BC2025-107

Title	CCJC 2025 Drug Screening and Testing Services with Cordant Health Solutions
Department or Agency Name	Cuyahoga County Juvenile Court
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	5130	Cordant Health Solutions	01/01/2025-12/31/2025	\$40,000.00	Pending	Pending

Service/Item Description (include quantity if applicable). To provide professional and technical services for drug screening and testing services throughout 2025.
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):

The vendor shall provide the Court with substance abuse laboratory services, instant on-site screening devices, specimen collection containers, specimen bags with absorbent material, chain of custody forms and labels, security seals, temperature strips, and pre-paid mailing boxes.

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: Cordant Health Solutions	Owner, executive director, other (specify): Jennifer Camp Senior Account Executive
5604 Fortune Circle South Dr. Indianapolis, Indiana 46241	
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. Our previous contract with other vendors expired, so we needed a vendor to use until an RFP can be done. *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. 100% Health & Human Services Levy
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit. JC280105-55040
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: Contract redlines and understaffing in Legal.	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	08/23/2024
Date documents were requested from vendor:	12/02/2024
Date of insurance approval from risk manager:	1/23/2025
Date Department of Law approved Contract:	1/10/2025
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 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):

BC2025-108

Title	Security Equipment Service and Repairs
Department or Agency Name	Sheriff's 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):
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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.
	25000336	Integrated Precision Systems	02.18.25 – 12.31.25	\$10,000.00		

Service/Item Description (include quantity if applicable). The purchase order will cover emergency repairs on security equipment that is no longer covered under the contract warranty. The online and or in person Tech support, the after hour calls for service of equipment will be covered as well.

Indicate whether: New service/purchase Existing service/purchase Replacement for an existing service/purchase (provide details in Service/Item Description section above): The service call could lead to replacement of equipment if the item is not repairable.

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

Project Goals, Outcomes or Purpose (list 3): N/A

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

Vendor Name and address:	Owner, executive director, other (specify):
Integrated Precision Systems(IPS) 8555 Sweet Valley Drive, Suite B Valley View, Ohio 44125	Rob Jackson, President
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. Integrated Precision Systems (IPS) has an equipment maintenance contract with Cuyahoga County for the service of security equipment. Items that are no longer under warranty, but required to be serviced, will be covered under this PO, along with the after hour service calls and tech support.

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

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 100% General Fund
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit. SH 745100
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. N/A	
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):

BC2025-109

Title	Sheriff Department Firearms
Department or Agency Name	Sheriff
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.
	25000532 STAC	Vance Outdoors, Inc.		\$12,855.00		

Service/Item Description (include quantity if applicable).
 Sheriff's Department is requesting to purchase firearms.

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):
Firearms are required equipment for Law Enforcement.

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: Vance Outdoors, Inc 3723 Cleveland Ave Columbus, OH 43224	Owner, executive director, other (specify): Doug Vance, President
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input checked="" type="checkbox"/> State Contract, list STS number and expiration date RS900319 Expires 3/31/2025 <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. Federal Equitable Sharing Account
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 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):

BC2025-110

Title	Guardian Alarm Company
Department or Agency Name	Sheriff's Department

Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue <input type="checkbox"/> Generating <input 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.
O	167 (formerly CE1800494)	Guardian Alarm Company	01/01/2019 – 12/31/2019	\$6,000.00	01/07/2019	BC2019-09
A - #1	167 (formerly CE1800494)	Guardian Alarm Company	01/01/2020 – 12/31/2020	\$3,000.00	01/06/2020	Item of Note #4
A - #2	167 (formerly CE1800494)	Guardian Alarm Company	01/01/2021– 12/31/2021	\$3,000.00	04/05/2021	BC2021-162
A - #3	167 (formerly CE1800494)	Guardian Alarm Company	01/01/22 – 12/31/24	\$12,000.00	11/08/2021	BC2021-641
A - #4	167 (formerly CE1800494)	Guardian Alarm Company	01/01/25 – 12/31/26	\$9,000.00	Pending	Pending

<p>Service/Item Description (include quantity if applicable). Guardian Alarm provides monitoring services within the various buildings located within Cuyahoga County.</p>
<p>Indicate whether: <input type="checkbox"/> New service/purchase <input checked="" type="checkbox"/> Existing service/purchase <input type="checkbox"/> Replacement for an existing service/purchase (provide details in Service/Item Description section above)</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3): N/A</p>

<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)</p>	
<p>Vendor Name and address: Guardian Alarm Company 20800 Southfield Road Southfield, MI 48075</p>	<p>Owner, executive director, other (specify): Lori Sokolovic Accounts Receivable Specialist</p>

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

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. A competitive bid process was not utilized due to the monitoring equipment for Guardian Alarm currently being installed within the buildings, which requires them to monitor those buildings. *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 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. N/A	

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

100% General Fund – Accounting Unit SH745100;55200

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

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

N/A

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

Provide status of project.

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

Reason:

Timeline

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

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

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

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

HISTORY (see instructions): see chart above

BC2025-111

Title	Medical Examiner’s Office request approval of Purchase Order No. 25000568-JCOP in the amount of \$6,408.78 to Fisher Scientific Company LLC as part of the Joint Cooperative Purchasing contract with Omnia Partners. Contract no. 2021002889, for various supplies for Medical Examiner’s DNA Lab.
Department or Agency Name	Medical Examiner’s Office
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/Counc il Approved	Approval No.
O	PO#25000568 -JCOP	Fisher Scientific Company LLC	na	\$6,408.78	pending	pending

Service/Item Description (include quantity if applicable).

Indicate whether: New service/purchase Existing service/purchase Replacement for an existing service/purchase (provide details in Service/Item Description section above) Joint Cooperative Purchase with Fisher Scientific Company LLC through Omnia Partners for general lab supplies – Contact No. 2021002889; provides cost savings and simplified procurement for items not commonly purchased or found through a competitive bid process.

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):
Purchase of Supplies for the Medical Examiner’s DNA Lab.

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):
Fisher Scientific Company LLC 300 Industry Dr Pittsburg, PA 15275	Marc Casper -President & CEO Regina Baker- Sales Representative
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input 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

	list number and expiration date Omnia Partners/Fisher Scientific General Lab Supplies Contract Number: 2021002889 Term: June 15, 2021 through June 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 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. ME100105 / 52300
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 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

BC2025-112

TITLE	Requesting Alternative Procurement for the 2025 Preventative Maintenance Funding Program for the Awarded Municipalities
DEPARTMENT OR AGENCY NAME	Department of Public Works

REQUESTED ACTION	<input checked="" type="checkbox"/> Alternative Procurement <input type="checkbox"/> Amendment to Alternative Procurement
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LIST MOST RECENT/PRIOR ALTERNATIVE PROCUREMENT APPROVALS FOR THIS REQUEST; INCLUDING AMENDMENTS, AS APPLICABLE	DATE BOC APPROVED/COUNCIL'S JOURNAL DATE	APPROVAL NO.
	2/26/2024	BC2024-160
DESCRIPTION/ EXPLANATION OF REQUEST:	Public Works Department requesting to utilize an alternative procurement procedure in order to make payments for the 2025 Preventative Maintenance Program to the awarded Municipalities. This funding program financially assists the 57 Municipalities through awarding monies for material costs associated with preventative/routine maintenance work items on County Roads. The process was as follows:	

	<ul style="list-style-type: none"> • Solicitation letters along with application were sent end of September 2024 • Applications were due end of October 2024 • Selection was made early January 2025 • Award Letters were released late January 2025 <p>The total award amount for the 2025 program is \$4,460,953.76 for the period 1/17/2025 – 9/30/2026.</p> <p>See the attached table for the breakdown of the municipal award amounts for material costs.</p> <p>Note that the Cities of Euclid and Solon did not apply for this year’s program.</p>
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FUNDING SOURCE:	Is funding for this included in the approved budget?
	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (if “no” please explain):
	Please provide the complete, proper name of the funding source (no acronyms). Include percentages of funding if using more than one source.
	Road & Bridge Funds – 100%

D. - Consent Agenda

BC2025-113

(See related items for proposed travel/memberships for the week of 2/18/2025 in Section D above).

BC2025-114

(See related items for proposed purchases for the week of 2/18/2025 in Section D above).

VI – PUBLIC COMMENT

VII – ADJOURNMENT