



**Cuyahoga County Board of Control Agenda
Monday, February 24, - 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 – 2/18/2025

III. – PUBLIC COMMENT

IV. – CONTRACTS AND AWARDS

A. – Tabled Items

B. – New Items for Review

BC2025-115

Department of Public Works, recommending an award on RQ15234 and enter into Purchase Order No. 25000317 with Greve Chrysler, Jeep, Dodge Ram (12-3) in the amount not-to-exceed \$80,880.00 for the purchase of (2) replacement, new, never titled 2025 Dodge Durango Pursuit for the County's Fleet Division.

Funding Source: General Fund

BC2025-116

Fiscal Office on behalf of the County Executive's Office, submitting a Grant Agreement with Northeast Ohio Areawide Coordinating Agency (via Contract No. 5161) in the amount not-to-exceed \$50,000.00 to conduct an Engineering and Feasibility Study for the Cuyahoga Valley Scenic Railroad Extension to spur economic growth in Cuyahoga County effective upon contract signatures of all parties for a period of 1 year.

Funding Source: General Fund – American Rescue Plan Act Revenue Replacement (ARPA)/Provision of Government Services

BC2025-117

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 \$126,046.00 for a state contract purchase of (62) HP ZBook Firefly mobile workstations, each to include HP Care Pack Absolute Control for Education (5 year warranty), HP Care Pack Premium Onsite Support (4 year warranty), docking stations for the Public Defender's Office.
- b) Recommending an award on Purchase Order No. 25000668 to MNJ Technologies Direct, Inc. in the amount not-to-exceed \$126,046.00 for a state contract purchase of (62) HP ZBook Firefly mobile workstations, each to include HP Care Pack Absolute Control for Education (5 year warranty), HP Care Pack Premium Onsite Support (4 year warranty), docking stations for the Public Defender's Office.

Funding Source: General Fund (with anticipated 85% reimbursement from Ohio Public Defender)

BC2025-118

Court of Common Pleas/Juvenile Court Division, submitting a grant award from Ohio Department of Youth Services in the amount of \$95,150.00 for implementing the Credible Messenger Mentoring Movement program in connection with FY2025 Competitive RECLAIM Grant.

Funding Source: RECLAIM Grant

BC2025-119

County Prosecutor,

- a) Submitting an RFP exemption, which will result in an award recommendation to Magnet Forensics, LLC in the amount not-to-exceed \$163,170.00 for the purchase of 2 additional units of GrayKey Software Licenses to unlock and decrypt data in mobile devices for the period 2/24/2025 – 12/22/2027 for use by the Internet Crimes Against Children Task Force.
- b) Recommending an award on Purchase Order No. 25000253 recommendation to Magnet Forensics, LLC in the amount not-to-exceed \$163,170.00 for the purchase of 2 additional units of GrayKey Software Licenses to unlock and decrypt data in mobile devices for the period 2/24/2025 – 12/22/2027 for use by the Internet Crimes Against Children Task Force.

Funding Source: Ohio Attorney General Grant Award

BC2025-120

County Prosecutor,

- a) Submitting an RFP exemption, which will result in an award recommendation to DataPilot, Inc. in the amount not-to-exceed \$8,790.00 for 1 year renewal of (2) Cyacomb Mobile Triage software licenses and (2) Datapilot software licenses and support for the period 3/7/2025 – 3/6/2026 for the Internet Crimes Against Children.

- b) Recommending an award on Purchase Order No. 25000278 to DataPilot, Inc. in the amount not-to-exceed \$8,790.00 for 1 year renewal of (2) Cyacomb Mobile Triage software licenses and (2) Datapilot software licenses and support for the period 3/7/2025 – 3/6/2026 for the Internet Crimes Against Children.

Funding Source: General Fund

BC2025-121

County Prosecutor,

- a) Submitting an RFP exemption, which will result in an award recommendation to Pen-Link, Ltd. in the amount not-to-exceed \$16,597.77 for the renewal of PLX software licenses, Professional and Search Warrant editions for the period 1/1/2025 – 12/31/2027.
- b) Recommending an award on Purchase Order No. 25000360 to Pen-Link, Ltd. in the amount not-to-exceed \$16,597.77 for the renewal of PLX software licenses, Professional and Search Warrant editions for the period 1/1/2025 – 12/31/2027.

Funding Source: General Fund

BC2025-122

Sheriff's Department,

- a) Submitting an RFP exemption, which will result in an award recommendation to Amico LLC dba United Business Supply in the amount not-to-exceed \$23,460.00 for annual purchase of (1,000) cases clear can liners.
- b) Recommending an award on Purchase Order No. 25000502 to Amico LLC dba United Business Supply in the amount not-to-exceed \$23,460.00 for annual purchase of (1,000) cases clear can liners.

Funding Source: General Fund

BC2025-123

Sheriff's Department,

- a) Submitting an RFP exemption, which will result in an award recommendation to Vasu Communications, Inc. in the amount not-to-exceed \$7,172.06 for a state contract purchase of (2) Kenwood Viking Car Radios and accessories for SWAT Bearcat vehicle.
- b) Recommending an award on Purchase Order No. 25000328 to Vasu Communications, Inc. in the amount not-to-exceed \$7,172.06 for a state contract purchase of (2) Kenwood Viking Car Radios and accessories for SWAT Bearcat vehicle.

Funding Source: Federal Equitable Sharing Account

BC2025-124

Sheriff's Department,

- a) Submitting an RFP exemption, which will result in an award recommendation to LexisNexis, a division of RELX Inc. in the amount not-to-exceed \$8,790.00 for online access to legal materials for inmates in the County Jail for the period 2/1/2025 – 1/31/2026.
- b) Recommending an award on Purchase Order No. 25000351 to LexisNexis, a division of RELX Inc. in the amount not-to-exceed \$8,790.00 for online access to legal materials for inmates in the County Jail for the period 2/1/2025 – 1/31/2026.

Funding Source: General Fund

BC2025-125

Sheriff's Department,

- a) Submitting an RFP exemption, which will result in an award recommendation to ReWorld Solutions, LLC in the amount not-to-exceed \$9,000.00 for incineration of evidence no longer needed for criminal cases.
- b) Recommending an award on Purchase Order No. 25000733 to ReWorld Solutions, LLC in the amount not-to-exceed \$9,000.00 for incineration of evidence no longer needed for criminal cases.

Funding Source: Federal Equitable Sharing Account

BC2025-126

Medical Examiner's Office, submitting an amendment to Contract No. 4294 with Hitachi High-Tech America, Inc. for preventive maintenance services on the Hitachi S-3400N-II PC/VP scanning electron microscope for the period 9/1/2023 – 8/31/2026 to change the time period to 4/1/2024 – 3/31/2027, to change the terms of payments to annually, to acknowledge prior payment of \$16,608.00 is applied to year 1; and to amend Exhibits A-1, A-2 and A-3 scope of services, effective upon signatures of all parties; no additional funds required.

Funding Source: General Fund

BC2025-127

Department of Health and Human Services/Division of Senior and Adult Services,

- a) Submitting an RFP exemption, which will result in a payment to Charter Communications Operating, LLC dba Spectrum Reach, LLC in the amount not-to-exceed \$1,938.00 as final payment for invoices for the period 11/25/2024 – 12/29/2024 for targeted, digital display and video advertising services to

promote services available for women ages 35-75 from the Division of Senior and Adult Services rendered on Contract No. 3029 during the contract term 1/1/2023 – 12/31/2024.

- b) Recommending a payment on Purchase Order No. 25000572 to Charter Communications Operating, LLC dba Spectrum Reach, LLC in the amount not-to-exceed \$1,938.00 as final payment for invoices for the period 11/25/2024 – 12/29/2024 for targeted, digital display and video advertising services to promote services available for women ages 35-75 from the Division of Senior and Adult Services rendered on Contract No. 3029 during the contract term 1/1/2023 – 12/31/2024.

Funding Source: Health and Human Services Levy Fund

C. – Consent Agenda

BC2025-128

Department of Purchasing on behalf of the Department of Public Works, declaring various property as surplus County property no longer needed for public use; recommending selling said property via internet auction, in accordance with Ohio Revised Code Section 307.12(E).

Funding Source: Revenue Generating

BC2025-129

Fiscal Department, presenting proposed travel/membership requests for the week of 2/24/2025:

Dept:	Department of Health and Human Services/Community Initiatives Division/Office of Early Childhood							
Event:	Zero to Three Learn Conference							
Source:	Zero to Three							
Location:	Minneapolis, MN							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Shawna Rohrman	3/16/2025 – 3/20/2025	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Health and Human Services Levy

*Paid to host

**Staff reimbursement

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

**** Zero to Three will cover all expenses

- Registration – \$515.00
- Meals - \$240.00

- Lodging – \$821.28
 - Ground TRN/ Mileage - \$188.00
 - Airfare – \$606.97
- Total: \$2,371.25

Purpose:

The Zero to Three conference will be presenting cutting-edge information and research, discussions focused on innovations in the field and a chance to share insights on where this group is heading. Also, the opportunity to meet and connect with various professionals in the early childhood field. Speakers at the event are some of early childhood's most inspiring thinkers, leaders, researchers and doers.

BC2025-130

Department of Purchasing, presenting proposed purchases for the week of 2/24/2025:

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
25000605	(37,440) U.S. Flags for Veterans Service Commission	Department of Public Works	Bridge Associates LLC dba U.S. Flagmaker	\$24,710.40	General Fund
25000683	Various bulk metal parts and services	Department of Public Works	Aztec Steel Corporation	Not-to-exceed \$17,000.00	53% Sanitary Fund, 29% Road and Bridge Fund and 18% General Fund
25000692	Various replacement brushes for the broom vehicle at the County Airport	Department of Public Works	M- B Companies, Inc.	\$8,297.70	General Fund
25000701	Various Freightliner parts	Department of Public Works	Valley Freightliner Trucks dba Cleveland Freightliner, Inc.	Not-to-exceed \$35,000.00	60% Sanitary Fund and 40% Road and Bridge Fund
25000702	Various automotive parts and labor	Department of Public Works	Truck Service, Inc. dba EAB Truck Service	Not-to-exceed \$49,000.00	71% Sanitary Fund, 21% Road and Bridge Fund and 8% General Fund
25000709	(1) New, never titled 2024 Chevrolet Equinox	Department of Public Works	Dave Hallman Chevrolet, Inc.	\$28,995.00	General Fund
25000742	Various replacement auto parts	Department of Public Works	Genuine Parts Co. dba NAPA Auto Parts	Not-to-exceed \$49,000.00	49% Sanitary Fund, 22% Road

					and Bridge Fund and 29% General Fund
25000743	Purchase of various truck parts for the Fleet Division	Department of Public Works	Abel Truck & Automotive Supply	Not-to-exceed \$39,000.00	64% Sanitary Fund, 26% Road and Bridge Fund and 10% General Fund

V- OTHER BUSINESS

Time Sensitive/Mission Critical

BC2025-131

Department of Public Works, recommending an award to Industrial Water Management LLC, dba IWM-USA, LLC. in the amount not to-exceed \$25,000.00 for emergency water management services at the Justice Center.

Funding Source: General Fund

Item of Note (non-voted)

Item No. 1

Department of Public Works, submitting a Subrecipient Agreement with Cuyahoga County Land Reutilization Corporation in the amount of \$6,810,362.00 to set forth responsibilities and obligations of the parties for implementation of the Brownfield Remediation Program for the period 7/4/2023 – 6/30/2025.

Funding Source: Ohio Department of Development

Item No. 2

Department of Public Works/Division of Public Utilities, submitting a grant award from Cleveland Foundation in the amount of \$15,000.00 for engineering services in connection with Cuyahoga Green Energy Behind the Meter Solar - Commercial, Non-profit, Local Government Project for the period 2/1/2025 - 1/31/2026.

Funding Source: The Cleveland Foundation

Item No. 3

Court of Common Pleas/Juvenile Court Division, submitting a grant award from Ohio Department of Youth Services in the amount of \$12,710.03 to create a mural and reduce noise in a trauma informed setting via noise canceling installation in connection with the FY2025 ODYS Behavioral Health Grant.

Funding Source: FY2025 Ohio Department of Youth Services

Item No. 4

Court of Common Pleas/Juvenile Court Division, submitting a Funding Application Update to a grant agreement and funding application to the State of Ohio, Department of Youth Services for various programs in connection with the RECLAIM Ohio Grant for the period 7/1/2023 – 6/30/2025 to make budget line item revisions and to change the amount from \$9,796,596.67 to \$9,767,485.50.

Funding Source: SFY2025 RECLAIM Ohio Grant

Item No. 5

Court of Common Pleas/Juvenile Court Division, submitting a grant award from Ohio Department of Youth Services in the amount of \$75,000.00 for the establishment of Pre-Arrest Support Services (PASS) program in connection with FY2025 Competitive RECLAIM Grant Program.

Funding Source: RECLAIM Grant

Item No. 6

Department of Health and Human Services/Division of Senior and Adult Services, submitting a grant agreement with Western Reserve Area Agency on Aging in the amount of \$204,820.12 for the Older Americans Act/Senior Community Services Program in connection with the Aging and Disability Resource Network Grant Program for the period 1/1/2025 – 12/31/2025.

Funding Source: Western Reserve Area on Aging through the Older Americans Act/Senior Community Services

Item No. 7

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
14045	4685	Advanced Server Management Group, Inc. "ASMGi"	for migration to .gov domain for local government websites	\$0	Department of Public Safety and Justice Services	8/15/2024 – 6/30/2025	(ORIGINAL) 85% FY2021 State Homeland Security Grant Fund and 15% FY2022 Urban	2/18/2025 (Executive) 2/19/2025 (Law)

							Area Security Initiative Grant Fund	
n/a	4968 (formerly Contract Nos. 2941 and 1796)	OhioGuidestone	for educational and vocational support services for Court-referred youth to change the unit rate section from per diem/daily rates: to hourly \$64.92 for 7/1/2024 – 6/30/2025 and \$67.66 for 7/1/2025-6/30/2026	\$0	Court of Common Pleas/Juvenile Court Division	8/1/2021 – 6/30/2026	(ORIGINAL) RECLAIM Grant	2/19/2025 (Executive)

Various Agreements – Processed and executed (no vote required)

Approving Resolution	Public convenience and welfare project description	Total Estimated Project Cost	Total Actual Project Cost	Funding Source	Date of Execution
R2024-0333	Reconstruction of McCracken Road from East 119th Street to East 113 th Street including the intersection with Henry Street in the City of Garfield Heights - Council District 8	\$557,575.00		\$250,000.00 County Road and Bridge Funds \$307,575.00 City of Garfield Heights	2/11/2025

VI – PUBLIC COMMENT

VII – ADJOURNMENT

Minutes

Cuyahoga County Board of Control

Tuesday, February 18, 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 11:02 a.m.

Attending:

Katherine A. Gallagher, Chief of Operations & Community Innovation County Executive Administration
(Alternate for Chris Ronayne, County Executive) attended at 11:13 a.m.

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

Trevor McAleer, County Council (Alternate for Michael Houser)

Councilmember Robert Schleper

II. – REVIEW MINUTES – 2/10/2025

Michael Chambers motioned to approve the minutes from the February 10, 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

BC2025-99

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 1.5 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

Thomas Pavich, Department of Public Works, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2025-99 was approved by unanimous vote.

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

Thomas Pavich, Department of Public Works, presented. There were no questions. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2025-100 was approved by unanimous vote.

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

Thomas Pavich, Department of Public Works, presented. Meredith Turner asked is this working; asked have with had any problems with people getting sick. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2025-101 was approved by unanimous vote.

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

Anthony Stella, Department of Development, presented. Trevor McAleer asked do you have a timeline of when it's going to be completed and ready to go; asked what the anticipated completion date for construction is. Michael Chambers motioned to approve the item; Paul Porter seconded. Item BC2025-102 was approved by unanimous vote.

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

Brianna Witt, Department of Information Technology, presented. There were no questions. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2025-103 was approved by unanimous vote.

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

Brianna Witt, Department of Information Technology, presented. Meredith Turner asked who will be utilizing these workstations; asked is it for City of Cleveland. Presenter will follow up. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2025-104 was approved by unanimous vote.

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

Jennifer Howard, Court of Common Pleas/Juvenile Court Division, presented. There were no questions. Michael Chambers motioned to approve the item; Mellany Seay seconded. Item BC2025-105 was approved by unanimous vote.

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

Jennifer Howard, Court of Common Pleas/Juvenile Court Division, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2025-106 was approved by unanimous vote.

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

Jennifer Howard, Court of Common Pleas/Juvenile Court Division, presented. Robert Schleper commented he is aware this is a temporary solution because we need these services in the immediate; asked in particular why we settled on this provider and how we selected them in this instance. Presenter will follow up. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2025-107 was approved by unanimous vote.

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

Chris Costin, Sheriff's Department, presented. There were no questions. Michael Chambers motioned to approve the item; Paul Porter seconded. Item BC2025-108 was approved by unanimous vote.

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

Chris Costin, Sheriff's Department, presented. There were no questions. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2025-109 was approved by unanimous vote.

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

Chris Costin, Sheriff's Department, presented. There were no questions. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2025-110 was approved by unanimous vote.

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

Hugh Shannon, Medical Examiner's Office, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2025-111 was approved by unanimous vote.

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

Eric Mack, Department of Public Works, presented. Michael Chambers commented for Council Members this is for materials only, correct; Robert Schleper said when we say Alternate Procurement Process is what you described the process or is there something set in stone; Michael Chambers commented we didn't do a formal, I guess you did do a formal communication. Michael Chambers motioned to approve the item; Robert Schleper seconded. Item BC2025-112 was approved by unanimous vote.

D. – Consent Agenda

Trevor McAleer asked on BC2025-113 regarding Sheriff's Department 2025 Policy Conference in Washington, DC why only two employees were charged the registration fees and why the price difference on the other categories. Clerk will follow up with the Sheriff's Department. There were no questions on the remaining Consent Agenda items. Michael Chambers motioned to approve Consent Agenda Item No. BC2025-113 through BC2025-114; Trevor McAleer seconded. The Consent Agenda Items were approved by unanimous vote.

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
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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

*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

There was no public comment.

VII – ADJOURNMENT

Michael Chambers motioned to adjourn; Mellany Seay seconded. The motion to adjourn was unanimously approved at 11:24 a.m.

Item Details as Submitted by Requesting Departments

IV. Contracts and Awards

A. – Tabled Items

B. – New Items for Review

BC2025-115

Title	Public Works: RQ15234, Greve Chrysler, Jeep, Dodge Ram – Two (2) Dodge Durango's
Department or Agency Name	Department of Public Works
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
O	25000317	Greve Chrysler, Jeep, Dodge Ram	N/A	\$80,880.00	Pending	Pending

Service/Item Description (include quantity if applicable). Purchase of Two (2) new Dodge Durango's for the County's Fleet Division.
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) Replacing 2010 Dodge Charger-160,000 miles. Replacing 2007 Chevy Impala - 174,000 miles. They will be sold on Gov/Deals
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of? _____
Project Goals, Outcomes or Purpose (list 3): This purchase will replace two older vehicles with new Durango vehicles which are costing more to maintain.

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):
Greve Chrysler, Jeep, Dodge Ram 756 West Ervin Road Van Wert, OH 45891	Dave Matarese / Sales

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# <u>15234</u> (Insert RQ# for formal/informal items, as applicable) <input checked="" type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input checked="" type="checkbox"/> Formal Closing Date: 11/25/2024	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) 12 / 3	<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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain. If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received? Awarding low bidder Kufleitner - \$85,966 Valley Motor City - \$83,612	<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.	

<p>FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed.</p> <p>General Fund / 100%</p>
<p>Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if “no” please explain):</p>
<p>List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit.</p> <p>PW755105 / 70100</p>
<p>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):</p>

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):

BC2025-116

Title	Fiscal Department / Northeast Ohio Areawide Coordinating Agency / Contract / 1-year contract for a feasibility study to extend the Cuyahoga Valley Scenic Railroad to downtown Cleveland
Department or Agency Name	Fiscal Department on Behalf of the Executive Department
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
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O	5161	Northeast Ohio Areawide Coordinating Agency	1-year from Effective Date	\$50,000.00	Pending	Pending
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Service/Item Description (include quantity if applicable).

This is a 1-year contract with Northeast Ohio Areawide Coordinating Agency to contribute towards a feasibility study to extend the Cuyahoga Valley Scenic Railroad to downtown Cleveland in the amount of \$50,000.00.

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

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

Project Goals, Outcomes or Purpose (list 3):

- economic impact analysis and feasible stop locations
- operational service plan and operational cost estimate
- construction cost estimate and construction funding sources

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):
Northeast Ohio Areawide Coordinating Agency 1299 Superior Avenue E. Cleveland, OH 44114	Linda Burt Director of Administrative Services
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. This grant agreement is an initiative of the Executive Office. *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% General Fund – American Rescue Plan Act Revenue Replacement (ARPA)/Provision of Government Services
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. FS100500 FS-21-ARP-LFRF
Payment Schedule: <input type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.
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):

BC2025-117

Title	Department of Information Technology
Department or Agency Name	Sixty-Two Mobile Workstations for the County Public Defender
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.
	25000668 STAC	MNJ Technologies Direct, Inc.		\$126,046.00	PNDING	PENDING

Service/Item Description (include quantity if applicable). The Department of Information Technology plans to contract with MNJ Technologies Direct, Inc., for Sixty-Two Laptops for the County Public Defender in the amount of \$126,046.00.
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 checked="" type="checkbox"/> Replacement Age of items being replaced: Unknown How will replaced items be disposed of? Per ORC
Project Goals, Outcomes or Purpose (list 3): The County Public Defender has requested standard laptops to be used by County Public Defender staff as part of their DoIT-approved computer refresh. Qty. 62 HP ZBook Firefly Mobile Workstations Qty. 62 HP Carepack Absolute Data Control Qty. 62 HP Carepack Warranty

Qty. 62 HP USB-C Docking Stations

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
MNJ Technologies Direct, Inc. 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 Ohio state term schedule pricing. *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input checked="" type="checkbox"/> State Contract, list STS number and expiration date STS #534486 expires on 07/28/2028 <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain. If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment - (list original procurement) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input 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 PD100100
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 type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
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):

BC2025-118

TITLE	ACCEPTANCE OF ODYS COMPETITIVE RECLAIM GRANT
DEPARTMENT OR AGENCY NAME	CUYAHOGA COUNTY COURT OF COMMON PLEAS, JUVENILE COURT

<p>REQUESTED ACTION – PLEASE CHECK ALL THAT IS APPLICABLE</p> <p>*PLEASE INCLUDE SUPPORTING DOCUMENTS AS ATTACHMENTS TO THE SUBMISSION IN ONBASE.</p>	<p><input type="checkbox"/> Authority to Apply (for grants with Cash Match and/or Subrecipients).</p> <p><input type="checkbox"/> Grant Application (for grants with no Cash Match or Subrecipients).</p> <p style="padding-left: 20px;">➤ Is County Executive signature required <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Grant Agreement (when the signature of the County Executive is required).</p> <p><input type="checkbox"/> Grant Award (when the signature of the County Executive is not required).</p> <p><input type="checkbox"/> Grant Amendments</p> <p><input type="checkbox"/> Pre-Award Conditions Forms</p>
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GRANT CURRENT/HISTORICAL INFO	NAME OF GRANT	TIME PERIOD	AMOUNT	PREVIOUS APPROVAL (PLEASE PROVIDE BOC MEETING DATE)	APPROVAL NO.
ORIGINAL (O)	N/A				
DESCRIPTION/EXPLANATION OF THE GRANT:	Approval of \$95,150.00 in grant funding for training and assistance with implementing the Credible Messenger Mentoring Movement (CM3) program. This program model will provide training to selected, invested community members committed to reducing recidivism and youth violence by providing mentorship and support.				
PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):	<ul style="list-style-type: none"> ▪ Using personally lived experiences to foster trust and establish support for youth involved in the justice process ▪ Providing supportive relationships using various methods falling under the CM3 model ▪ Establishing trusting relationships that will navigate youth from gun violence and other delinquent behavior 				

GRANT SUBRECIPIENTS – ARE THERE ANY SUBRECIPIENTS THAT ARE WRITTEN INTO THE GRANT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
SUBRECIPIENT'S NAME AND ADDRESS:	Project LIFT Services 19612 Gladstone Road Beachwood, OH 44122
CONTRACTOR/VENDOR	LaToya Logan, Owner
SUBRECIPIENT'S COUNCIL DISTRICT:	9
DOLLAR AMOUNT ALLOCATED:	\$95,150.00

PROJECT COUNCIL DISTRICT:	7
ADDRESS IMPACTED BY GRANT/PROJECT	Cuyahoga County Court of Common Pleas, Juvenile Court Division 9300 Quincy Avenue Cleveland, OH 44106

FUNDING SOURCE:	Please provide the complete, proper name of the funding source (no acronyms) for receipt of this grant.
	RECLAIM GRANT FUND
	Does this require a Cash Match by the County? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

BC2025-119

Title	Prosecutor's Request for PO#25000253 EXMT for GrayKey 3-yr license with Magnet Forensics for \$163,170.00
Department or Agency Name	County Prosecutor'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/Council Approved	Approval No.
0	25000253 EXMT	Magnet Forensics	02-24-2025 – 12-22-2027	\$163,170.00	pending	pending

Service/Item Description (include quantity if applicable).

The purchase is for a 3-yr forensic software license bundle that allows for forensic decryption of Apple iOS mobile devices which need to be unlocked to extract electronic data which is analyzed and used as evidence in internet crimes. The Prosecutor's Office renewed their license bundle that expired December 23, 2024. However, when Grayshift was bought out by Magnet Forensics last year, there was a miscommunication about the number of licenses in the software bundle the Prosecutor's Office had. Only 2 of the 4 units were renewed in 2024 under PO #24003569 EXMT. We are now requesting to purchase the remaining 2 units that were not included in the renewal. These licenses will coincide with the prior 2024 purchase to expire on the same date and be renewed all together at the end of the 3-year term.

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 tool is unique to access encrypted/locked mobile devices to extract evidence in aid of prosecution.

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):
Magnet Forensics, LLC 931 Monroe Drive NE, Suite A 102-340 Atlanta, GA 30308	Amber Soukup, Renewals Manager
Vendor Council District:	Project Council District:

If applicable provide the full address or list the municipality(ies) impacted by the project.	N/A
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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. Exemption used because items is a renewal *See Justification for additional information.
The total value of the solicitation: _____	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain. If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment - (list original procurement)
	<input type="checkbox"/> Other Procurement Method, please describe:

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

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 100% by Ohio Attorney General Grant Award #PR763631352100 for Prosecutor's ICAC Unit
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: ☒ 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: 4 software units were purchased from Grayshift in 2021 under PO #21004207 EXMT. Magnet Forensics purchased Grayshift and its products in 2024. When our 3year license renewal came due in 2024, there was an error in the amount of bundled units to be renewed. Only 2 units of the original 4 were quoted for renewal on PO#24003569 EXMT. We are now applying to purchase the remaining 2 units that expired on December 23, 2024.

Timeline

Project/Procurement Start Date (date your team started working on this item): January 6, 2025

Date documents were requested from vendor: January 14, 2025

Date of insurance approval from risk manager: N/A

Date Department of Law approved Contract: N/A

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) expired licenses have been extended

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.
	PO 24003569 EXMT	Magnet Forensics	12/23/2024 – 12/22/2027	\$163,170.00 (for 2 units)	9-30-2024	BC2024-706
	PO 21004207 EXMT	Grayshift, LLC	12/23/2021 - 12/22/2024	\$172,898.00 (for 4 units)	12-13-2021	BC2021-711

BC2025-120

Title	Prosecutor's Request for PO #25000278 EXMT to Renew Annual DataPilot and Cyacomb Licenses	
Department or Agency Name	County Prosecutor'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):
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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.
0	25000278 EXMT	DataPilot	3-07-2025 – 3-06-2026	\$8,790.00	pending	pending

<p>Service/Item Description (include quantity if applicable).</p> <p>The DataPilot is a field triage computer forensic tool that streamlines the digital forensic process of electronic evidence collection in child exploitation investigations. Paired with Cyacomb software, which allows investigators to search for known hash values of suspected child sexual abuse material, investigators can locate this illegal material faster in the field, thus leading to more arrests and child identifications. The tools aid the Ohio Internet Crimes Against Children Task Force in the investigation, detection and prosecution of offenders who use the Internet to entice and exploit minor children.</p>
<p>Indicate whether: <input type="checkbox"/> New service/purchase <input type="checkbox"/> Existing service/purchase <input checked="" type="checkbox"/> Replacement for an existing service/purchase (provide details in Service/Item Description section above)</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p> <p>Age of items being replaced: _____ How will replaced items be disposed of? _____</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p> <p>To aid in the on-scene / field search and seizure of child sexual abuse materials to be used in prosecution of internet crimes.</p>

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
DataPilot 18200 Von Karman Ave., #780, Irvine CA 92612	Taylor Tabrosky Sr. Customer Care Representative
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

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: _____	NON-COMPETITIVE PROCUREMENT Provide a short summary for not using competitive bid process. Renewal of annual software licenses. We wish to have continuity of service with the vendor. *See Justification for additional information.
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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: January 30, 2025
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% County Prosecutor's 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. PS100100
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.
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):						
Explanation for difference in cost from 2024 to 2025: The \$5,990 line item is an upgrade of the existing hardware. We have been using outdated Palm Pilot-like devices since DataPilot came out with these and they now have a tablet model that offers faster processing power and speed in the field. This is a one-time cost. We are also adding a Cyacomb license to one of the units which is the other \$1,400 line item. The 2026 renewal would fall back in line with last year's cost for the license renewals.						
Prior Original (O) and subsequent Amendments (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
0	24000603 QUOT	DataPilot, Inc.	3-07-2024 – 3-06-2025	3,390.00 (combined)	N/A	N/A
0	23001255 EXMT	DataPilot, Inc.	3-07-2023 – 3-06-2024	1,990.00	N/A	N/A
0	23001252 EXMT	Cyacomb, Inc.	3-07-2023 – 3-06-2024	1,990.00	N/A	N/A

BC2025-121

Title	Prosecutor's Request for PO #25000360 EXMT for (2) PLX License Renewals for 3 years from Pen-Link	
Department or Agency Name	County Prosecutor'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/Council Approved	Approval No.
0	25000360 EXMT	Pen-Link, Ltd.	1-01-2025 – 12-31-2027	\$16,597.77	pending	pending

<p>Service/Item Description (include quantity if applicable).</p> <p>One 3-year subscription renewal of PenLink Academy Training (\$3,048.57) along with 3 years of maintenance and support (\$13,549.20) for the following:</p> <p>2 licenses for PLX Software – Professional edition (phone) to autoloading, analyze, and map CDRs, cell tower data, and cell phone forensics data;</p> <p>2 licenses for PLX Software Search Warrant Edition to be combined with professional or intercept edition (telephone)</p> <p>Add-on: Pen-Proxy for PLX Software license – Professional Edition (Telephone)</p> <p>Add-on: Cell Phone Forensics for PLX Software license -Professional Edition (Telephone).</p> <p>Training for four individuals</p>
<p>Indicate whether: <input type="checkbox"/> New service/purchase <input type="checkbox"/> Existing service/purchase <input checked="" type="checkbox"/> Replacement for an existing service/purchase (provide details in Service/Item Description section above)</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p> <p>Age of items being replaced: _____ How will replaced items be disposed of? _____</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p> <p>The PenLink system will greatly enhance the Prosecutor's Crime Strategies Unit's ability to collect and analyze electronic communications intelligence across the entire range of communications options used to support the criminal activities and enterprises that we investigate, including various means hosted by today's extensive social networks.</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):
Pen-Link, Ltd. 5944 Vandervoort Drive, Lincoln, NE 68516	Chet Anthony Inside 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
<p>RQ# _____ (Insert RQ# for formal/informal items, as applicable)</p> <p><input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ</p> <p><input type="checkbox"/> Informal</p> <p><input type="checkbox"/> Formal Closing Date: _____</p>	<p>Provide a short summary for not using competitive bid process.</p> <p> </p> <p>*See Justification for additional information.</p>
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date

	<input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain. If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment - (list original procurement)
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input 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: January 30, 2025
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% County Prosecutor's 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. PS100100
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.
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: Expiration occurred during the last month of the year when procurement was closed

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

HISTORY (see instructions):						
Prior Original (O) and subsequent Amendments (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
0	22000111 SOLC	Pen-Link Ltd.	12-31-2021 – 12-20-2024	\$26,104.00	12-20-2021	BC2021-749

BC2025-122

Title	Clear Can Liners for Jail Facility
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):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	25000502 -EXMT	United Business Supply	1/1/2025 – 12/31/2025	\$23,460.00		

Service/Item Description (include quantity if applicable). Indicate whether <input checked="" type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase. Item was sent out to bid competitively; however, the lowest vendor was not responding to IG registration requirement. The second lowest bidder is now being awarded the purchase order.
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): n/a	
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
United Business Supply dba Amico LLC dba Parker Supply 4536 Renaissance Pkwy Cleveland, OH 44128-5702	Craig Stout, key principal
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 # if applicable <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input checked="" type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation: \$23,460.00	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) / 38/5	<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. n/a	<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 checked="" type="checkbox"/> No, please explain: Lowest bidder did not meet IG registration requirements; therefore, second lowest bidder has been awarded bid.	<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)
1 st lowest bid - \$16,750.00 2 nd lowest bid - \$23,460.00	<input type="checkbox"/> Other Procurement Method, please describe:

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

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source. 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):
Payment Schedule: <input type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

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

BC2025-123

Title	Kenwood Viking Radios for SWAT Bearcat		
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 Approved/ Council's Journal Date	Approval No.
	25000328 STAC	Vasu Communications, Inc.		\$7,172.06		

Service/Item Description (include quantity if applicable). Indicate whether <input checked="" type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase. Two Kenwood Viking Car Radios for the new SWAT Bearcat.
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 radios are intended to assist in the protection of the community.
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address: Vasu Communications, Inc. 2432 Ridgeland Dr. Avon, OH 44011	Owner, executive director, other (specify): Donna Vasu, 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 # if applicable <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process.

	*See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input checked="" type="checkbox"/> State Contract, list STS number and expiration date 57004-0-1 exp. 6/30/2025 <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.	<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 services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source. 100% 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):	
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.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	

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

HISTORY (see instructions):						
Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	23003127 (fka 23000875)	Vasu Communications, Inc.		\$213,387.75	3/27/2023	BC2023- 179

BC2025-124

Title	Lexis Nexis Inmate Law Library
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):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	25000351 -EXMT	Lexis Nexis		\$8,790.00		

Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input checked="" type="checkbox"/> Existing service or purchase. Lexis Nexis will offer law library solutions for the Cuyahoga County Correction Center that can help reduce risk of inmate litigation while keeping the facility in compliance with specific state mandates. Inmates receive approval by the Judge to use the Law Library via a journal entry.
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): -Provide law library access for Cuyahoga County Inmates -Helps reduce risk of inmate litigation -To be in compliance with specific state mandates
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
Lexis Nexis 230 Park Avenue, Ste 7 New York, NY 10169	Mark Walsh, CEO
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <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. Lexis Nexis has provided this service to our facility for the past 20+ years in some form or another. Within the past 5 years we upgraded to the current system the inmates are now using. *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, <i>please explain</i> .	<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, <i>please explain</i> :	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>)

	<input type="checkbox"/> Other Procurement Method, please describe:
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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. (see approved email from Jeremy Mio)	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 services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source. 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):
Payment Schedule: <input type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: There was a two week delay due to Vendor having to obtain updated insurance requirements. Date of Matrix Request: 1/21/2025 Opened by Law: 1/23/2025 Received Insurance Requirements: 1/27/2025 Uploaded COI: 1/27/2025 Per Law, needed additional insurance requirements: 1/30/2025 --waited on vendor to revise and submit updated COI COI submitted: 2/11/2025 COI approved: 2/11/2025	
Timeline: Project/Procurement Start Date (date your team started working on this item):	1/21/2025
Date documents were requested from vendor:	1/30/2025 requested additional insurance requirements
Date of insurance approval from risk manager:	2/11/2025
Date Department of Law approved Contract:	n/a
Date item was entered and released in Infor:	1/21/2025 and 2/11/2025
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 be made? ☐ No ☐ Yes (if yes, please explain)

HISTORY (see instructions):

BC2025-125

Title	Sheriff's Department Evidence Disposal Not-to-Exceed Purchase Order
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.
	25000733 EXMT	ReWorld Solutions, LLC		\$9,000.00		

Service/Item Description (include quantity if applicable).

Sheriff's Department requests to create a Not-to-Exceed Purchase Order with ReWorld Solutions, LLC to burn evidence,

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):

Dispose of evidence.

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):
ReWorld Solutions, LLC 445 South Street Morristown, NJ 07960	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. *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. 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):

BC2025-126

Title	Medical Examiner's Office requests approval of contract CM#4294 1 st amendment with Hitachi High-Tech America, Inc. for preventative maintenance of Trace Evidence Unit Scanning Electron Microscope. This is a 3-year maintenance agreement, for the corrected period of 4/1/2024 thru 3/31/2027. There are no changes in the funding amounts or source. This item is only to correct the contract dates which were entered incorrectly (9/1/2023 – 8/31/2026) on the initial contract processing and approval BC2024-250 on BOC Approval 4/1/2024.
Department or Agency Name	Medical Examiner's Office
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.
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O	CM#4294	Hitachi High-Tech America, Inc.	09/01/2023-08/31/2026	\$52,392.00	4/1/2024	BC2024-250
A-1 Amendment to correct the Time Period	CM#4294	Hitachi High-Tech America, Inc	4/1/2024 thru 3/31/2027	No Addition	PENDING	PENDING

Service/Item Description (include quantity if applicable).

This agreement covers on-site maintenance to include preventative maintenance, trouble shooting, diagnosis of problems, and repair or replacement of hardware and software components of the scanning electron microscope.

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):

-Need for service, maintenance, diagnose problems, repair or replace hardware software components.

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):
Hitachi High-Tech America, Inc. 1375 N. 28 th Avenue Dallas, TX 75261-2208	Dean Gregson Business Development 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. 1 st Amendment to correct contract term dates. Incorrectly approved in the original processing. No changes to funding or source. *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% General Fund
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. ME100105 / 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 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):

BC2025-127

Title	HHS: Division of Senior and Adult Services 2024 Contract Amendment with Spectrum for Digital Advertising		
Department or Agency Name	Division of Senior and Adult Services		
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):		

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
PO	25000572			\$1,938.00		

<p>Service/Item Description (include quantity if applicable).</p> <p>The services being provided are Digital Display advertising with flights from January through December targeting women 35-75. To include Display Creative and Dashboard capabilities. The anticipated cost not-to-exceed \$23,256.00 from 1/1/2024- 12/31/2024.</p> <p>DSAS has decided to send out an Informal Bid to see if another vendor can provide same service at lower cost. Contract has closed and we need to pay final invoices in the amount of \$1,938.00 from 2024.</p>
<p>Indicate whether: <input type="checkbox"/> New service/purchase <input checked="" type="checkbox"/> Existing service/purchase <input type="checkbox"/> Replacement for an existing service/purchase (provide details in Service/Item Description section above)</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p> <p>Age of items being replaced: N/A How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p> <p>The primary goals of the project are to manage the delivery of target digital advertising designed to promote services available from the Division of Senior and Adult Services.</p>

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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):
Charter Communications dba Spectrum Reach Broadview Heights, OH 44147	Shawn Gibeault, Director (330) 592-6864
Vendor Council District:	Project Council District:
Council District 6	Cuyahoga County-wide
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain. 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.	

<p>FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed.</p> <p>The project is funded 100% by the Cuyahoga County Health and Human Services Levy.</p>
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
<p>List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit.</p> <p>HS260255 55130 UCH09560</p>
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
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:	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	1.28.2025
Date of insurance approval from risk manager:	N/A
Date Department of Law approved Contract:	N/A
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) Trying to pay final invoices from 2024	
Have payments been made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

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

O	3029	Charter Communications Holding LLC dba Spectrum	1/1/2023 – 12/31/2023	\$23,256.00	2/27/2023	BC2023-121
A-1	3029	Charter Communications Holding LLC dba Spectrum	1/1/2024- 12/31/2024	\$23,256.00	1/9/2024	BC2023-766

C. - Consent Agenda

BC2025-128

TITLE	Department of Purchasing Requesting Approval of Surplus Property to be
DEPARTMENT OR AGENCY NAME	Department of Public Works

REQUESTED ACTION	<input type="checkbox"/> Amendment to Approval (BOC or Council) <input checked="" type="checkbox"/> Other action: please describe request approval to sell surplus items (from Department of Public Works) listed on the attached Exhibit "A" via GovDeals auction.
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DESCRIPTION/ EXPLANATION OF REQUEST:	<p>Scope of Work Summary</p> <p>Department of Purchasing, declaring various property as surplus County property no longer needed for public use; recommending selling said property via internet auction, in accordance with Ohio Revised Code Section 307.12(E). via GovDeals Inc. The anticipated start-completion dates will be fifteen days after BOC approval.</p> <p>The primary goal of the project is to sell said property via internet auction, to the highest bidder through GovDeals. The auction surplus list (Exhibit "A") is attached.</p> <p>The project is mandated</p> <p>There is no procurement method for this project. This is a revenue generating project.</p> <p>The items (Exhibit A) will be sold to the highest bidder; 12.5% of the total purchase price will be paid to GovDeals as a Buyer Premium by the Buyer and the department will realize 100% profit of the item sold, in accordance with the GovDeals contract.</p> <p>Project Status and Planning</p> <p>The project reoccurs when County departments have surplus property or seized vehicles no longer needed and recommends selling the property via the internet.</p>
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	<p>The project planning has four (4) phases. Request Executive's approval to list the item on GovDeals; List & Sell to the highest bidder nationwide; Collect payment from GovDeals and transfer asset to Buyer upon confirmation of payment; Deposit the funds into the appropriate County agency fund.</p> <p>There is no cost for this process. The project is a revenue generating project.</p>
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CURRENT/HISTORICAL INFORMATION	DATE BOC APPROVED/ COUNCIL'S JOURNAL DATE	APPROVAL NO.
Similar recent request	10/28/2024	BC2024-787
AMENDMENT (A)	n/a	n/a

EXHIBIT A									
Year	Make	Model	Serial/Vin	Asset #	Condition	Value	Mileage /hrs	Out of Service Reason	
2013	Ford	F-450 Cube Van	1FD0W4GT8DEA86894	S-509	Poor	\$500.00	109,508	Needs \$20,000 engine. Exceeds value of truck	
2008	Ford	F450 Dump Truck	1FDXF46R28EE45554	03-0261	Poor	\$500.00	56,925	Budget replacement. Bed hinges rotted off. Truck in poor cond.	
2011	Ford	Pick-Up F250 Sd	1FTBF2A6XBEB42089	502 YFL	Poor	\$500.00	97,397	Unsafe. Parts obsolete. Airbag module failed.	
1992	International	Snooper 2574 6X4	1HTGGA2T7NA396043	03-0104	Poor	\$5,000.00	41,274	Manlift unsafe. Needs \$20,000 in work. Exceeds Value	
2004	Ford	Econoline	1FTSE34L04HB48799	OD 6586	Poor	\$500.00	102,145	Poor Condition. Unsafe. Exceeds value of repairs	
2005	Dodge	Grand Caravan	1D4GP24R85B166571	OD 5832	Poor	\$500.00	124,000	Poor Condition.	

2003	Ford	F-250	3FTNF20L73MB43698	OD 4511	Poor	\$1,000.00	102,000	Unsafe. Severe Rust. Budget replacement. Poor Condition.
2004	Ford	Econoline	1FBNE31S24HB37767	OD 6353	Poor	\$1,000.00	50,560	Budget replacement. Poor Condition.
2005	Ford	E350	1FBSS31SX5HA22931	OD 7340	Poor	\$1,000.00	62,933	Budget replacement. Poor Condition.
2015	GMC	3500 Pass.Van	1GJZ71FG8F1286513	18- 506	Poor	\$500.00	199,844	Repairs Exceed Value of Vehicle. Poor Condition

BC2025-129

(See related items for proposed travel/memberships for the week of 2/24/2025 in Section C above).

BC2025-130

(See related items for proposed purchases for the week of 2/24/2025 in Section C above).

V – OTHER BUSINESS

Time Sensitive/Mission Critical

BC2025-131

Title	Public Works-TSMC-Water Mgmt. Services for Justice Center-Industrial Water Management, LLC dba IWM-USA, LLC				
Department or Agency Name	Department of Public Works				
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 checked="" type="checkbox"/> Other (please specify): Time Sensitive Mission Critical				

Original (O)/ Amendme nt (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
(O)	PENDING	Industrial Water Management LLC, dba	Upon execution until termination	Not-to-exceed \$25,000.00	PENDING	PENDING

		IWM-USA, LLC				
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Service/Item Description (include quantity if applicable).

Time Sensitive Mission Critical item, Director approved for water management services to be performed at Justice Center facility.

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 mission critical request is for water treatment services at the Justice Center complex.

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 Water Management, LLC, dba IWM-USA, LLC 21 E. State Street Suite 200 Columbus, Ohio 43215	Jim Lark, Healthcare Division Risk Officer
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. Director approved - TSMC *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) _____ / _____	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().

If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	
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)
NA-TSMC	<input checked="" type="checkbox"/> Other Procurement Method, please describe: Mission Critical

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 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. FS100600 55200 CFCTW0000201
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):	2.11.25
Date documents were requested from vendor:	2.11.25
Date of insurance approval from risk manager:	2.10.25
Date Department of Law approved Contract:	PENDING

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):

Item of Note (non-voted)

Item No. 1

TITLE	2025 Public Works is requesting approval and signature of the grant agreement detailed below.
DEPARTMENT OR	DEPARTMENT OF PUBLIC WORKS

<p>REQUESTED ACTION – PLEASE CHECK ALL THAT IS APPLICABLE</p> <p>*PLEASE INCLUDE SUPPORTING DOCUMENTS AS ATTACHMENTS TO THE SUBMISSION IN ONBASE.</p>	<p><input type="checkbox"/> Authority to Apply (for grants with Cash Match and/or Subrecipients).</p> <p><input type="checkbox"/> Grant Application (for grants with no Cash Match or Subrecipients). ➤ Is County Executive signature required <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Grant Agreement (when the signature of the County Executive is required).</p> <p><input type="checkbox"/> Grant Award (when the signature of the County Executive is not required).</p> <p><input type="checkbox"/> Grant Amendments</p> <p><input type="checkbox"/> Pre-Award Conditions Forms (when no signature is required by the County Executive)</p>
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GRANT CURRENT/ HISTORICAL INFO	NAME OF GRANT	TIME PERIOD	AMOUNT	PREVIOUS APPROVAL (PLEASE PROVIDE BOC MEETING DATE)	APPROVAL NO.
ORIGINAL (O)	OHIO DEPARTMENT OF DEVELOPMENT BROWNFIELD REMEDIAION PROGRAM SUBRECIPIENT AGREEMENT	7/4/2023- 6/30/2025	\$6,810,362.00	pending	pending
AMENDMENT (A-1)					
AMENDMENT (A-)					
DESCRIPTION/ EXPLANATION OF THE GRANT:	ABATEMENT AND DEMOLITION OF THE 205,481 SF OLD JUVENILE JUSTICE CENTER LOCATED AT 2163 CEDAR AVE, CLEVELAND, OH, FOR COMMUNITY BENEFITS IN PARTNERSHIP WITH STATE OF OHIO DEPT OF TRANSPORTATION, CITY OF CLEVELAND, AND THE CAMPUS DISTRICT.				
	COMPLETE REMAINING BUILDING ABATEMENT				

PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):	DEMOLISH FACILITY
	RESTORE PROPERTY FOR TRANSPORTATION AND FUTURE DEVELOPMENT

GRANT SUBRECIPIENTS – ARE THERE ANY SUBRECIPIENTS THAT ARE WRITTEN INTO THE GRANT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF ANSWERED YES, PLEASE COMPLETE THE BOXES BELOW AS IT PERTAINS TO THE SUBRECIPIENT. FOR MULTIPLE SUBRECIPIENTS, PLEASE COPY THIS SECTION AND COMPLETE FOR EACH SUBRECIPIENT.	
SUBRECIPIENT'S NAME AND ADDRESS:	CUYAHOGA COUNTY IS THE SUBRECEPIENT (CC LAND REUTILIZATION CORP IS THE GRANTEE TO THE STATE GRANT).
LIST THE (OWNERS, EXECUTIVE DIRECTOR, OTHER(specify) FOR THE CONTRACTOR/VENDOR	Chris Ronayne
SUBRECIPIENT'S COUNCIL DISTRICT:	7
DOLLAR AMOUNT ALLOCATED:	

PROJECT COUNCIL DISTRICT:	8
PROVIDE FULL ADDRESS/LIST MUNICIPALITY(IES) IMPACTED BY GRANT/PROJECT, IF APPLICABLE.	2163 CEDAR AVE, CLEVELAND, OH

FUNDING SOURCE:	Please provide the complete, proper name of the funding source (no acronyms) for receipt of this grant.
	STATE OF OHIO DEPARTMENT OF DEVELOPMENT BROWNFIELD REMEDIATION PROGRAM; GENERAL FUND RESERVE PROJECT APPROPRIATION CFJJC0001301
	Does this require a Cash Match by the County? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
	If yes, how much is required for the Cash Match by the County? Also, please provide the complete, proper name of the County funding source (no acronyms) that will be used for the Cash Match. Include percentages of funding if using more than one County funding source for the Cash Match.
	\$4,698,455.39 OF WHICH \$4,428,455.39 IS ALREADY EXPENDED BY COUNCIL APPROVED PROJECT 40261 – OLD JUVENILE COURT SAFETY & SECURITY HARDENING. \$270,000 MATCH REMAINS TO BE EXPENDED FROM THE CURRENT CONTRACT ENCUMBRANCE (ALREADY APPROPRIATED).

Item No. 2

TITLE	Cuyahoga Green Energy (CGE) Behind the Meter Solar Grant
DEPARTMENT OR	Department of Public Works/Division of Public Utilities

REQUESTED ACTION – PLEASE CHECK ALL THAT IS APPLICABLE	<input type="checkbox"/> Authority to Apply (for grants with Cash Match and/or Subrecipients).
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<p>*PLEASE INCLUDE SUPPORTING DOCUMENTS AS ATTACHMENTS TO THE SUBMISSION IN ONBASE.</p>	<p><input checked="" type="checkbox"/> Grant Application <i>(for grants with no Cash Match or Subrecipients).</i></p> <p style="padding-left: 20px;">➤ <i>Is County Executive signature required</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Grant Agreement <i>(when the signature of the County Executive is required).</i></p> <p><input checked="" type="checkbox"/> Grant Award <i>(when the signature of the County Executive is not required).</i></p> <p><input type="checkbox"/> Grant Amendments</p> <p><input type="checkbox"/> Pre-Award Conditions Forms <i>(when no signature is required by the County Executive)</i></p>
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GRANT CURRENT/HISTORICAL INFO	NAME OF GRANT	TIME PERIOD	AMOUNT	PREVIOUS APPROVAL (PLEASE PROVIDE BOC MEETING DATE)	APPROVAL NO.
ORIGINAL (O)	Cuyahoga Green Energy Behind the Meter Solar Grant	2/1/25-1/31/26	\$15,000	PENDING	PENDING
AMENDMENT (A-1)					
AMENDMENT (A-)					
DESCRIPTION/ EXPLANATION OF THE GRANT:	The “Behind the Meter” program will provide customers with solar panels (and battery storage, if desired) either through direct ownership or through third party ownership (with a power purchase agreement).				
PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):	Hire an engineering firm to assess and define individual specifications needed for each customer in terms of solar footprint, array size, roof age and capacity and electrical system capacity.				

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

PROJECT COUNCIL DISTRICT:	
PROVIDE FULL ADDRESS/LIST MUNICIPALITY(IES)	

IMPACTED BY GRANT/PROJECT, IF APPLICABLE.	
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FUNDING SOURCE:	Please provide the complete, proper name of the funding source (no acronyms) for receipt of this grant.
	Cleveland Foundation Grant
	Does this require a Cash Match by the County? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	If yes, how much is required for the Cash Match by the County? Also, please provide the complete, proper name of the County funding source (no acronyms) that will be used for the Cash Match. Include percentages of funding if using more than one County funding source for the Cash Match.

Item No. 3

TITLE	ACCEPTANCE OF ODYS BEHAVIORAL HEALTH GRANT
DEPARTMENT OR AGENCY NAME	CUYAHOGA COUNTY COURT OF COMMON PLEAS, JUVENILE COURT

REQUESTED ACTION – PLEASE CHECK ALL THAT IS APPLICABLE *PLEASE INCLUDE SUPPORTING DOCUMENTS AS ATTACHMENTS TO THE SUBMISSION IN ONBASE.	<input type="checkbox"/> Authority to Apply (for grants with Cash Match and/or Subrecipients). <input type="checkbox"/> Grant Application (for grants with no Cash Match or Subrecipients). ➤ Is County Executive signature required <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Grant Agreement (when the signature of the County Executive is required). <input checked="" type="checkbox"/> Grant Award (when the signature of the County Executive is not required). <input type="checkbox"/> Grant Amendments <input type="checkbox"/> Pre-Award Conditions Forms (when no signature is required by the County Executive)
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GRANT CURRENT/HISTORICAL INFO	NAME OF GRANT	TIME PERIOD	AMOUNT	PREVIOUS APPROVAL	APPROVAL NO.
ORIGINAL (O)	N/A				
DESCRIPTION/EXPLANATION OF THE GRANT:	Approval of \$12,710.03 in grant funding for the completion of 2 projects: <ul style="list-style-type: none"> Creation of a mural displayed on the wall of the Detention Center Installation of noise cancelling materials in the Detention Center 				
PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):	<ul style="list-style-type: none"> Providing necessary and relevant upgrades to the Detention Center Constructively showcasing artistic talent by allowing the youth to collectively express themselves in the creation and painting of a mural Providing a more nurturing setting in treatment of trauma-informed youth by reducing noise factors that may be disruptive 				

GRANT SUBRECIPIENTS – ARE THERE ANY SUBRECIPIENTS THAT ARE WRITTEN INTO THE GRANT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

FUNDING SOURCE:	Please provide the complete, proper name of the funding source (no acronyms) for receipt of this grant.
	GENERAL FUND
	Does this require a Cash Match by the County? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	If yes, how much is required for the Cash Match by the County? Also, please provide the complete, proper name of the County funding source (no acronyms) that will be used for the Cash Match. Include percentages of funding if using more than one County funding source for the Cash Match.

Item No. 4

TITLE	Ohio RECLAIM – Grant Agreement – Amendment to Attachment A
DEPARTMENT OR AGENCY	Cuyahoga County Court of Common Pleas, Juvenile Court Division

REQUESTED ACTION – PLEASE CHECK ALL THAT IS APPLICABLE *PLEASE INCLUDE SUPPORTING DOCUMENTS AS ATTACHMENTS TO THE SUBMISSION IN ONBASE.	<input type="checkbox"/> Authority to Apply (for grants with Cash Match and/or Subrecipients). <input type="checkbox"/> Grant Application (for grants with no Cash Match or Subrecipients). ➤ Is County Executive signature required <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Grant Agreement (when the signature of the County Executive is required). <input type="checkbox"/> Grant Award (when the signature of the County Executive is not required). <input checked="" type="checkbox"/> Grant Amendment <input type="checkbox"/> Pre-Award Conditions Forms (when no signature is required by the County Executive)
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GRANT CURRENT/ HISTORICAL INFO	NAME OF GRANT	TIME PERIOD	AMOUNT	PREVIOUS APPROVAL	APPROVAL NO.
ORIGINAL (O)	RECLAIM Ohio	7/1/23 – 6/30/25	\$10,551,597.54	6/20/2023	CON2023-68
AMENDMENT (A-1)	RECLAIM Ohio	7/1/23 – 6/30/25	\$10,482,877.44	1/29/2024	CON2024-12
AMENDMENT (A-2)	RECLAIM Ohio	7/1/23 - 6/30/25	\$10,482,877.44	4/9/2024	CON2024-35
AMENDMENT (A-3)	RECLAIM Ohio	7/1/23 – 6/30/25	\$10,482,877.44	6/10/2024	CON2024-57
AMENDMENT (A-4)	RECLAIM Ohio	7/1/23 – 6/30/25	\$9,796,596.67	6/24/2024	CON2024-61
AMENDMENT (A-5)	RECLAIM Ohio	7/1/23 – 6/30/25	\$9,767,485.50	PENDING	PENDING
DESCRIPTION/EXPLANATION OF THE GRANT:		Submitting an amendment to the grant agreement/application for FY2024-2025 RECLAIM Ohio grant provided through Ohio Department of Youth Services for various programs for youth and their families navigating through the justice process by making budget line-item revisions.			

PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):	Provide the Court with the ability to develop/purchase a range of community-based options to meet the needs of each juvenile offender/youth at risk of offending.
	Support various staffing salaries servicing youth and families in the Court process.
	Support the cost of providing ongoing training and consultation to Court staff.

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

FUNDING SOURCE:	Please provide the complete, proper name of the funding source (no acronyms) for receipt of this grant.
	RECLAIM Ohio Grant Fund
	Does this require a Cash Match by the County? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	If yes, how much is required for the Cash Match by the County? Also, please provide the complete, proper name of the County funding source (no acronyms) that will be used for the Cash Match. Include percentages of funding if using more than one County funding source for the Cash Match.

Item No. 5

TITLE	ACCEPTANCE OF ODYS COMPETITIVE RECLAIM GRANT
DEPARTMENT OR AGENCY NAME	CUYAHOGA COUNTY COURT OF COMMON PLEAS, JUVENILE COURT

REQUESTED ACTION – PLEASE CHECK ALL THAT IS APPLICABLE *PLEASE INCLUDE SUPPORTING DOCUMENTS AS ATTACHMENTS TO THE SUBMISSION IN ONBASE.	<input type="checkbox"/> Authority to Apply (for grants with Cash Match and/or Subrecipients). <input type="checkbox"/> Grant Application (for grants with no Cash Match or Subrecipients). ➤ Is County Executive signature required <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Grant Agreement (when the signature of the County Executive is required). <input checked="" type="checkbox"/> Grant Award (when the signature of the County Executive is not required). <input type="checkbox"/> Grant Amendments <input type="checkbox"/> Pre-Award Conditions Forms (when no signature is required by the County Executive)
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GRANT CURRENT/HISTORICAL INFO	NAME OF GRANT	TIME PERIOD	AMOUNT	PREVIOUS APPROVAL	APPROVAL NO.
ORIGINAL (O)	N/A				
DESCRIPTION/EXPLANATION OF THE GRANT:	Approval of \$75,000.00 in grant funding for the establishment of Pre-Arrest Support Services (PASS) program. This program will allow law enforcement in lieu of filing an office complaint refer youth and families to services to address underlying needs contributing to delinquent behavior at the earliest point, eliminating contact with the youth justice system				
PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):	<ul style="list-style-type: none"> ▪ Increase diversion options available for law enforcement dealing with youth delinquency. ▪ PASS Specialist will make contact within 48 business hours to complete assessment with youth and parent/guardian to determine family needs. 				

	<ul style="list-style-type: none"> PASS Specialist will coordinate various service needs to ensure youth and family's needs are met.
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GRANT SUBRECIPIENTS – ARE THERE ANY SUBRECIPIENTS THAT ARE WRITTEN INTO THE GRANT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

FUNDING SOURCE:	Please provide the complete, proper name of the funding source (no acronyms) for receipt of this grant.
	RECLAIM GRANT FUND
	Does this require a Cash Match by the County? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	If yes, how much is required for the Cash Match by the County? Also, please provide the complete, proper name of the County funding source (no acronyms) that will be used for the Cash Match. Include percentages of funding if using more than one County funding source for the Cash Match.

Item No. 6

TITLE	Health and Human Services-2025- Western Reserve Area Agency on Aging-
DEPARTMENT OR AGENCY NAME	Division of Senior and Adult Services

<p>REQUESTED ACTION – PLEASE CHECK ALL THAT IS APPLICABLE</p> <p>*PLEASE INCLUDE SUPPORTING DOCUMENTS AS ATTACHMENTS TO THE SUBMISSION IN ONBASE.</p>	<input type="checkbox"/> Authority to Apply (for grants with Cash Match and/or Subrecipients). <input type="checkbox"/> Grant Application (for grants with no Cash Match or Subrecipients). ➤ Is County Executive signature required <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Grant Agreement (when the signature of the County Executive is required). <input type="checkbox"/> Grant Award (when the signature of the County Executive is not required). <input checked="" type="checkbox"/> Grant Amendments <input type="checkbox"/> Pre-Award Conditions Forms (when no signature is required by the County Executive)
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GRANT CURRENT/HISTORICAL INFO	NAME OF GRANT	TIME PERIOD	AMOUNT	PREVIOUS APPROVAL (PLEASE PROVIDE BOC MEETING DATE)	APPROVAL NO.
ORIGINAL (O)	Western Reserve Area Agency	1/1/2023-12/31/2023	\$204,820.12	BC2019-720	9/30/2019
AMENDMENT (A-1)	Western Reserve Area Agency	1/1/2023-12/31/2024	\$204,820.12	CON2024-07	1/9/2024
AMENDMENT (A-)	Western Reserve Area Agency	1/1/2023-12/31/2025	\$204,820.12	Pending	Pending

DESCRIPTION/ EXPLANATION OF THE GRANT:	These funds support a range of services to assist older adults and support family caregivers.
PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):	Connect seniors and individuals with disabilities with available benefits such as medical insurance or utility discount plans.
	Coordinate services and individuals with disabilities to assist them with a variety help.

GRANT SUBRECIPIENTS – ARE THERE ANY SUBRECIPIENTS THAT ARE WRITTEN INTO THE GRANT <input type="checkbox"/> YES <input type="checkbox"/> NO	
IF ANSWERED YES, PLEASE COMPLETE THE BOXES BELOW AS IT PERTAINS TO THE SUBRECIPIENT. FOR MULTIPLE SUBRECIPIENTS, PLEASE COPY THIS SECTION AND COMPLETE FOR EACH SUBRECIPIENT.	
SUBRECIPIENT'S NAME AND ADDRESS:	
LIST THE (OWNERS, EXECUTIVE DIRECTOR, OTHER(specify) FOR THE CONTRACTOR/VENDOR	E. Douglas Beach, Ph. D. Western Reserve Area Agency on Aging 1700 East 13 th Street Suite 114 Cleveland, OH 44106
SUBRECIPIENT'S COUNCIL DISTRICT:	District 7
DOLLAR AMOUNT ALLOCATED:	

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

FUNDING SOURCE:	Please provide the complete, proper name of the funding source (no acronyms) for receipt of this grant.
	Grant funded by Western Reserve Area on Aging through the Older Americans Act/Senior Community Services
	Does this require a Cash Match by the County? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	If yes, how much is required for the Cash Match by the County? Also, please provide the complete, proper name of the County funding source (no acronyms) that will be used for the Cash Match. Include percentages of funding if using more than one County funding source for the Cash Match.

Item No. 7

(See related list of Contracts \$0.00 - \$4,999.99 and Various Agreements – Processed and executed (no vote required) for the week of 2/24/2025 in Section V. above).

VI – PUBLIC COMMENT**VII – ADJOURNMENT**