



**Cuyahoga County Board of Control Agenda
Monday, July 28, 2025 - 11:00 A.M.
County Headquarters
2079 East Ninth Street
4th Floor, Committee Room B**

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

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

I – CALL TO ORDER

II. – REVIEW MINUTES – 7/21/2025

III. – PUBLIC COMMENT

IV. – CONTRACTS AND AWARDS

A. – Tabled Items

B. – New Items for Review

BC2025-478

Department of Public Works, recommending an award on RQ15760 and enter into Contract No. 5495 with Tri Mor Corporation (5-3) in the amount not-to-exceed \$328,815.00 for the Cuyahoga County Airport Pavement Rehabilitation Apron Slab Replacement Phase III Project effective upon signatures of all parties through project completion.

Funding Source: 95% Ohio Department of Transportation, Office of Aviation and 5% General Fund

BC2025-479

Department of Information Technology, recommending an award on Purchase Order No. 25002658 with Integrated Precision Systems in the amount not-to-exceed \$39,660.92 for a state contract purchase of various equipment, installation and programming services, (1) video recording server and (10) surveillance cameras, including licensing and support for the Virgil E. Brown Building.

Funding Source: 50% Health and Human Services Levy and 50% Federal and State Reimbursement

BC2025-480

Department of Information Technology,

- a) Submitting an RFP exemption, which will result in an award recommendation to Internetwork Expert, LLC dba INE Holdings, LLC in the amount not-to-exceed \$29,970.00 for the purchase of (30) Business Plan Enterprise Training Platform Subscriptions for the period 10/29/2025 – 10/28/2026.
- b) Recommending an award on Purchase Order No. 25002701 to Internetwork Expert, LLC dba INE Holdings, LLC in the amount not-to-exceed \$29,970.00 for the purchase of (30) Business Plan Enterprise Training Platform Subscriptions for the period 10/29/2025 – 10/28/2026.

Funding Source: General Fund

BC2025-481

Department of Information Technology, recommending an award on Purchase Order No. 25002808 with MNJ Technologies Direct, Inc. in the amount not-to-exceed \$20,325.00 for a state contract purchase of (1) Meraki MX250 Advanced Security License and Support for the Cleveland Data Center for a period of 5 years, effective Board of Control Meeting.

Funding Source: Capital Improvement Fund

BC2025-482

Court of Common Pleas/Juvenile Court Division, submitting an amendment to Contract No. 5249 (fka Contract Nos. 4021, 4112 and 5128) with Applewood Centers, Inc. for Multisystemic Therapy/ Multisystemic Therapy-Problem Sexual Behavior Services for adjudicated youth for the period 7/1/2023 – 6/30/2025 to extend the time period to 6/30/2026 and for additional funds in the amount not-to-exceed \$52,000.00.

Funding Source: RECLAIM Grant

BC2025-483

County Prosecutor, recommending an award on Purchase Order No. 25002682 with MNJ Technologies Direct, Inc. in the amount not-to-exceed \$23,960.00 for a state contract purchase of (4) HP Z4 G5 Tower Workstations for the Crime Strategies Unit.

Funding Source: U. S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance FY24 Body Worn Camera Policy and Implementation Program Grant

BC2025-484

Medical Examiner's Office, submitting an amendment to Contract No. 5327 with Peak Scientific, Inc. for general and preventative maintenance services for (1) Genius XE Nitrogen Gas Generator for the period 4/6/2025 – 4/5/2028 in the amount not-to-exceed \$55,926.76, effective upon signatures of all parties, to:

a) Change

- 1) the quantity to (3) Genius XE Nitrogen Gas Generators

- 2) the time period to 7/21/2025 – 7/20/2028;
- 3) the amount not-to-exceed to \$61,053.27;

b) replace

Exhibits 1, 2 and 3 with new Exhibits - Exhibits 1-A Quote, 2-A Peaks US Terms and Conditions and 3-A Warranty Statement

Funding Source: General Fund

BC2025-485

Medical Examiner's Office,

- a) Submitting an RFP exemption, which will result in an award recommendation to PerkinElmer U.S. LLC in the amount not-to-exceed \$52,164.00 for onsite preventative maintenance and repair for a Fourier Transform Infrared Spectrometer and components for the period 5/1/2025 – 4/30/2028, effective upon signatures of all parties.
- b) Recommending an award and enter into Contract No. 5169 with PerkinElmer U.S. LLC in the amount not-to-exceed \$52,164.00 for onsite preventative maintenance and repair for a Fourier Transform Infrared Spectrometer and components for the period 5/1/2025 – 4/30/2028, effective upon signatures of all parties.

Funding Source: General Fund

C. – Exemptions

BC2025-486

Sheriff's Department, recommending to amend Board Approval No. BC2024-387, dated 5/20/2024, which amended Board Approval No. BC2023-813 dated 12/11/2023, which approved an alternative procurement process resulting in award recommendations to various providers for routine and emergency veterinary services for the K-9 Unit for the period 1/1/2024 – 12/31/2025, to extend the time period to 12/31/2026, to add vendors, and to change the not-to-exceed amount from \$70,000.00 to \$150,000.00:

a) Current vendors:

- 1) Family Pet Clinic
- 2) Metropolitan Veterinary Hospitals
- 3) MedVet
- 4) VCA Great Lakes Veterinary Specialists
- 5) Westpark Animal Hospital
- 6) Provider(s) to be determined for emergency services at nearest vet clinic

b) Additional vendors:

- 1) Clover Leaf Animal Hospital
- 2) Elyria Animal Hospital
- 3) Excel K9 Services

Funding Source: Commissary (Jail Canines) and Federal Equitable Sharing Account (Law Enforcement-Canines)

D. – Consent Agenda

BC2025-487

Fiscal Department, presenting proposed travel/membership requests for the week of 7/28/2025:

Dept:	Department of Development							
Event:	NACCED Annual Conference							
Source:	National Association for County Community and Economic Development							
Location:	Phoenix, AZ							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Paul Herdeg	9/8/2025 – 9/11/2025	\$600.00	\$113.00	\$510.79	\$104.40	\$442.38	\$1,770.57	General Fund

*Paid to host

**Staff reimbursement

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

Purpose:

National Association for County Community and Economic Development is the economic and community development affiliate of the National Association of Counties (NACO). The Conference includes best practices exchange with peer county economic and community development leaders.

Dept:	Department of Public Safety and Justice Services							
Event:	Debris Management Planning for State, Tribal, Territorial and Local Officials (E0202)							
Source:	FEMA							
Location:	Emmitsburg, MD							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Kevin Friis	9/14/2025 – 9/19/2025	\$0.00	\$426.00	\$0.00	\$552.00	\$0.00	\$978.00	General Fund

*Paid to host

**Staff reimbursement

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

**** Mandatory Meal Package Purchased \$335.00

Purpose:

Department of Public Safety & Justice Services, Office of Emergency Management, requesting authority for Kevin Friis to attend the Debris Management Planning Workshop held by FEMA at the Emergency Management Institute in Emmitsburg, MD. This course will be held 9/15-9/18/2025 and will assist in developing the County's Debris Management Plan. All expenses, excluding lodging and course registration, will be covered by the Office of Emergency Management general operating fund. Lodging and registration are covered by FEMA. IG's opinion attached.

Dept:	Department of Health and Human Services/Community Initiatives Division/Office of Re-entry							
Event:	DOJ 2025 Advanced Financial Management Training Seminar							
Source:	US Department of Justice							
Location:	Washington, DC							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Bobby Shepard	8/5/2025 – 8/8/2025	\$0.00	\$240.00	\$615.69	\$785.90	\$0.00	\$1,641.59	Department of Justice Grant
Wendy Houston-Johnson	8/5/2025 – 8/8/2025	\$0.00	\$240.00	\$615.69	\$802.70	\$0.00	\$1,658.39	Department of Justice Grant

*Paid to host

**Staff reimbursement

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

Purpose:

Our Financial Management Training Seminars are designed for individuals responsible for the financial administration of discretionary and/or formula grants awarded from Federal grant-in-aid programs administered by the Bureaus and Offices of DOJ OJP, including the Bureau of Justice Assistance (BJA); Bureau of Justice Statistics (BJS); National Institute of Justice (NIJ); Office of Juvenile Justice and Delinquency Prevention (OJJDP); Office for Victims of Crime (OVC); and the Sex Offender Sentencing, Monitoring, Apprehending, Registering, and Tracking Office (SMART). Representatives from OJP's Office of the Chief Financial Officer lead our in-person seminars. Office of Justice Programs (OJP) award recipients and members of their organization who meet the criteria for acceptance are invited to attend an Advanced Financial Management Training Seminar. To be eligible for advanced training, award recipients need to have attended an in person Basic Financial Management Training at some point in time or completed the Online Grants Financial Management Training as of the date of registration. The

Advanced Training seminar curriculum covers financial monitoring from preparation to the actual performance of an on-site review. Each 2-day seminar begins at 9:00 a.m. and ends at 4 p.m. Topics to be covered include the following: Types of financial reviews, how grants are selected for financial monitoring, Risk assessment, Preparation process, performing a desk review, Performing an on-site review, Common findings. 100% DOJ Grant BJA FY Second Chance Act.

BC2025-488

Department of Purchasing, presenting proposed purchases for the week of 7/28/2025:

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

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
25002721	(12) Sets of Dive Response Personal Protection Equipment (PPE) for the (4) Regional Dive Rescue Teams	Department of Public Safety and Justice Services	Dive Right In Scuba, Inc.	\$36,589.20	FY2024 Urban Area Security Initiative (UASI)
25002778	(660) Replacement Nerve Agent Antidote kits for Cuyahoga County HazMat Technicians	Department of Public Safety and Justice Services	Henry Schein, Inc	\$54,066.98	FY2023 Urban Area Security Initiative (UASI)
25002873	(36) each P25 Portable Radios, chargers, radio authentication for the City of Bedford Police Department	Department of Public Safety and Justice Services	Cleveland Communications Inc.	\$85,080.60	FY2024 Urban Area Security Initiative (UASI) Grant

V- OTHER BUSINESS

Item of Note (non-voted)

Item No. 1

Fiscal Office, submitting a grant award from the Cleveland Foundation in the total amount of \$192,000.00 for Public Service Fellows for the period 7/1/2025 – 8/31/2026.

Funding Source: Cleveland Foundation

Item No. 2

Sheriff's Department, submitting an amendment to a grant agreement with the U.S. Department of Homeland Security/ Federal Emergency Management Agency through the Ohio Department of Public Safety, Emergency Management Agency for reimbursement of eligible expenses for the Operation Stonegarden Project in connection with the FY2022 State Homeland Security Grant Program for the period

9/1/2022 – 6/30/2025, to extend the time period to 3/31/2026; no additional funds required, effective upon signatures of all parties.

Funding Source: 100% by the U.S. Department of Homeland Security, Federal Emergency Management Agency, Customs and Border Patrol through the Ohio Department of Public Safety (OEMA)

Item No. 3

Contracts up to \$10,000.00 – Processed and executed (no vote required)

RQ No.	Contract Number	Vendor	Service Description	Amount	Department	Date(s) of Service	Funding Source	Date of Execution
14927	5517	Talal Hamed	for café, food, and vending services at the Jane Edna Hunter Building	\$0.00	Department of Public Works	7/1/2025 – 6/30/2028	Revenue Generating	(Executive) 7/18/2025 (Law) 7/21/2025
NA	3937	Let Art Breathe The Lab Inc.	for positive youth development services for Court referred youth with high risk for recidivism	For a decrease of funds in the amount of (\$51,490.10), effective 7/1/2025	Court of Common Pleas/Juvenile Court Division	7/1/2023-6/30/2026	(Original) RECLAIM Grant	(Executive) 7/17/2025
NA	4224	Case Western Reserve University, on behalf of the Begun Center for Violence Prevention, at the Mandel School of Applied Social Sciences	for training and technical assistance to newly contracted, grassroots and community-based organizations in performance data collection and evaluation services in connection with RECLAIM Grant activities	For a decrease of funds in the amount of (\$9,350.00), effective 7/1/2025	Court of Common Pleas/Juvenile Court Division	7/1/2023-6/30/2026	(Original) RECLAIM Grant	(Executive) 7/17/2025
NA	4951	Ohio Guidestone	for high-fidelity wrap around case management services	For a decrease of funds in the amount of (\$10,000.00), effective 7/1/2025	Court of Common Pleas/Juvenile Court Division	7/1/2024 – 6/30/2026	(Original) RECLAIM Grant	(Executive) 7/17/2025
NA	5413	Cleveland State University	for outcome evaluation, training and	\$0.00	Sheriff's Department	6/10/2025 - 9/30/2027	(Original) United States	(Executive) 7/21/2025 (Law)

			technical assistance on how to conduct Risk Terrain Modeling (RTM) and other place-based analyses associated with carjackings; to replace pages 40 and 41 of Exhibit 2 with a new Exhibit titled "Attachment A to Exhibit 2" to correct a clerical error by changing the Federal Indirect Cost Rate from 16% to 48.5% effective upon signatures of all parties.				Department of Justice, Bureau of Justice Assistance Grant	7/22/2025
--	--	--	--	--	--	--	---	-----------

Various Agreements – Processed and executed (no vote required)

Approving Resolution	Public convenience and welfare project description	Total Estimated Project Cost	Total Actual Project Cost	Funding Source	Date of Execution
R2023-0195	Resurfacing of West 140 th Street from Puritas Avenue to Lakewood Heights Boulevard in the City of Cleveland- Council Districts 2 and 3	\$5,872,981.00	\$6,339,580.00	80% Federal (4TA7 funds) \$5,071,664.00 10% County Road and Bridge Funds \$633,958.00 10% City of Cleveland \$633,958.00	(Executive) 7/15/2025
R2024-0333	Resurfacing of Harvard Road from Warrensville Center Road to Northfield Road (south side only) in the Village of Highland Hills – Council District 9	\$150,000.00		\$75,000.00 County Road and Bridge Funds \$75,000.00 Village of Highland Hills	(Executive) 7/16/2025
R2024-0333	Resurfacing of Richmond Road from the Southern Corporation Line to Brush Road in the City of Euclid - Council District 11	\$502,755.00		\$250,000.00 County Road and Bridge Funds \$252,755.00 City of Euclid	(Executive) 7/17/2025
R2024-0333	Resurfacing of Euclid Heights Boulevard from Cedar Road to	\$839,300.00		\$250,000.00 County Road and Bridge Funds	(Executive) 7/17/2025

	Coventry Road in the City of Cleveland Heights- Council District 10			\$589,300.00 City of Cleveland Heights	
--	---	--	--	--	--

VI – PUBLIC COMMENT

VII – ADJOURNMENT

Minutes

Cuyahoga County Board of Control
Monday, July 21, 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 11:06 a.m.

Attending:

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

II. – REVIEW MINUTES – 7/14/2025

Leigh Tucker motioned to approve the minutes from the July 14, 2025, meeting; Meredith Turner seconded. The minutes were approved by unanimous vote, as written.

III. – PUBLIC COMMENT

No public comment.

IV. – CONTRACTS AND AWARDS

A. – Tabled Items

B. – New Items for Review

BC2025-458

Department of Public Works/Division of Public Utilities, submitting an amendment to Contract No. 4502 with JCS Consulting Group Inc. for assistance with strategic and tactical planning services in connection with the Euclid and Brooklyn microgrid design projects for the period 6/4/2024-2/28/2026, for additional funds in the amount not-to-exceed \$30,000.00, effective upon signatures of all parties.

Funding Source: Funding Source: U.S. Department of Energy Grant

Matthew Hrubey, Department of Public Works, presented. There were no questions. Leigh Tucker motioned to approve the item; Meredith Turner seconded. Item BC2025-458 was approved by unanimous vote.

BC2025-459

Department of Public Works, recommending an award and enter into Contract No. 5440 with Clark Anthony Construction, L.L.C (78-1) in the amount not-to-exceed \$200,000.00 for automatic door repairs and preventative maintenance for various County locations, effective upon signatures of all parties for a period of 2 years.

Funding Source: General Fund

Matthew Hrubey, Department of Public Works, presented. There were no questions. Leigh Tucker motioned to approve the item; Meredith Turner seconded. Item BC2025-459 was approved by unanimous vote.

BC2025-460

Department of Public Works/Division of Public Utilities,

- a) Submitting an RFP exemption, which will result in an award recommendation to CEP Renewables OH, LLC in the amount not-to-exceed \$56,150.00 for consultation services to perform certain Geotechnical Engineering Services related to a Harvard Landfill Solar Development Slope Stability Study, effective upon signatures of all parties through project completion.
- b) Recommending an award and enter into Contract No. 5494 with CEP Renewables OH, LLC in the amount not-to-exceed \$56,150.00 for consultation services to perform certain Geotechnical Engineering Services related to a Harvard Landfill Solar Development Slope Stability Study, effective upon signatures of all parties through project completion.

Funding Source: U.S. EPA Climate Pollution Reduction Grant Subaward

Matthew Hrubey, Department of Public Works, presented. Michael Houser asked why this amount was not included in the original contract, wondering if it had been omitted or was simply unknown. Leigh Tucker motioned to approve the item; Paul Porter seconded. Item BC2025-460 was approved by unanimous vote.

BC2025-461

Department of Public Works, recommending an award and enter into Contract No. 5509 with Patriot Industrial Technologies, LTD. (84-3) in the amount not-to-exceed \$150,000.00 for water treatment chemicals and services for boiler and air conditioning equipment at various County buildings, effective 10/1/2025-9/30/2028.

Funding Source: General Fund

Matthew Hrubey, Department of Public Works, presented. There were no questions. Leigh Tucker motioned to approve the item; Meredith Turner seconded. Item BC2025-461 was approved by unanimous vote.

BC2025-462

Department of Information Technology, recommending an award on Purchase Order No. 25002502 with MNJ Technologies Direct, Inc. in the amount not-to-exceed \$287,409.00 for a state contract purchase of (23) Cisco Catalyst Routers, each including Cisco Smart Net Total Care services and related accessories and licenses for use at various County facilities.

Funding Source: Capital Projects Fund

Brianna Witt, Department of Information Technology, presented. There were no questions. Leigh Tucker motioned to approve the item; Robert Schleper seconded. Item BC2025-462 was approved by unanimous vote.

BC2025-463

Department of Public Safety and Justice Services, recommending awards and enter into Agreements and Contracts with various providers for various services in connection with the FY2024 STOP Violence Against Women's Act Block Grant for the period 1/1/2025 – 12/31/2025:

- a) Agreement No. 5384 with City of Cleveland in the amount not-to-exceed \$114,646.43 for the Cleveland Domestic Violence Project, Cleveland Police.
- b) Agreement No. 5385 with City of Cleveland in the amount not-to-exceed \$46,931.54 for the Cleveland Sexual Assault Advocate Project.
- c) Agreement No. 5386 with City of Cleveland in the amount not-to-exceed \$161,577.97 for the Cleveland Domestic Violence Project, Office of Prosecution.
- d) Contract No. 5391 with Cleveland Rape Crisis Center in the amount not-to-exceed \$126,229.42 for the Strengthening Direct Services for Survivors Project.
- e) Contract No. 5393 with Jewish Family Service Association of Cleveland, Ohio in the amount not-to-exceed \$51,100.89 for the Domestic Violence Services Continuation Project.
- f) Contract No. 5394 with Journey Center for Safety and Healing in the amount not-to-exceed \$113,510.05 for the Latina Domestic Violence Project.
- g) Agreement No. 5449 with Cuyahoga County Domestic Relations Court in the amount not-to-exceed \$32,315.60 for the Domestic Violence Enhancement Program.

Funding Source: FY2024 STOP Violence Against Women Act Block Grant

Mary Beth Vaughn, Department of Public Safety and Justice Services, presented. There were no questions. Leigh Tucker motioned to approve the item; Meredith Turner seconded. Item BC2025-463 was approved by unanimous vote.

BC2025-464

Department of Public Safety and Justice Services, submitting a Revenue Generating Agreement (via Contract No. 5514) with City of Lakewood in the amount not-to-exceed \$25,416.00 for reimbursement of related expenses for use of (1) Motorola NG9-1-1 workstation, located at 12650 Detroit Avenue, Lakewood for the period 4/1/2025 – 3/31/2028.

Funding Source: Revenue Generating – revenue will be deposited into Wireless Fund

Mary Beth Vaughn, Department of Public Safety and Justice Services, presented. There were no questions. Leigh Tucker motioned to approve the item; Robert Schleper seconded. Item BC2025-464 was approved by unanimous vote.

BC2025-465

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

- a) Submitting an RFP exemption, which will result in an award recommendation to Downtown Cleveland Alliance in the anticipated amount of \$2,818.79 for outdoor space rental for Family Fun Day held on Gund Foundation Green on Public Square on 8/5/2025 (Rain Date 8/12/2025).
- b) Recommending an award and enter into Contract No. 5493 to Downtown Cleveland Alliance in the anticipated amount of \$2,818.79 for outdoor space rental for Family Fun Day held on Gund Foundation Green on Public Square on 8/5/2025 (Rain Date 8/12/2025).

Funding Source: Health and Human Services Levy Fund

Marcos Cortes, Department of Health and Human Services, presented. Meredith Turner asked what the capacity is; asked do you know how many families we're able to serve. Leigh Tucker motioned to approve the item; Meredith Turner seconded. Item BC2025-465 was approved by unanimous vote.

BC2025-466

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, submitting an amendment to a grant agreement with U.S. Department of Housing and Urban Development for Continuum of Care Coordinated Entry System in connection with FY2024 Continuum of Care Homeless Program Competition grant for the period 2/1/2025 – 1/31/2026, for additional funds in the amount not-to-exceed \$1,000,000.00.

Funding Source: Funding Source: 75% U.S. Department of Housing and Urban Development Continuum of Care Program and 25% Cash Match (Health and Human Services Levy Fund)

Marcos Cortes, Department of Health and Human Services, presented. There were no questions. Leigh Tucker motioned to approve the item; Meredith Turner seconded. Item BC2025-466 was approved by unanimous vote.

BC2025-467

Department of Health and Human Services/Community Initiatives Division/Office of Re-entry,

- a) Submitting an RFP exemption, which will result in an award recommendation to Reach Success Inc. in the amount not-to-exceed \$325,000.00 ~~for research, planning and independent evaluative services of~~ **to support the educational needs of incarcerated individuals who are returning to Cuyahoga County** for the County's Pay for Success Initiative, effective 1/1/2025-12/31/2027.
- b) Recommending an award and enter into Contract No. 5387 with Reach Success Inc. in the amount not-to-exceed \$325,000.00 ~~for research, planning and independent evaluative services of~~ **to support the educational needs of incarcerated individuals who are returning to Cuyahoga County** for the County's Pay for Success Initiative, effective 1/1/2025-12/31/2027.

Funding Source: Federal Bureau of Justice Affairs Grant Funds

Sharonda Mason, Department of Health and Human Services, presented. There were no questions. Leigh Tucker motioned to approve the item as amended; Meredith Turner seconded. Item BC2025-467 was approved by unanimous vote as amended.

BC2025-468

Department of Health and Human Services/Community Initiatives Division/Office of Re-entry

- a) Submitting an RFP exemption, which will result in an award recommendation to Lutheran Metropolitan Ministry in the amount not-to-exceed \$173,100.00 ~~for research, planning and independent evaluative~~ **for Housing Skills classes and housing navigation services** ~~of for~~ the County's Pay for Success Initiative, effective 1/1/2025-12/31/2027.
- b) Recommending an award and enter into Contract No. 5389 with Lutheran Metropolitan Ministry in the amount not-to-exceed \$173,100.00 ~~for research, planning and independent evaluative~~ **for Housing Skills classes and housing navigation services** ~~of for~~ the County's Pay for Success Initiative, effective 1/1/2025-12/31/2027.

Funding Source: Federal Bureau of Justice Affairs Grant Funds

Sharonda Mason, Department of Health and Human Services, presented. Meredith Turner asked on the previous item and this one whether we have any data on how many returned citizens successfully reaching any kind of educational milestone, securing and maintaining permanent housing status. Leigh Tucker motioned to approve the item as amended; Meredith Turner seconded. Item BC2025-468 was approved by unanimous vote as amended.

BC2025-469

Department of Health and Human Services/Community Initiatives Division/Office of Re-entry,

- a) Submitting an RFP exemption, which will result in an award recommendation to Center for Employment Opportunities, Inc. in the amount not-to-exceed \$249,999.99 for transitional employment services for the County's Pay for Success Initiative, effective 1/1/2025-12/31/2027.
- b) Recommending an award and enter into Contract No. 5390 with Center for Employment Opportunities, Inc. in the amount not-to-exceed \$249,999.99 for transitional employment services for the County's Pay for Success Initiative, effective 1/1/2025-12/31/2027.

Funding Source: Federal Bureau of Justice Affairs Grant Funds

Sharonda Mason, Department of Health and Human Services, presented. There were no questions. Leigh Tucker motioned to approve the item; Robert Schleper seconded. Item BC2025-469 was approved by unanimous vote.

C. – Exemptions**BC2025-470**

Department of Public Works, recommending an alternative procurement process, which will result in a participation agreement with the City of Brecksville Purchasing Consortium in the amount not-to-exceed \$30,000.00 for the purchase of sodium chloride (rock salt) for the period 11/1/2025 – 10/31/2026.

Funding Source: General Fund

Matthew Hrubey, Department of Public Works, presented. Robert Schleper asked is this something we do with a number of communities throughout the County or is this Brecksville specifically. Michael Houser asked for clarity, when you say 1 of 21 what does that mean; do we do this for a number of cities across Cuyahoga County, across other counties or Brecksville specifically; for clarity we don't do this for Warrensville or Maple Heights or other cities across the County. Paul Porter relayed that this kind of like when we purchase through a joint purchasing platform; items you've seen come through that say, government purchase, cooperative purchase (like Sourcewell), buying through the Federal GSA schedule. According to Ohio Revised Code (ORC) if a municipality chooses, they can participate in a purchasing agreement like this. So, in theory it should be open to any of those municipalities. They just have to choose whether or not to participate. Meredith Turner asked can we find out who is part of the consortium. Leigh Tucker motioned to approve the item; Robert Schleper seconded. Item BC2025-470 was approved by unanimous vote.

BC2025-471

Department of Health and Human Services/Community Initiatives Division/Family and Children First Council, recommending an alternative procurement process, which will result in award recommendations to various providers in the total amount not-to-exceed \$477,648.00 for implementation of the Family Centered Services and Supports Wraparound Program for the period 7/1/2025 – 6/30/2027.

Funding Sources: 25% Federal Child Welfare Funds and 75% State General Revenue Funds

Marcos Cortes, Department of Health and Human Services, presented. There were no questions. Leigh Tucker motioned to approve the item; Meredith Turner seconded. Item BC2025-471 was approved by unanimous vote.

BC2025-472

Department of Health and Human Services/Community Initiatives Division/Family and Children First Council, recommending an alternative procurement process, which will result in award recommendations to various providers in the total amount not-to-exceed \$375,000.00 to pay invoices for the Multi-System Local Youth Program for the period 7/1/2025 – 6/30/2027.

Marcos Cortes, Department of Health and Human Services, presented. There were no questions. Leigh Tucker motioned to approve the item; Meredith Turner seconded. Item BC2025-472 was approved by unanimous vote.

BC2025-473

Department of Health and Human Services/Community Initiatives Division/Family and Children First Council, recommending an alternative procurement process which will result in award recommendations to various County agencies and various providers referred by County agencies in the total amount not-to-exceed \$375,000.00 as reimbursement for technical assistance and financial assistance to children, youth and families with complex multi-system needs in connection with Multi-System State Youth Program for the period 7/1/2025 – 6/30/2027.

Funding Source: State Funds

Marcos Cortes, Department of Health and Human Services, presented. Meredith Turner asked for an example of the types of services. Leigh Tucker motioned to approve the item; Meredith Turner seconded. Item BC2025-473 was approved by unanimous vote.

D. – Consent Agenda

There were no questions or comments on the Consent Agenda items. Leigh Tucker motioned to approve Consent Agenda Item No. BC2025-474 through BC2025-477; Mellany Seay seconded. The Consent Agenda Items were approved by unanimous vote.

BC2025-474

Department of Development, submitting an amendment to a Loan Agreement (via Contract No. 3323) with 2168 West 25th Street LLC to provide a County Match Funding Forgivable loan for certain brownfield remediation and cleanup activities associated with the Project located at or about 2168 West 25th Street, Cleveland, Ohio and encompassing parcels for the period 3/31/2023-3/31/2026 to modify the terms of Section 1.10 to remove an existing item and add additional terms related to loan forgiveness, effective upon signatures of all parties.

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

BC2025-475

Court of Common Pleas/Juvenile Court Division, submitting an amendment to Contract No. 4307 (fka Contract No. 4118) with Esperanza, Incorporated for mentoring and positive youth development services for court referred youth ages 14 to 17 with high risk for recidivism for the period 7/1/2023 – 6/30/2026; for a decrease of funds in the amount of (\$44,460.00), effective 7/1/2025.

Funding Source: RECLAIM Grant

BC2025-476

Court of Common Pleas/Juvenile Court Division, submitting an amendment to a Master Contract with various providers for trauma informed respite and youth care center services for the period 7/1/2024 – 6/30/2026

a) To remove (2) vendors, effective 7/1/2025:

1. Contract No. 4521 with Raven House
2. Contract No. 4524 with Life's Right Direction, Inc

b) To decrease funds, effective 7/1/2025:

Contract No. 5515 (fka Contract Nos. 4644 and 4522) with Lutheran Metropolitan Ministry to replace Exhibits A-C with a new Exhibit A which represents new rates and for a decrease of funds in the amount of (\$150,000.00).

Funding Source: RECLAIM Grant Fund

BC2025-477

Fiscal Department, presenting proposed travel/membership requests for the week of 7/21/2025:

Dept:	Department of Sustainability							
Event:	Jason National Conference							
Source:	Jason Learning							
Location:	Leesburg, VA							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Emily Bacha	6/29/2025-6/30/2025	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Jason Learning

*Paid to host

**Staff reimbursement

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

**** All Expenses Covered by Jason Learning

- Registration- \$150.00
 - Airfare- \$131.00
- Total: \$281.00

Purpose:

Traveling to Leesburg, VA to attend the Jason National Conference. To discover how diverse perspectives and visionary leadership can drive a more inclusive, innovative, and sustainable future in stem. Approved by the AIG's office the cost of the trip is covered by Jason Learning.

Dept:	Sheriff's Department							
Event:	NTOA Swat Team Leader Development							
Source:	National Tactical Officer Association							
Location:	Crestview, FL							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Timothy Slowik	8/3/2025-8/8/2025	\$724.01	\$420.00	\$896.00	\$525.00	\$560.00	\$3,125.01	Continued Professional Training Fund

*Paid to host

**Staff reimbursement

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

Purpose:

National Tactical Officer Association SWAT Team Leader Development Training in Crestview Florida. NTOA is the leader in Law Enforcement Tactical Training on a national scale. This training will provide unparalleled training in SWAT and decision making, ultimately increasing the capability to become a team leader on the County SWAT team.

Dept:	Medical Examiner's Office							
Event:	109 th International Association for Identification Educational Conference							
Source:	International Association for Identification							
Location:	Orlando, FL							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Dawn Schilens	8/11/2025-8/17/2025	\$495.00	\$353.00	\$787.50	\$341.70	\$276.97	\$2,254.17	Coverdell Grant

*Paid to host

**Staff reimbursement

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

Purpose:

Attend the 109th International Association for Identification Educational Conference. Lectures on the latest technology techniques and research as well as workshops to practice basic and advanced skills taught by professionals in the field. Meetings and panels provide an opportunity to discuss the latest standards and professional developments.

V- OTHER BUSINESS

Item of Note (non-voted)

Item No. 1

Court of Common Pleas/Corrections Planning Board, submitting an amendment to a grant agreement with the Ohio Department of Rehabilitation and Corrections for various FY2026 – 2027 Community Based Corrections Programs for the period 7/1/2025 – 6/30/2027 to replace Exhibit A of the original agreement with revised Exhibit A; no additional funds required.

Funding Source: Community Corrections Act (CCA) Fund

Item No. 2

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

RQ No.	Contract Number	Vendor	Service Description	Amount	Department	Date(s) of Service	Funding Source	Date of Execution
NA	4969	Summit Food Service, LLC	For Jail food services in the Cuyahoga County Corrections Center to replace Exhibit A with Exhibit A-1 Kosher-Halal Menu and to replace Enhanced Menu Schedule 1 with Enhanced Menu Schedule 1A representing pricing schedule	\$0.00	Sheriff's Department	01/01/2025-12/31/2027	(Original) General Fund	(Executive) 7/14/2025 (Law) 7/15/2025

Item No. 3

Purchases Processed (No Vote Required) in the amount not-to-exceed \$10,000.00 for the period 6/1/2025-6/30/2025 (No Vote Required) will be available at the following link at time of posting the Final Agenda. To view the report, click on the Title “ 7/21/2025 – Board of Control Meeting”.

Board of Control (cuyahogacounty.gov)

VI – PUBLIC COMMENT

No Public Comment

VII – ADJOURNMENT

Leigh Tucker motioned to adjourn; Mellany Seay seconded. The motion to adjourn was unanimously approved at 11:32 a.m.

Item Details as Submitted by Requesting Departments

IV. Contracts and Awards

A. – Tabled Items

B. – New Items for Review

BC2025-478

Title	2025 Cuyahoga County Airport Pavement Rehabilitation Apron Slab Replacement Phase III
Department or Agency Name	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 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.
Original	CM5495	Tri Mor Corp	N/A	\$328,815.00	6/2/2025	BC2025-352

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

Apron Rehabilitation Phase 3 at Cuyahoga County Airport aims to improve pavement on the apron by repairing deteriorated areas to maintain infrastructure and prevent FOD which poses a safety risk to aircraft. Previous sections have been replaced with FAA and ODOT funds, and this proposed project is a continuation of maintaining the apron. The scope includes removing and replacing damage concrete slabs, drainage structure reconstruction, removal and installation of aircraft tie-downs and proposed markings.

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

Project Goals, Outcomes or Purpose (list 3):

Apron Rehabilitation Phase 3 at Cuyahoga County Airport aims to improve pavement on the apron by repairing deteriorated areas to maintain infrastructure and prevent FOD which poses a safety risk to aircraft. Previous sections have been replaced with FAA and ODOT funds, and this proposed project is a continuation of maintaining the apron. The scope includes removing and replacing damage concrete slabs, drainage structure reconstruction, removal and installation of aircraft tie-downs and proposed markings.

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

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

Vendor Name and address:	Owner, executive director, other (specify):
Tri Mor Corp 8530 Boyle Pkwy Twinsburg, Ohio 44087	Neille Vitale CEO
Vendor Council District:	Project Council District:
N/A	District 11
If applicable provide the full address or list the municipality(ies) impacted by the project.	Richmond Heights

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # if applicable <input checked="" 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: \$328,815.00	<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 (%): (8%) 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.	<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? PRICING MATHMATICALLY BALANCED	<input type="checkbox"/> Contract Amendment (list original procurement) <input type="checkbox"/> Other Procurement Method, please describe:

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

<p>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.</p> <p>Approximate:</p> <p>ODOT Aviation Grant : 95%</p> <p>General Fund: 5%</p>
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):	1/5/2025
Date documents were requested from vendor:	5/24/2025
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: None	
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): N/A

BC2025-479

Title	PO25002658STAC- 2025- Procurement of IPS surveillance cameras, video storage, and related equipment for the Virgil E. Brown Building
Department or Agency Name	The Department of Information Technology
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
O	PO25002658 STAC	IPS- Integrated Precision Systems	2025	\$39,660.92	PENDING	PENDING

Service/Item Description (include quantity if applicable).

The Department of Information Technology intends to contract with Integrated Precision Systems for the procurement, installation, and programming of ten (10) surveillance cameras, video storage, and related equipment for the Virgil E. Brown Building, in the amount of \$39,660.92.

This request covers the replacement of outdated analog surveillance equipment with updated digital technology. The new cameras and associated components will integrate with the existing security system and are intended to be repurposed and incorporated into any future renovations at the site.

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

For purchases of furniture, computers, vehicles: ☐ Additional ☐ Replacement

Age of items being replaced: _____ How will replaced items be disposed of?

Project Goals, Outcomes or Purpose (list 3):

The procurement, installation, and programming of ten (10) surveillance cameras, video storage, and related equipment for the Virgil E. Brown Building.

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

Vendor Name and address:	Owner, executive director, other (specify):
Integrated Precision Systems 8555 Sweet Valley Drive, Suite B; Valley View, OH 44125	Rob Jackson Account Representative
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. IPS is able to provide Cuyahoga County the requested hardware using Ohio State Term Schedule pricing. All vendors awarded an Ohio state contract have gone through formal bidding processes and have been vetted

	by the State of Ohio prior to award: IPS Ohio State Term Contract #: 010018 Contract end date: 1/31/2027 *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 Contract #: 010018 Contract end date: 1/31/2027 <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: CTO approval
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 50% Health and Human Services Levy/50% Federal and State Reimbursement
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. HS260210 UCH06100
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):

BC2025-480

Title	PO25002701EXMT- 2025- Procurement of INE Training Platform 1 year Subscription
Department or Agency Name	The Department of Information Technology
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
O	PO25002701 EXMT	INE Holdings LLC	10.29.2025-10.28.2026	\$29,970.00	PENDING	PENDING

<p>Service/Item Description (include quantity if applicable).</p> <p>The Department of Information Technology plans to contract with INE Holdings LLC, for the INE Training Platform in the amount of \$29,970.00.</p> <p>The Department of Information Technology uses INE Training Platform for employees to access educational related topics such as Cybersecurity, Firewalls, and Cloud based hosting.</p> <p>One Year Subscription, October 29, 2025 - October 28, 2026</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)
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of?
Project Goals, Outcomes or Purpose (list 3): Procurement of INE Training Platform 1 year Subscription- October 29, 2025- October 28, 2026

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):
INE Holdings LLC 575 New Waverly Place Suite 201, Cary, NC 27518	Carly Cantarini 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. This purchase is a renewal of the INE Training Platform directly with the platform's manufacturer, INE. Other vendors were not considered, as staff members are currently enrolled in multiple training courses that are custom-designed and hosted by INE. Transitioning to a different vendor at this time would result in the loss of training progress, and course continuity for employees. As such, renewing with INE is the most practical and cost-effective option to ensure uninterrupted training. *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) _____ / _____	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().

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

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

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 100% General Fund
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit. IT100140
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? ☐ 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.
O	PO24002867 EXMT	INE Holdings LLC	2024-2025	\$37,440.00	7.23.2025	BC2024-541

BC2025-481

Title	PO25002808STAC- 2025- Procurement of 5-year Meraki MX250 Advanced Security License
Department or Agency Name	The Department of Information Technology
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
O	PO25002808 STAC	MNJ Technologies Direct	2025	\$20,325.00	PENDING	PENDING

Service/Item Description (include quantity if applicable).

The Department of Information Technology plans to contract with MNJ Technologies Direct for the procurement of a 5-year Meraki MX250 Advanced Security License and Support, in the amount of \$20,325.00.

This request is for the Anchor licensure needed for the datacenter appliance that directs traffic for the wireless access points for the Wireless Access Point project.

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):

Procurement of 5-year Meraki MX250 Advanced Security License

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

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

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. MNJ Technologies Direct is able to provide Cuyahoga County the requested hardware equipment using Ohio State Term Schedule pricing. All vendors awarded an Ohio state contract have gone through formal bidding processes and have been vetted by the State of Ohio prior to award. STS#534612 Expires on 12.31.2025 *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#534612 Expires on 12.31.2025 <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain. If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment - (list original procurement) <input type="checkbox"/> Other Procurement Method, please describe:

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

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 100% Capital Improvement Fund
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit. IT600100 COTEC0000501
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):

BC2025-482

Title	MULTISYSTEMIC THERAPY AND MULTISYSTEMIC THERAPY-PROBLEM SEXUAL BEHAVIOUR (MST/MST-PSB)
-------	--

Department or Agency Name	CUYAHOGA COUNTY COURT OF COMMON PLEAS, JUVENILE DIVISION
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
Original (O)	5249/4021	Applewood Centers, Inc.	7/1/2023- 6/30/2025	\$472,000.00	1/02/2024	BC2024-14
(A-1)	5249	Applewood Centers, Inc.	7/1/2023- 6/30/2026	\$52,000.00	Pending	

<p>Service/Item Description (include quantity if applicable). MST-PSB is designed with core elements of MST standard but additionally addresses problematic sexual behaviors in youth of all genders ages 12 to 17 ½. To extend the time period of the contract from June 30, 2025, to June 30, 2026, and increase the funds in the amount of \$52,000. This changes the not to exceed value of the contract from \$472,000. to \$524,000.00.</p>
<p>Indicate whether: <input type="checkbox"/> New service/purchase <input checked="" type="checkbox"/> Existing service/purchase <input type="checkbox"/> Replacement for an existing service/purchase (provide details in Service/Item Description section above)</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement 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 MST standard model is a family-driven treatment approach that addresses a multitude of behavioral issues by addressing complex systemic drivers to youth delinquency. MST-PSB is designed with core elements of MST Standard but additionally addresses problematic sexual behaviors. The vendor should provide an intensive, in-home and community-based service for youth based on the MST and MST-PSB Models and maintain all elements of the fidelity model.</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: Applewood Centers, Inc. 10427 Detroit Ave. Cleveland, Ohio 44102	Owner, executive director, other (specify): Jennifer Blumhagen, Executive Director
Vendor Council District:	Project Council District:

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

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

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input 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. This contract is 100% funded through the RECLAIM grant.
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. JC330100
Payment Schedule: <input type="checkbox"/> Invoiced <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
Is contract/purchase late <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission	
Reason: The delay is due to RECLAIM grant notification and award process, and vendors delayed returning documents.	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	5.20.25
Date documents were requested from vendor:	6.5.25
Date of insurance approval from risk manager:	5.27.25
Date Department of Law approved Contract:	5.30.25
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (if yes, please explain) This program is grant funded and recurring.	
Have payments been made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions): see chart above

BC2025-483

Title	Request for PO 25002682 STAC for (4) computers for the Crime Strategies Unit totaling \$23,960.00
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.
O	25002682 STAC	MNJ Technologies Direct, Inc.	N/A	\$23,960.00	pending	pending

Service/Item Description (include quantity if applicable). Purchasing (4) computer workstations for the Prosecutor's Crime Strategies Unit. Due to the increasing volume and complexity of digital evidence, particularly mobile extractions, the Prosecutor's Office is establishing a dedicated Digital Evidence Intake Management Team to streamline evidence processing, reduce backlog and
--

ensure prosecutorial readiness in cases involving digital data. Isolated and assigned computers will help aid in maintaining the integrity and audit trail for chain of evidence custody.
Indicate whether: <input checked="" type="checkbox"/> New service/purchase <input type="checkbox"/> Existing service/purchase <input type="checkbox"/> Replacement for an existing service/purchase (provide details in Service/Item Description section above)
For purchases of furniture, computers, vehicles: <input checked="" 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): Organization and tracking of voluminous digital evidence for case linkage Provide optimal storage for safeguarding digital evidence chain of custody Comply with Criminal Justice Information Services policy standards on confidentiality

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

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. Purchase is being made by state term contract *See Justification for additional information.
The total value of the solicitation: _____	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) / _____	<input checked="" type="checkbox"/> State Contract, list STS number and expiration date STS #534486 expires on July 2, 2028 <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	<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)
	<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.	

<p>FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed.</p> <p>100% funded by Federal Grant Award #15PBJA-24-GG-04443-BWCX</p> <p>U. S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance FY24 Body Worn Camera Policy and Implementation Program Grant</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>PS285100</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 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 checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

BC2025-484

Title	1 st Amendment CM#5327, updating quote, terms and conditions and warranty statement for the service agreement contract with Peak Scientific Inc. for three nitrogen generators in ME's Toxicology Lab.
Department or Agency Name	Medical Examiner's Office
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
O	CM5327	Peak Scientific Inc	4/6/2025 – 4/5/2028	\$55,926.76 (funds were never encumbered)	5/5/2025	BC2025-297
A1	CM5327	Peak Scientific Inc	Change time period to: 7/21/2025 – 7/20/2028	Change awarded amount to: \$61,053.27	PENDING	PENDING

<p>Service/Item Description (include quantity if applicable).</p> <p>Service agreement for preventative maintenance for three (3) nitrogen generators in the Medical Examiner's Toxicology Lab.</p>
<p>Indicate whether: <input checked="" type="checkbox"/> New service/purchase <input type="checkbox"/> Existing service/purchase <input type="checkbox"/> Replacement for an existing service/purchase (provide details in Service/Item Description section above)</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p> <p>Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p> <p>Onsite Preventative Maintenance, full function check</p> <p>Online Technical Support</p> <p>Breakdown Repair Service, parts, labor</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):
Peak Scientific Inc 210 Littleton Road Suite 110 – Westford, MA 01886	Jonathan Golby, CEO Craig McFarlane, Lead Service 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# _____ (Insert RQ# for formal/informal items, as applicable) <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. The generators are products of Peak Scientific Inc. *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 checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 100% General Fund
Is funding for this included in the approved budget? <input 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. ME100100 / 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: na	
If late, have services begun? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments been made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

BC2025-485

Title	Contract with PerkinElmer U.S. LLC for 3 year period, preventative maintenance for Fourier Transform Infrared Spectrometer for ME’s Trace Evidence Lab, for amount of \$52,164.00.	
Department or Agency Name	Medical Examiner’s Office	

Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):
------------------	---

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
O	5169	PerkinElmer US LLC	5/1/2025 – 4/30/2028	\$52,164.00	PENDING	PENDING

Service/Item Description (include quantity if applicable).
 Onsite preventative maintenance and repair for Fourier Transform Infrared Spectrometer.

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):
 Service support team
 Regularly scheduled Preventive Maintenance
 Reduce downtime, increase productivity, enhance compliance.

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):
PerkinElmer US LLC 710 Bridgeport Ave Shelton CT 06484	Dirk Bontridder, CEO Kathryn Taylor, Contract Specialist
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. Equipment is proprietary to vendor. *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 checked="" type="checkbox"/> Check if item on IT Standard List of approved purchase. Page 26 IT Standards	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. 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. ME100100 / 55130
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.

Is contract/purchase late <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission	
Reason: Vendor delays in return of required annual documents. Draft contract included negotiations with Vendor and County Legal teams on terms and conditions May thru June 2025.	
Timeline	
Project/Procurement Start Date (date your team started working on this item):	1/16/2025
Date documents were requested from vendor:	2/26/2025; follow ups emails March thru June 2025
Date of insurance approval from risk manager:	2/25/2025 MED-0490
Date Department of Law approved Contract:	7/1/2025 MED-0488
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments been made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

C.- Exemptions

BC2025-486

TITLE	Amendment to the Alternate Procurement Request for Veterinary
DEPARTMENT OR AGENCY NAME	Sheriff's Department

REQUESTED ACTION	<input type="checkbox"/> Alternative Procurement <input checked="" type="checkbox"/> Amendment to Alternative Procurement
------------------	--

LIST MOST RECENT/PRIOR ALTERNATIVE PROCUREMENT APPROVALS FOR THIS REQUEST; INCLUDING AMENDMENTS, AS APPLICABLE	DATE BOC APPROVED/COUNCIL'S JOURNAL DATE	APPROVAL NO.
	12/11/23	BC2023-813
	5/20/24	BC2024-387
DESCRIPTION/ EXPLANATION OF REQUEST:	<p>A. Scope of Work Summary</p> <p>The Sheriff's Department is seeking approval for an amendment to the alternate procurement process. This amendment would authorize the issuance of multiple not-to-exceed (NTE) purchase orders to various vendors, with a combined original NTE amount of \$70,000.00.</p> <p>The proposed amendment includes the following changes:</p> <ul style="list-style-type: none"> Addition of new vendors: Clover Leaf, Elyria Animal Hospital, and Excel K9 Services An increase of \$80,000.00 to the overall NTE amount, raising the total combined NTE to \$150,000.00 Extension of the contract period through December 31, 2026 <p>Prior Approval: BC2023-813 and 2024-387.</p>	

	<p>These services are frequently required on an emergency basis for the canines, making it impractical to conduct a competitive bidding process. Due to the urgent and critical nature of the care needed, services have historically been paid in batches or through office vouchers and other informal methods. However, the annual expenditures for each vendor may exceed the procurement threshold, resulting in delays in processing and payment.</p> <p>This amendment to the alternate procurement process will facilitate timely payments, helping to maintain strong working relationships with each vendor and ensure the continued provision of veterinary services for the canines.</p> <p>Under the amended process, individual purchase orders can be issued to the approved vendors listed below. These purchase orders will be processed through INFOR/Lawson, ensuring appropriate procurement documentation is maintained, without requiring additional Board of Control approval. Non-critical services will continue to follow the County's standard procurement procedures.</p> <p>B. Procurement 1. The procurement method for this project was alternate procurement.</p> <p>C. Contractor and Project Information 1. Various vendors- adding Clover Leaf Animal Hospital Elyria Animal Hospital Excel K9 Services</p> <p>D. Project Status and Planning 1. The project reoccurs annually.</p> <p>E. Funding 1. The project is funded by Commissary (Jail Canines) & Federal Equitable Sharing Account Funds (Law Enforcement Canines) 2. The schedule of payments is by invoice.</p>
--	---

FUNDING SOURCE:	Is funding for this included in the approved budget?
	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (if "no" please explain):
	Please provide the complete, proper name of the funding source (no acronyms). Include percentages of funding if using more than one source.
	Commissary (Jail Canines) & Federal Equitable Sharing Account Funds (Law Enforcement Canines)

D. - Consent Agenda

BC2025-487

(See related items for proposed travel/memberships for the week of 7/28/2025 in Section D above).

BC2025-488

(See related items for proposed purchases for the week of 7/28/2025 in Section D above).

V – OTHER BUSINESS**Item of Note (non-voted)****Item No. 1**

TITLE	Cleveland Foundation Public Service Fellows
DEPARTMENT OR AGENCY NAME	Fiscal Department

<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 checked="" type="checkbox"/> Grant Application (for grants with no Cash Match or Subrecipients).</p> <p>➤ Is County Executive signature required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Grant Agreement (when the signature of the County Executive is required).</p> <p><input checked="" 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>
---	---

GRANT CURRENT/ HISTORICAL INFO	NAME OF GRANT	TIME PERIOD	AMOUNT	PREVIOUS APPROVAL (PLEASE PROVIDE BOC MEETING DATE)	APPROVAL NO.
ORIGINAL (O)	2025 Cleveland Foundation Public Service Fellows	7/1/2025- 8/31/2026	\$192,000.00		
AMENDMENT (A-1)					
AMENDMENT (A-)					

DESCRIPTION/ EXPLANATION OF THE GRANT:	The Cleveland Foundation Fellowship program places new college grads in a 12-month full time paid placement at a selected public sector agency or a nonprofit partner in Cleveland to receive meaningful career-related work experience. The grant will pay for salary and benefits of the Fellows for their one-year placement
---	---

PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):	To provide support for Cuyahoga
	To enable the fellow's to gain work experience
	To allow the fellow's to experience work in the public sector

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.	

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

Item No. 2

TITLE	FY22 Operation Stonegarden Time Extension
DEPARTMENT OR AGENCY NAME	Sheriff

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 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)
--	---

GRANT CURRENT/HISTORICAL INFO	NAME OF GRANT	TIME PERIOD	AMOUNT	PREVIOUS APPROVAL (PLEASE PROVIDE BOC MEETING DATE)	APPROVAL NO.
ORIGINAL (O)	Operation Stonegarden	9/1/2022 – 6/30/2025	\$100,913.00	12/5/2022	CON2022-102
AMENDMENT (A-1)	Operation Stonegarden	9/1/2022-3/31/2026	\$0	Pending	Pending
AMENDMENT (A-)					

DESCRIPTION/ EXPLANATION OF THE GRANT:	The Sheriff's Department is requesting an extension of time from the U.S. Customs and Border Patrol (CBP) through the Ohio Emergency Management Agency (OEMA) for the FY22 Operation Stonegarden Grant
PROJECT GOALS, OUTCOMES OR PURPOSE (LIST 3):	The primary goal of the project is reimbursement for overtime, fuel, mileage, equipment, and maintenance costs incurred through land and marine-based missions designed to secure the border between Cuyahoga County and Canada.

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	
SUBRECIPIENT'S COUNCIL DISTRICT:	
DOLLAR AMOUNT ALLOCATED:	

PROJECT COUNCIL DISTRICT:	
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.
	FY2022 Operation StoneGarden Grant
	Does this require a Cash Match by the County? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

	<p>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.</p>
--	---

Item No. 3

(See related list of Contracts up to \$10,000.00 and Various Agreements – processed and executed for the week of 7/28/32025 in Section V. above).

VI – PUBLIC COMMENT

VII – ADJOURNMENT