

BOARD OF COUNTY COMMISSIONERS, BUTLER COUNTY, OHIO

315 High St., 6th Floor, Hamilton, OH 45011

REQUEST FOR PROPOSALS

R.C. §§ 307.86(M) & 307.862

Pursuant to R.C. § 307.86(M), The Board of Commissioners, Butler County, Ohio (the “County”), as the County contracting authority for the User designated herein has determined that the use of competitive sealed proposals would be advantageous to the County for the acquisition of the goods or services described in this Request for Proposals (the “RFP”). Therefore, pursuant to R.C. § 307.862, the County hereby solicits sealed competitive proposals as described in this RFP.

A. Submission of Proposal:

1. *Deadline for Submission of Proposals:* Wednesday, April 19, 2023 at 4:00 p.m. Proposals received prior to the deadline will be held and not be opened until the deadline.
2. *Proposals to be Delivered to:* Butler County Sheriff’s Office, Attn: Debra Maloney, 705 Hanover Street, Hamilton, OH 45011

B. Description of Project:

1. *Project Name:* **Commissary Services, Inmate Kiosks and Accounting Software, and Stand-alone Deposit Kiosks**
2. *Contract No.:* 2023-002
3. *USER:* The contract to which this RFP relates is intended to be awarded by the County for the use of the Butler County Sheriff’s Office (the “Sheriff’s Office”)
4. *County Contact Person:* Debra Maloney, Assistant Finance Director, Butler County Sheriff’s Office, 705 Hanover Street, Hamilton, OH 45011, dmaloney@butlersheriff.org or Captain Nick Fisher, nfisher@butlersheriff.org.
5. *Brief Description of Project:* USER is requesting formal bids for inmate commissary services, vending machine services, intake/inmate kiosks and financial software for inmate accounting system.
6. *Please see Exhibit A for additional information.*
7. *Potential Partial or Multiple Party Awards:* County reserves the right to award upon recommendation of the Sheriff’s Office any, none, or part of the project to one or more Vendors for designated portions of the project.
 - a. In the event that County elects to award multiple contracts concerning the project, the Sheriff’s Office or its designee shall assume responsibility for coordination of the multiple contracts unless County expressly designates that the recipient of one of the awarded contracts shall be responsible to coordinate the multiple contracts.
8. *Intended Contract Duration:* The initial term of the contract shall be for three (3) years. After the initial contract term, Butler County may renew the contract for two (2) additional one-year periods mutually agreed upon by both parties.
9. *Implementation Deadline:* **Project completion to be determined at time of contract award.**

C. **The Request for Proposals:**

1. A list of specifications for this project is contained in the Exhibit A attached hereto.
2. A full copy of this RFP, together with all documents incorporated by reference into the RFP, is available to the public and may be obtained by either:
 - a. Download from the County's website at www.butlercountycommissioners.org or www.butlersheriff.org – Bid Opportunities.
 - b. A written request directed to the County's Contact Person as designated in this RFP.
3. County reserves the right to issue one or more addendums modifying the requirements or terms of this RFP.
 - a. A copy of each addendum will be:
 - i posted on the County and Sheriff's website;
 - ii provided via e-mail to each person/entity who has submitted a proposal at the time of the addendum; and
 - iii provided via e-mail to each person/entity who has provided the County's Contact Person listed in this RFP in writing:
 - (a) notice that the person/entity is considering submitting a proposal; and
 - (b) the person/entity's company name, contact person's name, company address, telephone number, e-mail address, and fax number.

D. **Prohibited Contacts:** To protect the integrity and fairness of the proposal process, unauthorized communications and other behavior by any prospective Vendor that violates or attempts to manipulate the RFP process in any way may result in the rejection of the offender's proposal.

1. Except as expressly authorized herein, neither a person/entity interested in submitting a proposal, a Vendor, nor their authorized representatives are permitted to communicate with Individuals Associated with this Project during the proposal process.
2. Authorized communications are as follows:
 - a. Prior to the date set herein for the receipt of proposals, persons or entities interested in submitting a proposal may submit written questions requesting clarification of information provided in this RFP. All such questions shall be submitted by email to the County Contact Person designated in this RFP. All answers will be shared with all other proposers and known perspective proposers.
 - b. Communications in connection with negotiations between the County and the Vendor who submits the proposal that County determines is the most advantageous to the County based on the rankings performed by County.
3. As used in this RFP, the term "Individuals Associated with this Project" is defined as:
 - a. County's elected officials;
 - b. The County Contact Person designated in this RFP; and
 - c. County employees (including but not limited to the designated Sheriff's staff) involved with development, management, and administration of this RFP and/or the process of evaluating proposals submitted in response to this RFP.

E. **Form of Proposals:** Each proposal submitted in response to this RFP shall:

1. Be submitted in writing and be responsive to the requests for information requested in this RFP.
 - a. The submittal shall contain an original and one (1) copy of the proposal.
 - b. The proposal shall contain the signature of a person who is duly authorized to submit the proposal on behalf of the Vendor.
 - c. The proposal shall contain the content and be organized in the format specified below:
 - i. Each page of the proposal must be numbered sequentially at the bottom of the page.
 - ii. All narrative information must contain a heading which clearly indicates the subject matter of the narrative.
 - d. The proposal must be consistent with applicable federal regulations, State of Ohio policies, and County policies and procedures.
2. Contain the full legal name and mailing address of the principal place of business of the person/entity submitting a proposal (the "Vendor").
 - a. If the Vendor is a sole proprietor, the Vendor shall identify any trade name or fictitious name under which the Vendor conducts his/her business.
 - b. If the Vendor is a corporation, limited liability company, limited partnership, limited liability partnership, or other form of business entity, the Vendor shall identify its form of business entity, any trade name or fictitious name under which the Vendor conducts its business, and whether the Vendor is licensed to do business in the State of Ohio.
3. Identify the name, postal mailing address, telephone number, and email address of the person(s) who is/are:
 - a. Responsible for preparation and submission of the proposal;
 - b. Authorized to respond to County's questions or requests for additional information related to evaluation of the proposal;
 - c. Conduct negotiations on behalf of the Vendor; and
 - d. Authorized to sign contract documents on behalf of the Vendor.
4. Fully respond to questions and requests for information set forth in this RFP. The required information may include, but not necessarily be limited to:
 - a. A description of the Vendor's business information including duration of business activity;
 - b. Vendor's experience with like or similar projects;
 - c. References from Vendor's representative clients/customers;
 - d. Vendor's key personnel who will be involved in the project; and
 - e. Disclosure of litigation or known claims pending or asserted against Vendor.
5. Disclose the name, address, phone number, other contact information, and scope of provided services/goods for each manufacturer, seller, subcontractor, and consultant who will assist the Vendor with the performance of the functions and duties in connection with the project.
6. Fully complete the Attachments attached to this RFP.
7. If County has described supplies, services, or both that may be subject to a partial award or multiple awards, each proposal must specify:

- a. Which portion(s) of those supplies, services, or both the Vendor is proposing to provide; and
- b. If the Vendor is proposing any differential pricing model based upon the scope of the contract which might be awarded to the Vendor, including but not necessarily limited to:
 - i A premium in the event that less than the entire, or a specified portion, of the project scope would be awarded to the Vendor; or
 - ii A discount in the event that the entire, or a specified portion, of the project scope would be awarded to the Vendor.
8. If a proposal contains any information which the Vendor believes is a trade secret or is otherwise entitled to protection as proprietary information, the Vendor has the sole responsibility to clearly identify and delineate the protected information and to otherwise take reasonable measures necessary to protect against the unauthorized disclosure of the protected information.

F. Units of Measurement:

1. All price or cost information contained in each proposal shall be stated in US dollars.
2. Unless otherwise expressly specified in the RFP, all quantities described in the RFP and each proposal shall be stated in English units of measurement (*i.e.*; metric units of measure shall not be used).
3. Unless otherwise expressly stated in this RFP, all time periods described in this RFP are expressed in terms of calendar days.

G. Proposal Evaluation Process:

1. Each proposal received by the proposal submission deadline as stated in this RFP shall be promptly opened by County and reviewed to determine whether the proposal complies with the requirements prescribed by the RFP and by Ohio law.
 - a. County shall open all timely submitted proposals in a manner that prevents the disclosure of contents of competing proposals to competing Vendors.
 - b. Proposals and any documents or other records related to a subsequent negotiation for a final contract that would otherwise be available for public inspection and copying under Section 149.43 of the Ohio Revised Code shall not be available until after the award of the contract.
 - c. Any proposal which County determines fails in any material respect to comply with requirements prescribed by the RFP and by Ohio law shall be rejected and returned to the Vendor without further proceedings.
2. Each proposal which the County determines substantially complies with requirements prescribed by the RFP and by Ohio law will be evaluated and ranked by County staff using the factors and criteria developed by the Sheriff's Office which are listed in the Exhibit A attached to this RFP.
 - a. County may initiate and conduct discussions with Vendors for the purpose of ensuring full understanding of, and responsiveness to, the requirements specified in this RFP, and accord fair and equal treatment with respect to any opportunity for discussion with Vendors to provide any clarification, correction, or revision of proposals.
 - b. If County determines that discussions with one or more Vendors are necessary, those discussions will be conducted in such a manner as County determines necessary to avoid

disclosing any information derived from proposals submitted by competing Vendors during those discussions.

H. **Rejection of Proposals:** County reserves the right to reject, in whole or in part, any proposal which County determines:

1. Contains material exception(s) by the Vendor to the terms and conditions of this RFP;
2. Fails to meet the terms and conditions of the request for proposals, including but not limited to, the standards, specifications, and requirements specified in this RFP;
3. Submits prices that County considers to be excessive, compared to existing market conditions, or determines exceed County's available funds; or
4. Would not be in the best interest of the County based upon the factors and criteria described in Exhibit A.

I. **Negotiations:**

1. After completion of the evaluation and ranking process described in this RFP, County will negotiate with the one Vendor who submitted the proposal that County determines to be the most advantageous to the County based on the rankings, including any adjustment to those rankings based on discussions described above.
2. County reserves the right to require that the Vendor provide demonstrations or samples as a part of the negotiations.
3. All of the Vendor's activities in connection with the making of a proposal and conducting negotiations with County shall be at the Vendor's sole cost and expense.
4. *Termination of Negotiations:*
 - a. A Vendor engaged in negotiations with County may terminate the negotiations by providing the County with written notice of the Vendor's withdrawal of the Vendor's proposal at any time prior to the County's award of a contract.
 - b. County may terminate negotiations with an Vendor at any time during the negotiation process by providing the Vendor with written notice of the Vendor's failure to provide the necessary information for negotiations in a timely manner or the Vendor's failure to negotiate in good faith, including but not limited to the Vendor's refusal to accept the contents of this RFP and the commitments contained in the Vendor's proposal.
 - i. County's written notice shall provide the Vendor with commercially reasonable notice as to the reasons why the Sheriff's Office has decided to terminate the negotiation process.
 - ii. Unless within five (5) business days of the written notice the Vendor cures the deficiencies described by County in its written notice, the negotiation process between County and the Vendor shall be terminated.
5. If either the Vendor or County terminates the negotiation process, County may commence negotiations with the Vendor whose proposal is ranked the next most advantageous to the County according to the evaluation factors and criteria described in this RFP.

J. **Contract Award:**

1. Following the evaluation and ranking of the proposals submitted in response to this RFP and the negotiations described herein, County may award a contract to the Vendor whose proposal is determined to be the most advantageous to County.

- a. To the extent described in this RFP, County may award a contract in whole or in part to one or more Vendors. The RFP shall be held firm for a minimum of ninety (90) days.
 - b. The Sheriff's Office shall send a written notice to the Vendor to whom the County wishes to award the contract and shall make that notice available to the public.
 - c. The Contract Documents upon which the contract award and any executed agreement are based shall include the final executed agreement between the County and the Vendor, this RFP (including any addenda issued by the County), and the Vendor's proposal. In the case of any conflict between the terms of any of the Contract Documents, the following order of precedence shall prevail:
 - i The executed agreement, including any exhibits or attachments thereto; and
 - ii This RFP.
 - d. The contract award will not be final until the County and the successful Vendor have executed a mutually satisfactory contractual agreement.
 - e. No contract performance may begin prior to the execution of a contractual agreement between the successful Vendor and County.
 - f. Butler County reserves the right to cancel an award immediately if new state or federal regulations or policy makes it necessary to change the service purpose or content substantially or to prohibit such service.
2. Within a reasonable time period after the award is made, County shall notify all other Vendors that the contract has been awarded to another Vendor.

Cancellation of the RFP: County may cancel or reissue this RFP if any of the following apply:

3. The supplies or services offered through all of the proposals submitted in response to this RFP are not in compliance with the requirements, specifications, and terms and conditions set forth in this RFP;
4. The prices submitted by the Vendors are excessive compared to existing market conditions or exceed the County's available funds; or
5. County determines that award of a contract would not be in the best interest of the County.

K. Other Information:

1. *Warranties.* Vendor must warrant that all services and goods provided by Vendor in connection with the project comply with the terms of the Contract Documents and will be free from defects for one year after County's acceptance thereof. Vendor shall also assign to the County all manufacturer's warranties applicable to goods provided by Vendor in connection with the project.
2. *Non-solicitation.* During the term of the agreement arising from this RFP and for one-year thereafter, Vendor shall not employ nor solicit for employment any current employee of the County unless such employee was terminated by County without just cause.
3. *Proprietary or Non-public Information.* Vendor shall maintain the confidentiality of any proprietary or otherwise non-public records and information contained in such records which is disclosed to Vendor in connection with the negotiations described herein or the Vendor's performance of an agreement resulting from those negotiations.
4. *Compliance with Laws.* The performance by Vendor and its employees pursuant to the Contract Documents shall comply with all federal, state, and local laws, regulations, and policies/procedures.

Exhibit “A”

Specifications for Project

The Butler County Sheriff is accepting bids for inmate commissary services, vending machine services, intake/inmate kiosks and financial software for inmate accounting system. The Butler County Correctional Facility has three locations. Resolutions and Court Street operate based on inmate population and either location can be opened or closed based on current needs. The inmate population fluctuates on a regular basis.

- Main Jail on Hanover Street
 - Eleven (11) housing units including Intake
 - Average housing unit holds 96 inmates
 - Total facility population = 848 inmates
- Resolutions on Second Street
 - Four (4) housing units
 - Average housing unit holds 40 inmates
 - Total facility population = 162 inmates
- Court Street Facility
 - Two (2) housing units
 - Average floor holds 95 inmates
 - Total facility population = 180 inmates

Request for Proposals must include the following specifications:

Commissary specifications:

- Include a list of commissary items available for inmates to purchase;
- Commissary item must be delivered to the inmates at least twice weekly. The bid should include detailed explanation on the delivery process;
- Provide a detailed description of process of purchasing, returns, and reconciliation of items not received;
- Provide vending machines with a plan of location in the housing units and frequency of when those items will be restocked;
- Include any holidays that would conflict with the receiving and distribution of inmate commissary items;
- Include your staffing plan for the commissary and vending operation;
- Provide ample staff training in all aspects of the systems. Please include training and retraining plan;
- Agree to allow Butler County to offer selected vendor services that may be sold through the kiosk or vending machines (i.e. phone cards, meals from the inmate food vendor, select localized food products);
- Provide commission rate for commissary and vending purchases for the Sheriff’s Office;
- Please note that storage for commissary items is very limited due to space constraints;
- Please note the Sheriff reserves the right for final say of items to be sold in commissary;
- Vendor will be responsible for providing indigent kits (with the exception of the phone card which will be provided by the Sheriff’s Office). Bulk kits will be available for intake officers to

provide to indigent inmates. The winning bidder will be responsible for delivering kits to inmates that qualify on a weekly basis.

- Indigent kits consist of: one (1) pencil, three (3) stamped envelopes, six (6) pieces of paper, one (1) toothbrush, one (1) toothpaste, one (1) bar of soap, three (3) shampoo packets, three (3) deodorant gel packets, and one (1) 5-minute phone card
- Vendor will be responsible for delivering Porter Packets to inmates weekly. Porter packets consist of twenty (20) coffee packs and one (1) phone card (provided by Sheriff's Office).

Inmate deposit kiosk specifications:

- Provide a minimum of one (1) secured, self-service, standalone floor model kiosk that will be located in the Butler County Correctional Facility's public lobby and one (1) at the intake desk to be used for inmate automated deposits;
- These kiosks must accept cash, credit card and debit card deposits made by friends, family and/or the inmate at the time of booking and provide a receipt to the depositor;
- Vendor should also provide other options for public to deposit funds such as via telephone with a credit card, secured website and/or other local deposit locations;
- Vendor must have software capable of creating a debit card or similar method at time of release (to be produced by the Finance Department and Booking Department);
- The kiosk must be equipped with a camera to capture a picture of each depositor;
- The deposits must post in the accounting system in real time;
- The vendor shall be responsible for any interface fees charged to create a real time interface with the Correctional Facility's JMS (Central Square Jail Pro 6 software);
- All funds deposited must be guaranteed by the vendor;
- Vendor must be licensed to conduct business under the Ohio Money Transmitter Act, Sections 1315.01 through 1315.18 of the Ohio Revised Code;
- The system should have multiple reporting capabilities including but not limited to daily deposits, adjustments, and audit trails;
- The vendor will be responsible for collecting and securing all deposits from the kiosks;

Inmate housing unit (Pod) kiosks specifications:

- Must be able to provide kiosks in the housing units for the inmates to order commissary items, review materials provided by the Sheriff, review the electronic law library, and send inmate requests which would include all equipment, software and services as required;
- Provide a minimum of seventeen (17) inmate pod kiosks (optimal would be 25 kiosks) with multiple applications/solutions and will be located within the inmate housing units to service approximately 1,000 inmates at three separate locations;
- Provide access to a law library application (i.e. Lexis-Nexis) and include immigration and custom law cases;
- Must provide capability of Sheriff's Office staff to track and/or monitor usage of pod kiosks and provide detailed reports;
- Demonstrate how the inmate requests/grievances are stored and managed;
- Ability to upload pre-determined forms for inmate requests such as grievances, other jail documents and medical requests;
- The vendor shall be responsible for any interface fees charged to create a real time interface with the Correctional Facility's inmate accounting system and jail management system (JMS) which is Central Square Jail Pro 6 software;

- Additional options will be considered, however, are not a required part of the bid.

Financial Software for Inmate Accounting System:

- Provide financial software for in-house commissary ordering and delivery system – record inmate purchases, commissary completion of order, receipt for inmate signature and confirmation order when received by inmate and maintain inventory records;
- Deposits must post to the accounting system in real time;
- Must provide a disbursement system (i.e. debit card) for inmates to receive funds due to them upon release;
- The system should have multiple reporting capabilities including but not limited to daily deposits, adjustments, and audit trails;
- The vendor shall be responsible for any interface fees charged to create a real time interface with the Correctional Facility's JMS (Central Square Jail Pro 6 software).

Electronic Payment Processing Services:

- Must have and demonstrate compliance with the Payment Card Industry (PCI) security requirements;
- Must be able to provide an SSAE 16 audit report (or latest industry standard) to the County on an annual basis;
- Vendor will encrypt all user data and will work with the County to minimize the collection of personal information from the payer. Vendor agrees to protect the confidentiality of all data and not to share it with any third party.
- Vendor must host all sensitive payment information. Vendor will implement highly secure systems. Administrative access will be restricted and enforced with login IDs and passwords. Firewall software will be used to protect Vendor's databases.

General specifications:

- All costs of the hardware and installation are the winning vendor's responsibility which includes electrical and data drop costs.
- Vendor will be responsible for implementing and managing their own network that connects to the kiosks.
- Additional options will be considered, however, are not a required part of the bid.
- Butler County reserves the right to reject any and all bids.

Exhibit “B”
Proposal Format and Attachments

The proposal and proposal addenda shall be submitted in the following sections in the following order:

SECTION 1. Vendor Information. Provide for each Vendor, Joint Vendor, and Subcontractor:

- A. Full legal name(s) (including any trade name), address, telephone number, and contact person
- B. If other than a sole proprietor, form of business entity, state, and date of incorporation
- C. Name, address, and phone number of each principal
- D. Year established and any former business names
- E. Financial Statements and annual report for past three years
- F. Number of years of experience within company’s area of business.
- G. Average length of service for implementation team members
- H. Estimated number of resources to be dedicated to this project from each of the following:
 - ☐ Customer support
 - ☐ Project implementation and rollout
- I. Number of current installation sites for like or similar projects
- J. Pending litigation and Asserted Claims
 - 1. Currently pending litigation
 - 2. Asserted claims (including claims for liquidated damages)
 - 3. Any litigation filed or resolved within the past five years
 - 4. Any claims (including claims for liquidated damages) asserted, resolved, or settled within the past five years

SECTION 2. Product and Service Description: This section should contain an item-by-item response to the items listed in Exhibit “A” *Description of Services and Goods to be provided for Project*. Screen captures or other brief materials that may serve to assist in describing the functionality may be attached to your response as an Appendix. Any material attached as an Appendix should be specifically referenced from the body of the response.

SECTION 3. Cost Proposal:

- A. Please identify the Proposal Quotation Sheet with a “TAB” for location at proposal opening.
- B. Please ensure your cost proposal includes any and all costs required for:
 - 1. One-time setup fees;
 - 2. Maintenance;
 - 3. Training;
 - 4. Per item fees;
 - 5. Convenience fees;
 - 6. Any additional fees or charges not addressed in this RFP; and
 - 7. Percentage increase in cost for optional renewal years.

SECTION 4. Certificates and Additional Required Forms: This section should include the original forms, completed as required. Only the original copy of the proposal is required to have content in this section. Failure to include these forms/items with proposal may be reason for proposal disqualification.

SECTION 5. Appendices as Necessary: The Vendor should attach any additional related material that is referenced in the earlier sections of their response.

Form SUB W-9 (Rev SEPT 2022)	Butler County Ohio Substitute Form W9 / Ohio Reporting Form Request for Taxpayer Identification Number and Certification
--	---

In order to maintain Butler County's supplier records in compliance with the Internal Revenue Service regulation 1.0641-1 and Ohio Revised Code section 3121.89-3121.8911, please **complete** and return by **email to AP@butlercountyohio.org** or by mail to:

Auditor of Butler County
130 High Street, Fiscal Services Dept.
Hamilton, OH 45011

To **properly complete** the form, the following information must be provided:

- Part I, line 1, enter the business owner's name (if applicable), part 1, line 2, business name (if applicable), federal tax classification, and address.
- Part II, you must provide either a Taxpayer Identification Number (TIN) or Social Security Number (SSN)
- Part III, **you must check "Yes" or "No"** to the question about providing goods or services as the sole owner of your business. If you check the **"Yes"** box to indicate that you are the sole owner, you must provide your name, the first date of providing goods or services for Butler County, **birth date**, and **description** of the type of good or service you will provide the county.
- Part IV, you must answer this question if Part III is answered "Yes". Answer "Yes" only if you are receiving retirement or disability payments from Ohio Public Employees Retirement System (OPERS) or any other Ohio pension system (SERS, STRS etc)
- Part V, **sign** the form and **enter today's date**.

For definitions of Part I and II of this form, please refer to IRS Form W-9.

Part I Business Ownership and Address Information			
Name (as shown on your income tax return). DO NOT LEAVE BLANK. If you are an individual or file under your name put your name here.			
Business name/disregarded entity name, if different from above.			
Check appropriate box for federal tax classification: (check only one box) If Individual PART III below is ALWAYS "YES"			
<input type="checkbox"/> Individual/Sole Proprietor (or single-member LLC)	<input type="checkbox"/> C Corporation	<input type="checkbox"/> S Corporation	<input type="checkbox"/> Partnership <input type="checkbox"/> Trust/Estate
<input type="checkbox"/> Limited Liability Company – Tax classification (<u>C</u> = C Corp, <u>S</u> = S Corp, <u>P</u> = Partnership)		NOTE: Check the appropriate box for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.	
<input type="checkbox"/> Other _____		<input type="checkbox"/> Exempt from backup withholding	
Address Line 1 (number, street, and apt. or suite no.)		Requestor's name and address: Auditor of Butler County 130 High Street, 4th Floor Hamilton, OH 45011	
Address Line 2			
City, state, and ZIP code			
Part II Taxpayer Identification Number (TIN) and Social Security Number (SSN)			
For suppliers that have a TIN, this must be entered.			
For individuals, sole proprietors, and corporations owned by an individual, you must generally enter the name shown on your social security card. However, if you have changed your last name, for instance due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name. You may enter your business or DBA name on the Business name line.			
Taxpayer Identification Number (TIN):		<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
and / or			
Social Security Number (SSN):		<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Part III Additional Information Required by the State of Ohio for Independent Contractors			
Will you receive payments from Butler County as either an individual, sole owner of a business, or single-member LLC?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes" is checked, you MUST complete the information below for name, date good or service provided, birth date, and description of the nature of your financial transactions with the county.	
Printed first name, middle initial, and last name	Date good or service provided (MM / DD / YY)	Birth date (MM / DD / YY)	
/ /		/ /	
Describe the Nature of the transactions you will be engaged in with Butler County			
Part IV Additional Information Required by the State of Ohio for Public Employees			
Are you currently receiving a pension benefit from Ohio Public Employees Retirement System (OPERS) or any other Ohio retirement system?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If you are an individual, the sole owner of your business, a single-member LLC, or a disregarded entity and have answered Part III "Yes", you must answer this question "Yes" or "No". If you answer "Yes" please fill out the SR-6 Form (Notice of Re-Employment of an OPERS Benefit Recipient)	
Part V Certification			
Under penalties of perjury, I certify that:			
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me).			
2. I am not subject to backup withholding because, (a) I am exempt from backup withholding, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding.			
3. I am a US person (including a US resident alien).			
Certification Instructions: You must cross out exempt from backup withholding above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.			
The IRS does not require your consent to any provision of this document other than the certification required to avoid backup withholding.			
Signature of U.S. person _____		Date _____	



Office Phone: 513-887-3154

Office Fax: 513-887-3149

130 High Street
Hamilton, Ohio 45011

For your convenience, the Butler County Auditor's Office offers the opportunity to receive future payments electronically, rather than by check. Payments can be deposited into a checking or savings account of your choice. In addition, you will be notified of the deposit by e-mail. The e-mail will provide you with all the information that would normally print on the check stub. To receive payments electronically, you must complete this form and return to the address above with a voided check or bank letter containing routing/account information.

Action:	ADD	CHANGE/UPDATE	INACTIVATE
Payee Name:		Phone No:	
Taxpayer ID:	-	Butler County Employee:	YES NO
SSN:	- -		
Address:			
Required E-mail Address:			
Bank Name:			
Bank Routing Number:		Savings Acct No:	
		Checking Account No:	

ATTACH VOIDED CHECK OR A BANK LETTER CONTAINING ACCOUNT AND ROUTING INFORMATION

Authorization: This authorizes the Butler County Auditor's Office to send credit entries (and appropriate debit and adjustment entries), electronically or by any other commercially accepted method, to my (our) account indicated above and to other accounts I (we) identify in the future (the "Account"). This authorizes the financial institution holding the Account to post all such entries.

I agree that the ACH transactions authorized herein shall comply with all applicable U.S. Law. I understand and accept the conditions of participation in the direct deposit program.

This authorization will be in effect until the Butler County Auditor's Office receives a written termination notice from myself and has a reasonable opportunity to act on it.

Print Name:	Title:
Signature:	Date:



NON-MEMBER ACKNOWLEDGMENT

Ohio Public Employees Retirement System
277 East Town Street, Columbus, Ohio 43215-4642

Employer Services: 1-888-400-0965
www.opers.org

This form is to be completed if you are an individual who begins providing personal services to a public employer on or after Jan. 7, 2013 but are not considered by the public employer to be a public employee (e.g., you are an independent contractor) and will not have contributions made to OPERS.

Employer: Please complete Step 2. The form must be completed and returned to the retirement system no later than 30 days after the individual begins providing personal services to the public employer. You may fax the completed form to 614-857-1152 or email to employeroutreach@opers.org.

If the individual providing this service is receiving a benefit from OPERS, you must submit the Notice of Re-employment or Contract Services of an OPERS Benefit Recipient, form SR-6, in addition to the Non-Member Acknowledgement, form PEDACKN, for the service listed below. Failure to submit the SR-6 form timely may result in an overpayment of pension billed to the employer.

STEP 1: Personal Information

First Name

MI

Last Name

Date of Birth: Month Day Year

STEP 2: Public Employer Information (To be completed by the Public Employer)

Name of Public Employer for which individual is providing personal services

B U T L E R C O U N T Y

Employer Contact

First Name

MI

Last Name

J I L L

M

C O L E

Employer Code

2 0 2 5

Employer Contact Phone Number

5 1 3 — 8 8 7 — 3 1 5 5

Service Provided to Public Employer

Start Date of Service

Month Day Year

End Date of Service

Month Day Year

STEP 3: Acknowledgment

The public employer identified in Step 2 has classified you as an independent contractor or another classification other than a public employee. Ohio law requires that you acknowledge in writing that you have been informed that the public employer identified in Step 2 has classified you as an independent contractor or another classification other than a public employee for the services described in Step 2 and that you have been advised that contributions to OPERS will not be made on your behalf for these services.

If you disagree with the public employer's classification, you may contact OPERS to request a determination as to whether you are a public employee eligible for OPERS contributions for this service. Ohio law provides that a request for a determination must be made within five years after you begin providing personal services to the public employer, unless you are able to demonstrate through medical records to the Board's satisfaction that at the time the five-year period ended, you were physically or mentally incapacitated and unable to request a determination.

By signing this form, you are acknowledging that the public employer for whom you are providing personal services has informed you that you have been classified as an independent contractor or another classification other than a public employee and that no contributions will be remitted to OPERS for the personal services you provide to the public employer. This acknowledgment will remain valid as long as you continue to provide the same services to the same employer with no break in service regardless of whether the initial contract period is extended by any additional agreement of the parties. You also acknowledge that you understand you have the right to request a determination of your eligibility for OPERS membership if you disagree with the public employer's classification. A copy of this form must be sent to OPERS.

Signature _____ Today's Date ____/____/____
Do not print or type name

CIVIL RIGHTS COMPLIANCE

Vendor agrees that in the performance of this agreement there shall be no discrimination against an employee because of race, color, sex, religion, national origin, or any other factor as specified in the Civil Rights Act of 1964 and subsequent amendments.

Signature of Representative of Vendor

Name of Company

Date

Attachment A

STATE OF OHIO)
)ss.
COUNTY OF)

Page 1 of 1

NON-COLLUSION AFFIDAVIT

STATE OF OHIO)

)ss.

COUNTY OF)

I, _____,
(name of party signing affidavit)

(title)

being duly sworn, do depose and say:

That _____
(Name of Individual or Company)

its agent, officers or employees have not directly or indirectly entered into any agreement,
participated in any collusion, or otherwise taken any action in restraint of free competitive
bidding
in connection with this proposal.

(Signature)

(Title)

Sworn to and subscribed before me this _____ day of _____, _____.

(NOTARY PUBLIC)

SEAL

Ohio

My commission expires
