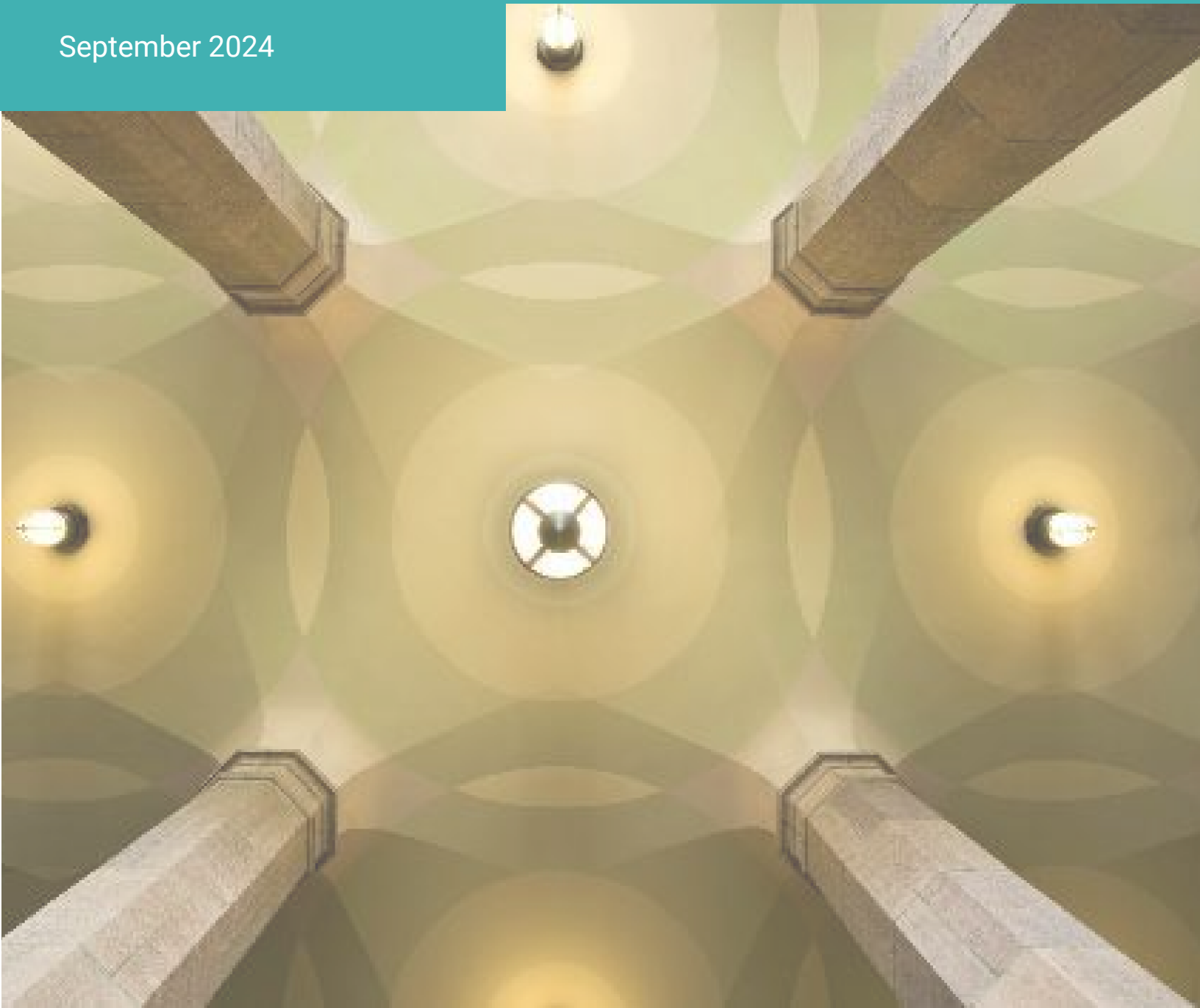


DEPARTMENT OF FINANCE | division of purchases

Council Report for monthly contract abstracts

September 2024



Contract Information

Contract & Solicitation Title: Provide Head Start - Early Head Start Classroom Materials
 Contract Summary: provide head start and early head start classroom materials
 Contract Number: 6570381 Solicitation Number: 365305 Requisition Number: 4099698
 Replaces Expiring or Expired Contract? (Enter "No" or Contract No and Expiration Date): 451634, 5/29/2024, 451631, 5/21/2024, 451633, 4/15/2024, 451630, 4/16/2024
 Type of Contract/PO: IDIQ Contract **Requires Council Legislation:** No
High Risk Contract (Per Finance Department Contract Risk Management Policy): No
Sexual Harassment Training Required (per BL2018-1281): Yes
 Estimated Start Date: 8/26/2024 Estimated Expiration Date: 8/25/2029 Contract Term: 60 months
 Estimated Contract Life Value: 1,210,000.00 Fund:* 31502 BU:* 75308450
 (*Depending on contract terms, actual expenses may hit across various departmental BUs and Funds at PO Levels)
 Payment Terms: Net 30 Selection Method: ITB
 Procurement Staff: Marissa Conklin BAO Staff: Christopher Wood
 Procuring Department: MAC Department(s) Served: MAC

Prime Contractor Information

Prime Contracting Firm: Natural Blue II, LLC ISN#: 1001234
 Address: 1985 South Ocean Drive City: Hallandale Beach State: FL Zip: 33009
 Prime Contractor is a Uncertified/Unapproved: SBE SDV MBE WBE LGBTBE (select/check if applicable)
 Prime Company Contact: Tye Coleman Email Address: tye@gotshirtme.com Phone #: 646-919-5468
Prime Contractor Signatory: Kenny Cohan **Email Address:** kennycohan@yahoo.com

Business Participation for Entire Contract

Small Business and Service Disabled Veteran Business Program: No SBE/SDV participation
 Amount: 0 Percent, if applicable: 0
Equal Business Opportunity (EBO) Program: Program Not Applicable
 MBE Amount: 0 MBE Percent, if applicable: 0
 WBE Amount: 0 WBE Percent, if applicable: 0
Federal Disadvantaged Business Enterprise: No
 Amount: 0 Percent, if applicable: 0
 Note: Amounts and/or percentages are not exclusive.
 B2GNow (Contract Compliance Monitoring): No

Summary of Offer

Offeror Name	MBE	WBE	SBE	SDV	LGBTBE	Score	Evaluated Cost	Result
	(check as applicable)					(RFP Only)		
<u>Lakeshore Learning Materials</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>awarded per group</u>	<input type="checkbox"/>
<u>Awarded</u>								
<u>Educational Products, Inc</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>awarded per group</u>	<input type="checkbox"/>
<u>Awarded</u>								
<u>Really Good Stuff</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>awarded per group</u>	<u>Awarded</u>



Contract Abstract

Kaplan Early Learning Company	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	awarded per group	Awarded
Natural Blue II, LLC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	awarded per group	Awarded

Continuous of Summary of Offer

Offeror Name	MBE	WBE	SBE	SDV	LGBTBE	Score (RFP Only)	Evaluated Cost	Result
Chalk Spinner LLC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Evaluated but not selected
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:



Contract Information

Contract & Solicitation Title:

Contract Summary:

Contract Number: Solicitation Number: Requisition Number:

Replaces Expiring or Expired Contract? (Enter "No" or Contract No and Expiration Date):

Type of Contract/PO: **Requires Council Legislation:**

High Risk Contract (Per Finance Department Contract Risk Management Policy):

Sexual Harassment Training Required (per BL2018-1281):

Estimated Start Date: Estimated Expiration Date: Contract Term:

Estimated Contract Life Value: Fund:* BU:*

(*Depending on contract terms, actual expenses may hit across various departmental BUs and Funds at PO Levels)

Payment Terms: Selection Method:

Procurement Staff: BAO Staff:

Procuring Department: Department(s)

Served:

Prime Contractor Information

Prime Contracting Firm: ISN#:

Address: City: State: Zip:

Prime Contractor is a : SBE SDV MBE WBE LGBTBE (select/check if applicable)

Prime Company Contact: Email Address: Phone #:

Prime Contractor Signatory: Email Address:

Business Participation for Entire Contract

Small Business and Service Disabled Veteran Business Program:

Amount: Percent, if applicable:

Equal Business Opportunity (EBO) Program:

MBE Amount: MBE Percent, if applicable:

WBE Amount: WBE Percent, if applicable:

Federal Disadvantaged Business Enterprise:

Amount: Percent, if applicable:

Note: Amounts and/or percentages are not exclusive.

B2GNow (Contract Compliance Monitoring):

Summary of Offer

Offeror Name	MBE	WBE	SBE	SDV	LGBTBE	Score	Evaluated Cost	Result
	(check as applicable)					(RFP Only)		
<input type="text" value="TT of Metro Center Inc dba Downtown Nashville Niss"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text" value="100"/>	<input type="text" value="\$221,025.25"/>	<input type="text" value="Awarded"/>
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	Select from the Following:



Contract Information

Contract & Solicitation Title: Toyota Vehicle Parts and Repair
 Contract Summary: provide parts and repair services Toyota vehicles under 20,000lbs GVW
 Contract Number: 6573452 Solicitation Number: 362259 Requisition Number: 4096682
 Replaces Expiring or Expired Contract? (Enter "No" or Contract No and Expiration Date): No
 Type of Contract/PO: Multi-Year Contract **Requires Council Legislation:** No
High Risk Contract (Per Finance Department Contract Risk Management Policy): No
Sexual Harassment Training Required (per BL2018-1281): Yes
 Estimated Start Date: August 30, 2024 Estimated Expiration Date: August 29, 2029 Contract Term: 60
months
 Estimated Contract Life Value: \$3,000,000.00 Fund:* 51154 BU:* 10510010
 (*Depending on contract terms, actual expenses may hit across various departmental BUs and Funds at PO Levels)
 Payment Terms: Net 30 Selection Method: RFP
 Procurement Staff: Von Bell BAO Staff: Christopher Wood
 Procuring Department: General Services (Fleet) Department(s) Served: General Services (Fleet)

Prime Contractor Information

Prime Contracting Firm: Cougar Nashville TYO Acquisition LLC dba Beaman Toyota ISN#: 1005350
 Address: 343 Harding Place City: Nashville State: TN Zip: 37211
 Prime Contractor is a Uncertified/Unapproved: SBE SDV MBE WBE LGBTBE (select/check if applicable)
 Prime Company Contact: Jarvis Williams Sr Email Address: jwilliams@beamanauto.com Phone #: (423) 486-6523
 Prime Contractor Signatory: Elizabeth Thompson Email Address: ethompson@beamanauto.com

Business Participation for Entire Contract

Small Business and Service Disabled Veteran Business Program: N/A
 Amount: Percent, if applicable:
Equal Business Opportunity (EBO) Program: Program Not Applicable
 MBE Amount: MBE Percent, if applicable:
 WBE Amount: WBE Percent, if applicable:
Federal Disadvantaged Business Enterprise: No
 Amount: Percent, if applicable:
 Note: Amounts and/or percentages are not exclusive.
 B2GNow (Contract Compliance Monitoring): No

Summary of Offer

Offeror Name	MBE	WBE	SBE	SDV	LGBTBE	Score	Evaluated Cost	Result
	(check as applicable)					(RFP Only)		
<u>Cougar Nashville TYO Acquisition LLC dba Beaman To</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>95</u> <u>198,922.73</u>
<u>Awarded</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	Select from the Following:
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	Select from the Following:



Contract Information

Contract & Solicitation Title:
 Contract Summary:
 Contract Number: Solicitation Number: Requisition Number:
 Replaces Expiring or Expired Contract? (Enter "No" or Contract No and Expiration Date):
 Type of Contract/PO: **Requires Council Legislation:**
High Risk Contract (Per Finance Department Contract Risk Management Policy):
Sexual Harassment Training Required (per BL2018-1281):
 Estimated Start Date: Estimated Expiration Date: Contract Term:
 Estimated Contract Life Value: Fund:* BU:*
 (*Depending on contract terms, actual expenses may hit across various departmental BUs and Funds at PO Levels)
 Payment Terms: Selection Method:
 Procurement Staff: BAO Staff:
 Procuring Department: Department(s) Served:

Prime Contractor Information

Prime Contracting Firm: ISN#:
 Address: City: State: Zip:
 Prime Contractor is a : SBE SDV MBE WBE LGBTBE (select/check if applicable)
 Prime Company Contact: Email Address: Phone #:
Prime Contractor Signatory: **Email Address:**

Business Participation for Entire Contract

Small Business and Service Disabled Veteran Business Program:
 Amount: Percent, if applicable:
Equal Business Opportunity (EBO) Program:
 MBE Amount: MBE Percent, if applicable:
 WBE Amount: WBE Percent, if applicable:
Federal Disadvantaged Business Enterprise:
 Amount: Percent, if applicable:
 Note: Amounts and/or percentages are not exclusive.
 B2GNow (Contract Compliance Monitoring):

Summary of Offer

Offeror Name	MBE	WBE	SBE	SDV	LGBTBE	Score (RFP Only)	Evaluated Cost	Result
	(check as applicable)							
<input type="text" value="BBG, Inc"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text" value="91.00"/>	<input type="text" value="622,874.93"/>	<input type="text" value="Awarded"/>
<input type="text" value="Moffett-Revell LLC"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text" value="90.90"/>	<input type="text" value="894,047.14"/>	
<input type="text" value="Awarded"/>								
<input type="text" value="Feasibility Research Group"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text" value="77.77"/>	<input type="text" value="995,462.96"/>	
<input type="text" value="Evaluated but not selected"/>								



Contract Information

Contract & Solicitation Title: **Professional Grounds, Landscaping, and Irrigation Services**
 Contract Summary: **Contractor shall provide professional landscaping, grounds, and irrigation services.**
 Contract Number: **6574517** Solicitation Number: **366376** Requisition Number: **4095240**
 Replaces Expiring or Expired Contract? (Enter "No" or Contract No and Expiration Date): **451280 expired on 6/30/2024.**
 Type of Contract/PO: **IDIQ Contract** **Requires Council Legislation:** **No**
High Risk Contract (Per Finance Department Contract Risk Management Policy): **Yes**
Sexual Harassment Training Required (per BL2018-1281): **Yes**
 Estimated Start Date: **9/30/2024** Estimated Expiration Date: **9/29/2029** Contract Term: **60 months**
 Estimated Contract Life Value: **\$20,000,000.00** Fund:* **10101** BU:* **10103220**
 (*Depending on contract terms, actual expenses may hit across various departmental BUs and Funds at PO Levels)
 Payment Terms: **Net 15** Selection Method: **RFP**
 Procurement Staff: **Brad Wall** BAO Staff: **Evans Cline**
 Procuring Department: **General Services** Department(s) Served: **General Services/Metro Wide**

Prime Contractor Information

Prime Contracting Firm: **Premiere Building Maintenance Corporation** ISN#: **388**
 Address: **1416 McCalla Avenue** City: **Knoxville** State: **TN** Zip: **37915**
 Prime Contractor is a **Certified/Approved**: SBE SDV MBE WBE LGBTBE (select/check if applicable)
 Prime Company Contact: **Jackie Bass** Email Address: **jbass@premierebuilding.com** Phone #: **(615) 810-9611**
 Prime Contractor Signatory: **Mark Isom** Email Address: **misom@premierebuilding.com**

Business Participation for Entire Contract

Small Business and Service Disabled Veteran Business Program: **SBE/SDV Participation**

Amount: **TBD** Percent, if applicable: **11.00**

Equal Business Opportunity (EBO) Program: **M/WBE Participation**

MBE Amount: **TBD** MBE Percent, if applicable: **100.00**

WBE Amount: **TBD** WBE Percent, if applicable: **100.00**

Federal Disadvantaged Business Enterprise: **No**

Amount: **0.00** Percent, if applicable: **0.00**

Note: Amounts and/or percentages are not exclusive.

B2GNow (Contract Compliance Monitoring): **Yes**

Summary of Offer

Offeror Name	MBE	WBE	SBE	SDV	LGBTBE	Score (RFP Only)	Evaluated Cost	Result
	(check as applicable)							
Premiere Building Mainten	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	74.42	\$4,916,626.09	Awarded
Beard Pro	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	57.49	\$4,487,327.65	Evaluated but not selected
Landscape Services, Inc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	44.26	\$3,830,775.09	Evaluated but not selected
Rotolo Consultants, Inc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A	N/A	Non-responsive to solicitation



Contract Information

Contract & Solicitation Title: Medical & Dental Supplies and Equipment
 Contract Summary: provide medical & dental supplies and equipment
 Contract Number: 6575393 Solicitation Number: 369392 Requisition Number: 4094956
 Replaces Expiring or Expired Contract? (Enter "No" or Contract No and Expiration Date): Yes, #6493915 Expired 6/20/24
 Type of Contract/PO: Multi-Year Contract **Requires Council Legislation:** No
High Risk Contract (Per Finance Department Contract Risk Management Policy): No
Sexual Harassment Training Required (per BL2018-1281): Yes
 Estimated Start Date: August 30, 2024 Estimated Expiration Date: August 29, 2029 Contract Term: 60 months
 Estimated Contract Life Value: \$5,420,000 Fund:* 10101 BU:* 38161000
 (*Depending on contract terms, actual expenses may hit across various departmental BUs and Funds at PO Levels)
 Payment Terms: Net 15 Selection Method: RFP
 Procurement Staff: Von Bell BAO Staff: Christopher Wood
 Procuring Department: Metro Health Department Department(s) Served: Metro Health Department

Prime Contractor Information

Prime Contracting Firm: Trako Dental & Medical Supply Inc ISN#: 1135
 Address: 900 Technology Way #250 City: Libertyville State: IL Zip: 60048
 Prime Contractor is a Certified/Approved: SBE SDV MBE WBE LGBTBE (select/check if applicable)
 Prime Company Contact: Tracey Lucchesi Email Address: tlucchesi@trakodental.com Phone #: 847-752-8193
Prime Contractor Signatory: Tracey Lucchesi **Email Address:** tlucchesi@trakodental.com

Business Participation for Entire Contract

Small Business and Service Disabled Veteran Business Program: N/A
 Amount: Percent, if applicable:
Equal Business Opportunity (EBO) Program: Program Not Applicable
 MBE Amount: MBE Percent, if applicable:
 WBE Amount: WBE Percent, if applicable:
Federal Disadvantaged Business Enterprise: No
 Amount: Percent, if applicable:
 Note: Amounts and/or percentages are not exclusive.
 B2GNow (Contract Compliance Monitoring): No

Summary of Offer

Offeror Name	MBE	WBE	SBE	SDV	LGBTBE	Score	Evaluated Cost	Result
	(check as applicable)					(RFP Only)		
<u>Trako Dental & Medical Supply Inc.</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>97.74</u>	<u>2,958,197.50</u>
<u>Awarded</u>								
<u>McKesson Medical-Surgical Government Solutions LLC</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>61.00</u>
<u>\$2,958,197.50</u>	<u>Evaluated but not selected</u>							



Contract Information

Contract & Solicitation Title:

Contract Summary:

Contract Number: Solicitation Number: Requisition Number:

Replaces Expiring or Expired Contract? (Enter "No" or Contract No and Expiration Date):

Type of Contract/PO: **Requires Council Legislation:**

High Risk Contract (Per Finance Department Contract Risk Management Policy):

Sexual Harassment Training Required (per BL2018-1281):

Estimated Start Date: Estimated Expiration Date: Contract Term:

Estimated Contract Life Value: Fund: * BU: *

(*Depending on contract terms, actual expenses may hit across various departmental BUs and Funds at PO Levels)

Payment Terms: Selection Method:

Procurement Staff: BAO Staff:

Procuring Department: Department(s) Served:

Prime Contractor Information

Prime Contracting Firm: ISN#:

Address: City: State: Zip:

Prime Contractor is a : SBE SDV MBE WBE LGBTBE (select/check if applicable)

Prime Company Contact: Email Address: Phone #:

Prime Contractor Signatory: **Email Address:**

Business Participation for Entire Contract

Small Business and Service Disabled Veteran Business Program:

Amount: Percent, if applicable:

Equal Business Opportunity (EBO) Program:

MBE Amount: MBE Percent, if applicable:

WBE Amount: WBE Percent, if applicable:

Federal Disadvantaged Business Enterprise:

Amount: Percent, if applicable:

Note: Amounts and/or percentages are not exclusive.

B2GNow (Contract Compliance Monitoring):

Summary of Offer

Offeror Name	MBE	WBE	SBE	SDV	LGBTBE	Score	Evaluated Cost	Result
	(check as applicable)					(RFP Only)		
<input type="text" value="Metrohm Inc"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text" value=""/>	<input type="text" value="\$296,557.31"/>	<input type="text" value="Awarded"/>
<input type="text" value="Thermo Fisher"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text" value=""/>	<input type="text" value="\$663,102.20"/>	<input type="text" value="Evaluated but not selected"/>
<input type="text" value="Shimadzu"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value="Non-responsive to solicitation"/>
<input type="text" value="Mclean"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value="Non-responsive to solicitation"/>



Contract Abstract

Midland

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

Non-responsive to solicitation

Continuous of Summary of Offer

Offeror Name	MBE	WBE	SBE	SDV	LGBTBE	Score	Evaluated Cost	Result
	(check as applicable)					(RFP Only)		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Select from the Following:



Contract Information

Contract & Solicitation Title:

Contract Summary:

Contract Number: Solicitation Number: Requisition Number:

Replaces Expiring or Expired Contract? (Enter "No" or Contract No and Expiration Date):

Type of Contract/PO: **Requires Council Legislation:**

High Risk Contract (Per Finance Department Contract Risk Management Policy):

Sexual Harassment Training Required (per BL2018-1281):

Estimated Start Date: Estimated Expiration Date: Contract Term:

Estimated Contract Life Value: Fund:* BU:*

(*Depending on contract terms, actual expenses may hit across various departmental BUs and Funds at PO Levels)

Payment Terms: Selection Method:

Procurement Staff: BAO Staff:

Procuring Department: Department(s) Served: **Animal Care & Control**

Prime Contractor Information

Prime Contracting Firm: ISN#:

Address: City: State: Zip:

Prime Contractor is a : SBE SDV MBE WBE LGBTBE (select/check if applicable)

Prime Company Contact: Email Address: Phone #:

Prime Contractor Signatory: Email Address:

Business Participation for Entire Contract

Small Business and Service Disabled Veteran Business Program:

Amount: Percent, if applicable:

Equal Business Opportunity (EBO) Program:

MBE Amount: MBE Percent, if applicable:

WBE Amount: WBE Percent, if applicable:

Federal Disadvantaged Business Enterprise:

Amount: Percent, if applicable:

Note: Amounts and/or percentages are not exclusive.

B2GNow (Contract Compliance Monitoring):

Summary of Offer

Offeror Name	MBE	WBE	SBE	SDV	LGBTBE	Score	Evaluated Cost	Result
	(check as applicable)					(RFP Only)		
<input type="text" value="Elizabeth Fellows"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text" value=""/>	<input type="text" value="\$165,768.94"/>	<input type="text" value="Awarded"/>
<input type="text" value=""/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value="Select from the Following:"/>
<input type="text" value=""/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value="Select from the Following:"/>

