

OKLAHOMA COUNTY INCOMPLETE REQUISITIONS REPORT

DATE PRINTED--: 05-18-2010

Requisition No--: 11007065
Requisition Type--: Purchase Requisition
Creation Date--: 05-18-2010
Description--: Blanket for Law database access, Oklahoma Enhanced w/ Full Shepa

Requestor	Qty/Amt	Unit Price	Line Amt	Category
Barber, Angela M	3,144	\$ 1.00	\$3,144.00	SERVICE.SUBSCRIPTION
Item Description: Blanket for Law database access, Oklahoma Enhanced w/ Full Shepard for (2) users for FY10-11				
Vendor: LEXISNEXIS A DIVISION OF REED ELSEVIER, INC				
Distribution: 1161.5110.54030.2011				
Requisition Total:				\$3,144.00

Subscriptions
Tris. Boarding
Spec Rev

Approval Action (Circle One)

Approve Forward Reject

Forward To : _____

Note : _____

Signature: _____

PENDING APPROVAL

OKLAHOMA COUNTY, OKLAHOMA

BOARD OF COUNTY COMMISSIONERS

STANDARD SERVICE CONTRACT BETWEEN COUNTY AND VENDOR

CONTRACT made as of the 1st day of July 2010

BETWEEN the **COUNTY:** The Board of County Commissioners of the
County of Oklahoma
320 Robert S. Kerr, Rm. 101
Oklahoma City, Oklahoma 73102

on behalf of: **Oklahoma County Sheriff's Office**
Contact Person: **Angela Barber**
Telephone Number: **405-713-1944**

and the **VENDOR:** **LEXIS-NEXIS, a division of Reed Elsevier Inc.**
Address: **9443 SPRINGBORO PIKE, BLDG 7**
MIAMISBURGH, OH 45342
Contact Person: **Amber Stargel**
Telephone Number: **937-865-6800 x54628**
Fax Number: **866-960-2789**

for the following maintenance or services:

Law Database Access, Oklahoma Enhanced with Full Shepard for (2) Users
for account#11671J.

This Contract is a Renewal XX, New _____ Contract.
This contract has been examined and approved as to legality by the District Attorney, Oklahoma
County.


Assistant District Attorney

5/19/2010
Date

THE COUNTY AND THE VENDOR AGREE AS SET FORTH BELOW.

Standard contract consisting of 3 pages
with 1 page of attachments

PENDING APPROVAL

ARTICLE 1 MAINTENANCE/SERVICES

The Vendor shall supply the following maintenance/services as required by the Contract and Bid Specifications: (describe item/s and serial numbers/s to be maintained)

Law Database Access, Oklahoma Enhanced with Full Shepard for (2) Users **For account#11671J.**

ARTICLE 2 INSURANCE/LIABILITY

The Vendor agrees to maintain liability and Workers' Compensation insurance to cover the acts of Vendor and his employees or agents regarding any services rendered pursuant to this contract. Such liability and Workers' Compensation insurance shall be sufficient in coverage and policy limitations to cover all claims arising under the Oklahoma Governmental Tort Claims Act. The Vendor agrees to indemnify and hold harmless the County for any negligent acts of Vendor in the performance of this Contract.

ARTICLE 3 TERM OF CONTRACT AND RENEWAL

This contract shall commence on July 1st, 2010 and shall terminate on June 30th, 2011. The contract is renewable for an additional fiscal year upon approval of both parties.

Unless terminated earlier, this Contract will automatically terminate at the end of the current fiscal year (June 30) pursuant to Article 10, Section 26 of the Oklahoma Constitution.

It is agreed that the County may terminate this contract at any time before the end of the fiscal year for any reason after giving the Vendor a 30 day written notice of termination. It is further agreed the County may terminate this Contract immediately if the Vendor fails to provide services in accordance with this contract or in any way breaches any of the provisions of the Contract.

ARTICLE 4 CONTRACT AMOUNT

The County shall pay the Vendor for the maintenance/services of this equipment as follows:

\$131.00 per month per User. \$3,144.00 total annually.

PENDING APPROVAL

ARTICLE 5 MISCELLANEOUS PROVISIONS

ARTICLE 6 BLANKET PURCHASE ORDER

This contract is null and void unless the amount of the contract has been encumbered by the Oklahoma County Clerk. Upon approval of this contract a Blanket Purchase Order Number will be issued by Oklahoma County as set out below.

ARTICLE 7 LEGAL AUTHORITY

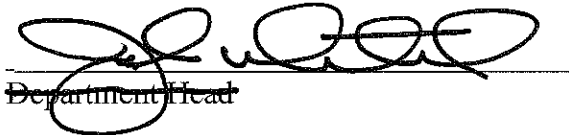
It is expressly understood that the County is a subdivision of the State of Oklahoma and consequently may only contract pursuant to the procedures and with limitations provided by Oklahoma Law, including the County Purchasing Act, 19 O.S.A. Section 1500 et. seq., 19 O.S.A. Section 1 and 62 O.S.A., Section 430.1.

APPROVED this _____ day of _____, 20_____.

BOARD OF COUNTY COMMISSIONERS
OKLAHOMA COUNTY, OKLAHOMA

Approved by County ~~Dept~~:

Chairman


Department Head

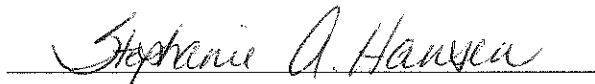
ATTEST:

Carolynn Caudill, County Clerk

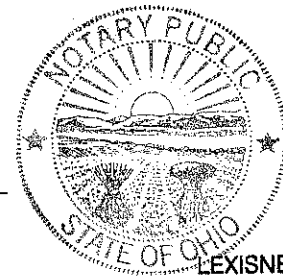
VENDOR: 

By: **BRIAN K. CUMMINGS**
PRICING ANALYST

Attest or Notary:



Requisition Number 11007065
Blanket Purchase Order Number _____



PENDING APPROVAL

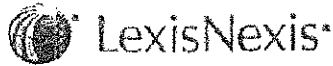
RIDER NO. 1

Vendor at its expense shall defend or, at its option, settle any action or proceeding of any kind or description based upon a third party's claim of death or personal injury of any person or property damage due to the negligence or willful misconduct of Vendor, asserted against County by such third party provided: (i) the death or personal injury to any person or the property damage was not caused in whole or in part by County; (ii) Vendor is given prompt notice of any such claim; and (iii) Vendor is given the right to control and direct the investigation, defense and settlement of each such claim to the fullest extent allowed by Oklahoma law. County, at the expense of Vendor, shall reasonably cooperate with Vendor in connection with the foregoing.

LEXISNEXIS LEGAL DEPT.
REVIEWED BY: MAPK
DATE: 22 April 10

PENDING APPROVAL

KCOW COPY
SLGovt



RENEW YOUR LEXISNEXIS SUBSCRIPTION
NOW BY SIGNING THIS LETTER AGREEMENT

Thank you for using LexisNexis as your provider of dynamic, up-to-date news, legal and business information. We are dedicated to giving you the cutting edge you need to thrive in today's business environment.

Currently you are using the LexisNexis services pursuant to a Subscription Plan Amendment (the "Amendment") that allows you to use selected information relevant to your needs in exchange for a fixed monthly commitment. The fixed-rate Amendment offers you significant savings over transactional or "pay-as-you-go" pricing. However, your Amendment will expire soon.

By signing below, you may extend the term for the following period at the new monthly commitment rate indicated below:

Customer Name:	Oklahoma County Sheriff's Office	Account Number:	116711
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Extension Period		Monthly Commitment
Beginning	7/1/08 to 6/30/09	\$ 244.00 = \$ 249.28 for year
Beginning	7/1/09 to 6/30/10	\$ 254.00
Beginning	7/1/10 to 6/30/11	\$ 262.00

Current Number of Attorneys/Judges*: 1
 Current Number of Other Government Professionals*: 1
 *Information required (if applicable) to complete this transaction.

These changes will be effective on 7/1/08. Except as expressly stated above, all other terms of the Amendment will remain unchanged and unaffected by this letter amendment.

If you have any questions about your new rate or would like to see a comparison of other pricing options, please contact me, your account representative, at:

Judy Stockton
Account Manager
512-372-9073
866-389-8675
512-794-0674
judth.stockton@lexisnexis.com

If you agree with the new monthly commitment and extended term, then please print this message, provide the information requested for the total number of attorneys and judges in your office along with the total of other government professionals then sign and date. Upon completion, return the signed letter amendment to me at the fax number listed above. In order for these changes to be effective on the date listed above, please sign and return this letter amendment no later than the 1st of June.

If you do not respond to this letter, please be advised that the Amendment will expire at the end of the current commitment period and you will be charged standard, transactional rates for use of the LexisNexis Services.

Customer Name: Oklahoma County Sheriff's Office

Authorized Signature: _____

Print Name: _____

Title: _____

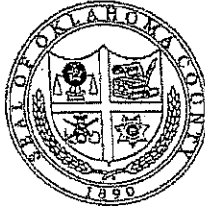
Date: _____

PENDING APPROVAL

DEC. 6. 2007 9:10AM

CO CLK PR AP

NO. 684 P. 2



CAROLYNN CAUDILL
OKLAHOMA COUNTY CLERK

MARK W. MISHOB, CHIEF DEPUTY

713-7184

VENDOR:

In order to process your vendor payments, we are required to keep on file ALL Vendor Tax ID numbers.

Please complete the appropriate boxes below and fill out the attached W-9 form.

If your company provides one of the services listed below to the County, please check the appropriate box: Legal _____ Medical _____ Rent _____ *N/A (None)*

PLEASE TYPE ALL INFORMATION TO ASSURE ACCURACY.

- | | Tax Identification Number |
|--|---------------------------|
| 1. <input checked="" type="checkbox"/> Corporation | <u>52-1471842</u> |
| 2. <input type="checkbox"/> Partnership | _____ |
| 3. <input type="checkbox"/> Individual/Proprietorship
(List Social Security number) | _____ |
| 4. <input type="checkbox"/> Other (Please explain) | _____ |

Legal Name as it appears on Tax documents filed with the IRS LexisNexis, a division of Reed Elsevier Inc.

Phone Number () _____ Fax Number () _____

The IRS requires 31% withholding on amounts paid to persons who have not submitted required Taxpayer Identification information. A Form 1099 will be mailed to the W-9 address on file to report payments to Individuals or Partnerships.

NOTE: If your company is listed as LLC, please designate whether it is Individual/Sole Proprietor, Corporation, or Partnership in accordance with IRS regulations

If you have any questions, please contact the Oklahoma County Clerk's office Accounts Payable Department at (405) 713-1516 or (405) 713-1547. Fax number (405) 713-1524.

320 ROBERT S. KERR, ROOM 107, OKLAHOMA CITY, OKLAHOMA 73102-3430
(405) 713-7184, FAX (405) 713-7171
countyclerk.oklahomacounty.org

(Sheriff)

Form **W-9**
(Rev. October 2007)
Department of the Treasury
Internal Revenue Service

**Request for Taxpayer
Identification Number and Certification**

Give form to the
requester. Do not
send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)
LexisNexis, a division of Reed Elsevier Inc.

Business name, if different from above

Check appropriate box: Individual/Sole proprietor Corporation Partnership
 Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, F=partnership) ▶ ----- Exempt payee
 Other (see instructions) ▶

Address (number, street, and apt. or suite no.)
9443 Springboro Pike

City, state, and ZIP code
Miamisburg OH 45342

List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number

or

Employer identification number
521471842

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (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, and
- I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 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. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here Signature of U.S. person ▶ *Christina M. Lony* Date ▶ *6/17/2009*

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,