

OKLAHOMA COUNTY INCOMPLETE REQUISITIONS REPORT

DATE PRINTED--: 05-18-2010

Requisition No--: 11007064
Requisition Type--: Purchase Requisition
Creation Date--: 05-18-2010
Description--: Blanket for annual maintenance and service for Packet Cluster So

Requestor	Qty/Amt	Unit Price	Line Amt	Category
Barber, Angela M	12,549.48	\$ 1.00	\$12,549.48	SERVICE.MISCELLANEOUS

Item Description: Blanket for annual maintenance and service for Packet Cluster Software FY10-11
Vendor: COLOSSUS INC DBA INTERACT PUBLIC SAFETY SYSTEMS Distribution: 1160.5100.54159.2011

Requisition Total: \$12,549.48

Approval Action (Circle One)

Approve Forward Reject

Forward To : _____

Note : _____

Signature: _____

--- Telecomm - Vendor maint
--- Sheriff
--- Suc fee

PENDING APPROVAL

OKLAHOMA COUNTY, OKLAHOMA
BOARD OF COUNTY COMMISSIONERS

STANDARD MAINTENANCE 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

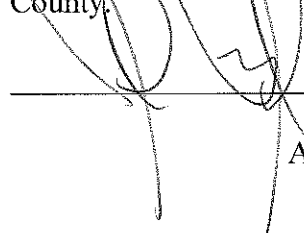
on behalf of: **Oklahoma County Sheriff's Office**(County Dept.)
Contact Person: **Angela Barber**
Telephone Number: **(405) 713-1944**

and the **VENDOR:** ***InterAct Public Safety Systems***
Address: ***300 Nickerson Road***
Marlborough, MA 01752
Contact Person: ***Karen Hicks***
Telephone Number: ***508-460-4012, fax: 508-460-4099***

for the following maintenance or services:

Annual Maintenance and Service for Packet Cluster Software and MobileCop Enterprise for FY 2010-2011

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

5/9/2010

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)

Annual Maintenance and Service for Packet Cluster Software and MobileCop Enterprise for FY 2010-2011

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:

To be billed monthly at \$1,045.79. The annual total is \$12,549.48.

ARTICLE 5 MISCELLANEOUS PROVISIONS

PENDING APPROVAL

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.

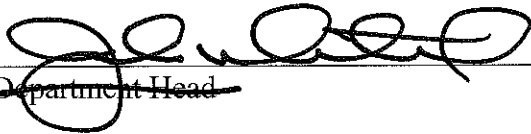
ARTICLE 7 LEGAL AUTHORITY

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 ~~Rep.:~~


~~Department Head~~

Chairman _____

ATTEST:

Carolynn Caudill, County Clerk

VENDOR: 

By: REN SOUZA

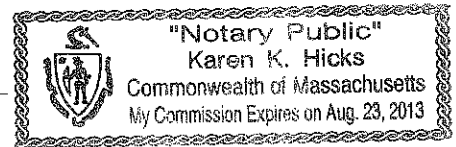
Attest or Notary:



Date: 04/00/2010 Exp: 08/23/2013

Requisition Number 11007024

Blanket Purchase Order Number _____



PENDING APPROVAL



Oklahoma County Sheriff's Office Maintenance Schedule 2010-2011

InterActMobile Product	Qty.	Unit Price	Extended Amount	Start Date	End Date
InfoServer increment for 201-500	10	\$ 34.92	\$ 349.20	7/1/10	6/30/11
CAD/RMS Multiple API	1	\$ 1,800.00	\$ 1,800.00	7/1/10	6/30/11
InfoExchange Server 1-49	1	\$ 900.00	\$ 900.00	7/1/10	6/30/11
InfoExchange Adaptor	1	\$ 450.00	\$ 450.00	7/1/10	6/30/11
MobileCop >= 600	10	\$ 89.16	\$ 891.60	7/1/10	6/30/11
Enterprise License	22	\$ 45.00	\$ 990.00	7/1/10	6/30/11
MobileCop LAN	5	\$ 99.00	\$ 495.00	7/1/10	6/30/11
PocketCop Client License 1-49	46	\$ 89.16	\$ 4,101.36	7/1/10	6/30/11
Client Mag Stripe reader licenses	1	\$ 9.00	\$ 9.00	7/1/10	6/30/11
EPM Command Server	1	\$ 900.00	\$ 900.00	7/1/10	6/30/11
ClusterLink	1	\$ 900.00	\$ 900.00	7/1/10	6/30/11
InfoExchange Adaptor - E-Justice	1	\$ 450.00	\$ 450.00	7/1/10	6/30/11
MobileCop Navigator w/o MapPoint	1	\$ 27.00	\$ 27.00	7/1/10	6/30/11
MobileCop & InfoServer Enterprise	2	\$ 143.16	\$ 286.32	7/1/10	6/30/11
Total 2010-2011 Maintenance:			\$ 12,549.48		

Today's Date: 3/22/10
Provided by: Bonnie J. Morse
Monthly: \$ 1,045.79

PENDING APPROVAL

OKLAHOMA
COUNTY

SHERIFF



JOHN WHEITSEL, SHERIFF
www.oklahomacounty.org

201 N. Shartel
Oklahoma City, OK 73102-2259
(405) 713-1000 • (405) 713-~~1000~~ fax
TC61

VENDOR:

In order to process your vendor payment 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 _____

PLEASE TYPE ALL INFORMATION TO ASSURE ACCURACY.

- | | <u>Tax Identification Number</u> |
|--|----------------------------------|
| 1. <input checked="" type="checkbox"/> Corporation | <u>56-1487375</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: Colossus Incorporated
dba INTERACT PUBLIC SAFETY SYSTEMS

Phone Number 336-397-5300 Fax Number 336-217-8488

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.

If you have any questions, please contact the Oklahoma County Clerk's office Accounts Payable Department @ (405)713-1516.

Department submitting form to A/P: Sheriff's Department

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.

Name (as shown on your income tax return)
Colossus, Incorporated

Business name, if different from above
d/b/a InterAct Public Safety Systems

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

Address (number, street, and apt. or suite no.)
102 W. 3rd Street, Suite 750

City, state, and ZIP code
Winston-Salem, NC 27101

Requester's name and address (optional)

List account number(s) here (optional)
(Remittance Address: P. O. Box 671713, Dallas, TX 75267-1713)

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.

Social security number	
or	
Employer identification number	
56	1487275

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

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 ▶  Date ▶ **04/14/2010**

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,