



SPECIFICATIONS, INSTRUCTIONS, AND PROPOSAL FORMS

FOR

**RFP #21135**

**FURNISH AND DELIVERY OF JANITORIAL SUPPLIES AND  
MATERIALS TO VARIOUS FACILITIES ON AN “AS NEEDED” TERM  
AGREEMENT BASIS**

OF THE

CLEVELAND MUNICIPAL SCHOOL DISTRICT

DBA: CLEVELAND METROPOLITAN SCHOOL DISTRICT

1111 Superior Avenue E, Suite 1800

Cleveland, Ohio 44114

UNDER THE DIRECTION OF THE FACILITIES DIVISION OF THE BOARD OF  
EDUCATION OF THE CLEVELAND METROPOLITAN SCHOOL DISTRICT  
CUYAHOGA COUNTY, OHIO

## **Table of Contents**

Section I	Notice of Request for Proposals	3
	Letter Requesting Proposal	4

### **PART I: Required Purchasing Division Documents and Instructions**

Section II	Instructions to Proposers	5-8
	Acknowledgement	9
	Vendor Request Form	10
	Taxpayer ID Form	11
	No Proposal Form	12
	Conflict of Interest Form	13-14
	Debarment Form	15-16
Section III	Proposer's Qualification Form	17-21
	<i>Sample: State of Ohio Insurance</i>	22
	<i>Sample: Standard ACORD Insurance Form</i>	23
Section IV	Non-Collusion Affidavit	24
Section V	Diversity Business Enterprise Participation Forms	
	Part I	25-31
	Part II	32-38
Section VI	EOA: Contractual Declaration Forms	
	Part III	39-45
	Employment Data Form	46
	<i>Sample: Service Agreement</i>	47-50
	<b>**Do Not Complete**</b>	

### **PART II: Specifications and Proposal Forms**

Section I:	Introduction	52
Section II:	Cleveland Municipal School District General Information	
Section III:	General Service Requirements	
Section IV:	Vendor Profile	
Section V:	Proposal Process	
Section VI:	Contract Period and Award	53
Section VII:	Evaluation Criteria	54
Section VIII:	Proposal Requirements	55
Section IX:	References	56
Section X:	Specifications	57
Section XI:	Cost Proposal Forms	58-64

*Attachment A: Estimated Supplies for a 90 Day Period*

*Attachment B: Delivery Site Listing*

## **SECTION I: NOTICE OF REQUEST FOR PROPOSALS #21135**

Separate, sealed proposals for the requirement set forth below will be received in the Cashiers Office of the Board of Education of the Cleveland Metropolitan School District, 1111 Superior Avenue E, Suite 1800, Cleveland, Ohio 44114, on or before **1:00 pm** current local time on **January 14, 2015**

### **FURNISH AND DELIVERY OF JANITORIAL SUPPLIES AND MATERIALS TO VARIOUS FACILITIES ON AN "AS NEEDED" TERM AGREEMENT BASIS**

Copies of Instructions to Proposers, Specifications, Affirmative Action and Diversity Business Enterprise Forms may be obtained directly from the District's Web Page:

[www.clevelandmetroschools.org/purchasing](http://www.clevelandmetroschools.org/purchasing). Please click on the RFP number. If you need assistance please contact **Denyse.Hirsch@clevelandmetroschools.org** - telephone # (216) 838-0413.

There will not be a pre-proposal meeting for this RFP. All questions and/or concerns must be submitted, in writing **ONLY, by 12:00 pm on December 29, 2014** at the email address given above, or via fax to 216-436-5118.

No Proposal may be withdrawn for at least ninety (90) days after the scheduled closing time for receipt of Proposals by order of the Board of Education of the Cleveland Metropolitan School District, Cuyahoga County, Ohio.

The Cleveland Metropolitan School District reserves the right to reject any and all Proposals, to waive any and all informalities or irregularities, and to disregard all non-conforming responsive conditional Proposals.

The Cleveland Metropolitan School District does not discriminate in educational programs, activities or employment on the basis of race, color, national origin, sex, age, religion or disability.

Proposers on this work shall be required to comply with all applicable requirements pertaining to fair labor, state and local government.

M. Angela Foraker  
Director of Procurement

## SECTION I: LETTER TO PROPOSERS

Date: December 17, 2014

Subject: **Request for Proposals to Furnish and Deliver Janitorial Supplies and Materials to Various Facilities on an "As Needed" Term Agreement Basis**

Gentlemen/Madams:

In order to be considered, all proposals must be received at the Cashiers Office of the Cleveland Metropolitan School District, 1111 Superior Avenue E, Suite 1800, Cleveland, Ohio 44114 on or before **1:00 p.m., January 14, 2015**. All proposals must be submitted in a sealed envelope or package. One (1) original, with blue ink signatures, and Two (2) copies of the proposal, including supporting documentation, must be submitted. The Proposal Name and RFP number must be stated on the exterior of the submission envelope(s). This includes shipping labels.

Written questions will be accepted via e-mail or fax until **12:00 pm on December 29, 2014**. No telephone calls will be permitted. Send questions to: **Fax # 216-436-5118** or e-mail your questions to: **Denyse.Hirsch@clevelandmetroschool.org** Proposal number and title must be included. All questions/concerns with corresponding answers will be sent to every prospective vendor. Any errors and/or omissions reported will be addressed via Addenda which will be issued no later than **January 6, 2015**.

Under no circumstances should any person or firm interested in providing services identified in this RFP, their designees, or any affiliated with their firm, contact any other District employee or official during the RFP process in an attempt to lobby or influence the selection of a vendor pursuant to this RFP.

This is a Request for Proposals, and as such will not be publically opened. After all submissions have been reviewed, the final evaluations of the committee will determine the awarded vendor. Public Records Requests will not be accepted until a contract is signed. Vendors will be notified, in writing, of award and non-award status upon receipt of an approved resolution.

The Cleveland Metropolitan School District has a Diversity Business Enterprise and Affirmative Action Program in effect. Information about this program and forms for compliance are enclosed. All firms submitting a proposal must complete the appropriate forms and submit same with their proposal. While the District no longer certifies DBE companies, we accept any company certified through the City of Cleveland, Cuyahoga County, or the State "EDGE" program.

The Cleveland Metropolitan School District accepts no obligations for costs incurred by proposers in preparing or submitting a proposal and reserves the right to reject any and all proposals received.

Sincerely,



M. Angela Foraker  
Director of Procurement

## SECTION II: INSTRUCTIONS TO PROPOSERS

### **Furnish and Delivery of Janitorial Supplies and Materials to Various Facilities on an “As Needed” Term Agreement Basis**

1. All Proposals shall be made upon the Proposal Form(s) furnished. All information requested in the proposal and in the proposal package must be filled in legibly and completely with blue ink signatures, or the proposal may be considered non-responsive. No oral, telephonic or telegraphic proposals or modifications will be considered.  
**Proposal name: Providing Janitorial Supplies and Materials and RFP number: #21135 must be on outside envelope of submittals including shipping labels.**
2. Proposals are due at the Cashier’s Office of the Board of Education, Cleveland Metropolitan School District, Administration Building, 1111 Superior Avenue E, Suite 1800, Cleveland Ohio, 44114, on or before **1:00 pm** current local time on **January 14, 2015**
3. All submissions must include **One (1) original, with blue ink signatures, and Two (2) copies.** Vendors not complying with this requirement will be notified that they have twenty-four (24) hours in which to comply with this requirement or their Proposal will be **disqualified**. This applies to **copies only**.
4. No Proposal may be withdrawn for at least ninety (90) days after receipt of proposal at **1:00 pm** current local time, on **January 14, 2015**
5. Written questions may be directed to the Purchasing Division via fax/email to: 216-436-5118 or **Denyse.Hirsch@clevelandmetroschools.org**. The District will **NOT ACCEPT** any telephone calls regarding any of the submittals and/or “short lists.” Under no circumstances should any firm interested in providing the services identified in this RFP, their designees, or anyone affiliated with their firm, contact any other District employee or official during the RFP process, in an attempt to lobby or influence the selection of a vendor pursuant to this RFP. No oral, telephonic, telegraphic, or electronic modifications will be considered. All materials submitted are as is.
6. The Cleveland Metropolitan School District reserves the right to reject any and all Proposals, to waive any and all informalities or irregularities, and to disregard all non-conforming responsive conditional proposals.
7. Proposer understands and agrees that subsequent to submission of the Proposal, any District resolution authorizing the award of a contract or agreement does not vest any contractual rights in the bidder.
8. Proposer understands and agrees that any such District resolution operates only to encumber funds necessary for the project and does not create a binding contract.
9. Proposer further acknowledges and agrees that any such District resolution may be revoked, at any time prior to execution of a formal, written contract.

10. Proposer acknowledges and agrees that it has no vested contractual right until such time as a purchase order and contract have been issued.
11. Proposer further acknowledges and agrees that execution of a contract and issuance of a purchase order is not a ministerial function, but is a formal requirement for acceptance of the proposal.
12. Proposers must present evidence to the District, upon request, that they are fully competent and have the necessary facilities, equipment and financial resources to perform the work required in the Specifications within the time frame required.
13. Each and every page must have the proposer's company name in the header or footer.
14. No binding of any kind should be used: use only binder clips. No staples, No paper clips, No binders, No tabs should be used; use colored paper to separate sections. Failure to comply with submission formation may result in the submittal being disqualified.
15. Any and all changes must be initialed by the proposer.
16. The District reserves the right to award the proposal in whole or in parts, by item, by group of items, to a single vendor; or to multiple vendors, where such action serves the best interests of the District.
19. This request for Proposals should be submitted before **1:00 pm** current local time, **January 14, 2015**, to the Cleveland Metropolitan School District, Cashiers Office of the Cleveland Metropolitan School District, 1111 Superior Avenue E, Suite 1800 Cleveland, Ohio 44114, the submission to include **One (1) original, with blue ink signatures, and Two (2) copies** of the following:
  - a. Completed Proposal Form including evidence of State certification to perform the work required.
  - b. Signed Acknowledgement for Instructions to Proposers.
  - c. Completed and notarized proposer's Qualification Form.
  - d. Signed Conflict of Interest Form
  - e. Completed and notarized Non-Collusion Affidavit.
  - f. Completed and notarized EOA Compliance Declaration documents.
  - g. Completed and notarized Diversity Business Enterprise Participation Forms.
  - h. Properly executed Affidavit and/or Company Board of Directors Resolution authorizing certain person to sign legal documents such as the Proposal Form, Proposer's Qualification Form, etc.
  - i. Completed and notarized Debarment Form
  - j. Signed cost proposal

20. Proposer shall not include Ohio Sales Tax in the price quoted. The Cleveland Metropolitan School District will provide tax exempt certificate to the successful Proposer.

## 21. SECURITY

Vendor's workmen, foremen, other personnel, and subcontractors on CMSD site will be required to meet Cleveland Metropolitan School District security requirements. Contractor must issue personnel I.D. badges. Any worker not complying with CMSD security requirements will immediately be ordered off project and without prejudice or recourse to CMSD.

- Vendor agrees to successfully complete background checks on all of its employees, agents, and subcontractors who provide services under this Agreement to CMSD facilities. Vendor agrees to warrant that it will not at any time hire or utilize any individual to provide services under this Agreement on CMSD premises where such person has been convicted of, or pleaded guilty to, any criminal offense enumerated in O.R.C. 3319.39(B).

## 22. INSURANCE

The successful company, their subcontractors and suppliers of labor and/or materials for providing goods and services for the Cleveland Metropolitan School District, including organizations having personnel, equipment and vehicles on District property, shall provide evidence of insurance as follows:

- |  |   |   |
|--|---|---|
| a. Commercial General Liability<br>\$1,000,000.00 Limit of Liability | - | including limited contractual liability<br>(per occurrence)                     |
| b. Automobile Liability<br>\$1,000,000.00 Limit of Liability         | - | including non-owned, and hired<br>(per occurrence)                              |
| c. Workers Compensation  | - | Workers compensation and employer's<br>Insurance to the full extent as required |
| d. Professional Liability<br>\$1,000,000/ \$3,000,000                | - | By applicable law<br>per occurrence/in the aggregate                            |

This requirement must be fulfilled by the successful vendor providing the Purchasing Office of the CMSD with a current Certificate of Insurance (standard ACORD form), showing the Board of Education of the Cleveland Municipal School District as an additional insured (Certificate Holder does not constitute being an additional insured), within five (5) days of Notice of Intent to Award Agreement. The certificates of insurance shall contain a provision that the policy or policies shall not be canceled without thirty (30) days' prior written notice to the District.

The required insurance must be provided by a company licensed by the State of Ohio, which company must be financially acceptable to the Administration of the Cleveland Municipal School District

The District is not liable for vandalism which results in damage(s) to the property or vehicles of the Vendor. The school District will not reimburse for private insurance deductibles for such vandalism.

- Vandalism damage is defined as damage resulting from criminal conduct for which an individual may (but not necessarily be processed under the Ohio Revised Code

## 23. DIVERSITY BUSINESS GOAL

The Diversity Business and Vendor Contract Compliance Programs shall make every good faith effort to ensure that certified diversity business enterprises in the Cleveland Metropolitan School's relevant geographic market area shall be afforded the maximum opportunity to compete

for contracts, services, and purchases. The general goals for diversity business participation are: 15% service, 20% goods and supplies, and 30% maintenance, construction/repair.

Non-diversity vendors will have their diversity business participation counted toward their goal attainment only with minority vendors who are certified and demonstrate previous experience in the respective business classification of the prime contractor. Only direct participation in the subcontract will be counted toward diversity business enterprise goal attainment.

The diversity business goal for this RFP is: 20% for Goods

## **24. ADVERTISING**

In submitting a proposal, Vendors agree, unless specifically authorized in writing by an authorized representative of CMSD on a case by case basis, that it shall have no right to use, and shall not use, the name of Cleveland Metropolitan School District, its officials or employees, (a) in any advertising, publicity, promotion, nor (b) to express or imply any endorsement of Agent's services.



## SECTION II: ACKNOWLEDGEMENT

\_\_\_\_\_ Hereby  
(Name of Company)

Acknowledges receipt of this request for Proposal and the reading of these Instructions to Proposers. We further agree that if awarded the contract, we will submit the required Performance Bond, if applicable, and/or Insurance Certificate within five (5) days of written notification that the District has adopted a resolution authorizing the encumbrance of funds for the project. We understand, however, that a formal written contract, similar to the one contained in the Proposal Package, will need to be executed and purchase order issued by the District before we have any vested contractual rights. We agree to commence the work as required herein and timely complete the project pursuant to the Specifications by the date stated in the Notice to Proceed unless otherwise changed by agreement of the District and the Vendor.

By:\_\_\_\_\_

(Name) (Title)

Date:\_\_\_\_\_

## SECTION II: VENDOR REQUEST FORM

NEW ( ) YES ( ) NO

CORRECTION ( ) YES ( ) NO

### REQUEST

REQUESTING DEPARTMENT \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

FAX NUMBER \_\_\_\_\_

### ***VENDOR INFORMATION***

VENDOR NUMBER (IF APPLICABLE) \_\_\_\_\_

VENDOR NAME \_\_\_\_\_

ADDRESS LINE 1 \_\_\_\_\_

ADDRESS LINE 2 \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE NO. ( ) \_\_\_\_\_ FAX NO. ( ) \_\_\_\_\_

Email Address \_\_\_\_\_

### ***REMIT TO (IF DIFFERENT FROM ABOVE)***

#### **VENDOR NAME**

ADDRESS LINE 1 \_\_\_\_\_

ADDRESS LINE 2 \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE NO. ( ) \_\_\_\_\_ FAX NO. ( ) \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

### **1099 INFORMATION**

1099 VENDOR YES ( ) NO ( )

SS NO. \_\_\_\_\_ FEDERAL I.D. NO. \_\_\_\_\_

PRIMARY SERVICE, PRODUCT, OR SPECIALTY: \_\_\_\_\_

---

NOTE: VENDOR NAME AND ID NUMBER MUST BE AS FILED WITH THE INTERNAL REVENUE SERVICE.

### **PLEASE INDICATE WHERE APPLICABLE**

DIVERSITY BUSINESS ENTERPRISE: YES \_\_\_\_\_ NO \_\_\_\_\_

MINORITY BUSINESS ENTERPRISE: \_\_\_\_\_

FEMALE BUSINESS ENTERPRISE: \_\_\_\_\_

RETURN TO:

CLEVELAND MUNICIPAL SCHOOLS  
PURCHASING DEPARTMENT  
1111 Superior Avenue E, Suite 1800  
Cleveland, Ohio 44114

## SECTION II: TAXPAYER ID FORM

<b>Form W-9</b> (Rev. December 2011) Department of the Treasury Internal Revenue Service	<b>Request for Taxpayer Identification Number and Certification</b>	<b>Give Form to the requester. Do not send to the IRS.</b>
Print or type See Specific instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <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. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶	
	<input type="checkbox"/> Other (see instructions) ▶	
	<input type="checkbox"/> Exempt payee	
Address (number, street, and apt. or suite no.)		Requester's name and address (optional)
City, state, and ZIP code		
List account number(s) here (optional)		

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line 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									

Employer identification number									

### Part II 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), and
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 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
3. 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.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
----------------------	-------------------------------	--------

### 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:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. 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.

## SECTION II: NO PROPOSAL FORM

This form only needs to be completed by vendors who are not submitting a proposal under RFP #21135

To All Prospective Bidders/Proposers:

Each company or person receiving this packet has at some point in time requested to be placed on the Bid list of the Cleveland Metropolitan School District for this product and/or service.

It is the intent of the District to update this list subsequent to the bidding cycle. Please note the following and take action accordingly.

If you are making a bid/proposal this cycle, disregard the remainder of this letter. Your name will remain on the active bidder list.

\_\_\_\_\_ **(1) If you are not making a bid/proposal this cycle, but want to remain on the active bidder's list for future bids, place a check mark in the box to the left. Complete the name and address section below and return this letter to Purchasing at the address below.**

\_\_\_\_\_ **(2) If you do not wish to remain on the active bidder's list, place a check mark to the left. Complete the name and address section below and return this letter to Purchasing at the address below.**

Name of Company:\_\_\_\_\_

Company Representative:\_\_\_\_\_

Address:\_\_\_\_\_

City; State:\_\_\_\_\_ Zip Code:\_\_\_\_\_

Telephone No: (\_\_\_\_\_)\_\_\_\_\_ Fax No:\_\_\_\_\_

(Toll Free) Telephone No:\_\_\_\_\_ Date:\_\_\_\_\_

Purchasing Division  
1111 Superior Avenue E, Suite 1800  
Cleveland, Ohio 44114

## SECTION II: CONFLICT OF INTEREST FORM

### Statement of Potential Conflicts of Interest

Vendor Name:	Primary Contact:
Address 1:	Telephone #:
Address 2:	Fax #:
City:	Email:
State, Zip:	Website:

Cleveland Metropolitan School District (CMSD) adheres to Ohio Ethics Law and strictly follows the opinions of the Ohio Ethics Commission. As such, each vendor is requested to submit this statement declaring any potential conflicts of interest in doing business with the District. Please answer the following two questions, providing all requested information.

1. Do any current Cleveland Metropolitan School District (CMSD) employees, Cleveland Board of Education members, or any of their immediate family members, also members of the vendor's board of directors, hold any officer position with the vendor, or own any shares of any stock issued by the vendor?

Yes\_\_\_\_ No\_\_\_\_

If Yes, and if the CMSD employee, CMSD board member, or immediate family member is a member of the vendor's board of directors or holds an office with the vendor, please state the person's name and position with the vendor.

Name:\_\_\_\_\_

Position:\_\_\_\_\_

If Yes, and if the CMSD employee, CMSD board member, or immediate family member owns share of any stock in the vendor organization or company, state the percentage of all outstanding company shares owned by the CMSD employee or board member:

\_\_\_\_\_%

2. Are any current CMSD employees, CMSD board members, or any immediate family members also employees of the vendor?

Yes\_\_\_\_ No\_\_\_\_

If yes, please state the person's name and provide a description of their jobs duties for the provider:

Name:\_\_\_\_\_

Job Duties:\_\_\_\_\_

If Yes, please describe the contact that the vendor will have with the CMSD employee or CMSD board member in the course of providing services to the District:

---

---

### CERTIFICATION

I do hereby certify that the foregoing statements are true and accurate, and that my signature below attests to the authenticity of my identity as the person actually signing this form. This document is not a contract. In order for a binding Agreement to exist, a signed Agreement will be required prior to any legally binding commitment by the District.

### NOTARIZED STATEMENT

\_\_\_\_\_being duly sworn and deposes says  
that he/she is the \_\_\_\_\_ of  
(title)

\_\_\_\_\_, and answers to all  
(organization)

the foregoing questions and all statements therein contained are true and correct.

\_\_\_\_\_  
(Signature)

Subscribed and sworn before me this \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_\_\_.

Notary Public:\_\_\_\_\_

My commission expires:\_\_\_\_\_

## SECTION II: DEBARMENT FORM



### Certification Regarding Debarment, Suspension, and Other Responsibility Matters Primary Covered Transactions

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 13 CFR Part 145. The regulations were published as Part VII of the May 26, 1988 *Federal Register* (pages 19160-19211). Copies of the regulations are available from local offices of the U.S. Small Business Administration.

#### (BEFORE COMPLETING CERTIFICATION, READ INSTRUCTIONS ON REVERSE)

- (1) The prospective primary participant certifies to the best of its knowledge and belief that it and its principals:
  - (a) Are not presently debarred, suspended, proposed for disbarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
  - (b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
  - (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
  - (d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default.
- (2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective primary participant shall attach an explanation to this proposal.

Business Name \_\_\_\_\_

Date \_\_\_\_\_

By \_\_\_\_\_  
Name and Title of Authorized Representative

\_\_\_\_\_  
Signature of Authorized Representative

## SECTION II: DEBARMENT FORM

- 2 -

### INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this proposal, the prospective primary participant is providing the certification set out below.
2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
3. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.
4. The prospective primary participant shall provide immediate written notice to the department or agency to which this proposal is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
5. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the department or agency to which this proposal is submitted for assistance in obtaining a copy of those regulations (13 CFR Part 145).
6. The prospective primary participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency entering into this transaction.
7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transactions," provided by the department or agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the ineligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List.
9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.



### SECTION III: PROPOSER QUALIFICATIONS FORM

**Proposer must answer all questions or attach a written explanation for each question.**

PROPOSER NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY; STATE: \_\_\_\_\_ ZIP \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

TITLE: \_\_\_\_\_

TELEPHONE: (     ) \_\_\_\_\_ TOLL FREE :(     ) \_\_\_\_\_

TAXPAYER IDENTIFICATION NUMBER: \_\_\_\_\_

1.     What type of organization? (i.e., corporation, partnership, etc.)
  
  
  
  
  
  
  
  
  
2.     How many years has your organization been in business?
  
  
  
  
  
  
  
  
  
3.     How many years has your organization been in business under its current name?
  
  
  
  
  
  
  
  
  
4.     List any other aliases your organization has utilized in the last two years and the form of Business.
  
  
  
  
  
  
  
  
  
5.     If you are currently a corporation, list the following:
  - A.     State of incorporation
  
  
  
  
  
  
  
  
  
  - B.     Date of incorporation
  
  
  
  
  
  
  
  
  
  - C.     President's name
  
  
  
  
  
  
  
  
  
  - D.     Secretary's name

- E.      Treasurer's name
  - F.      Statutory agent's name
  - G.      Name of shareholders, if less than 10
  - H.      Principal place of doing business
6.      If you are currently a partnership, list the following:
- A.      Name and address of all general and limited partners.
  - B.      Original name and date of organization's inception.
7.      If you are neither a corporation nor a partnership, please describe your organization and list principals.
8.      Are you legally qualified to do business in the State of Ohio?
9.      Are you legally qualified to do business in Cuyahoga County and in the City of Cleveland?
10.     Has your organization ever been sued by a customer for failure to timely complete a Contract or properly perform services? If yes, please state where, when and why?
11.     Has your organization ever been cited by a local, county, state, or federal authority for violation of a regulation or statute or failing to timely complete a contract in accordance with specifications? If yes, please state date, Agent, and final disposition.

12. Has your organization ever filed for bankruptcy? If yes, please state where, when and why?
13. On a separate sheet, list the major customers for whom your organization has provided this type of equipment or service in the past five years. Include owner's name and type of work performed.
14. Has your organization ever been sued by a supplier for failure to timely pay for materials or equipment provided? If yes, please provide details.
15. What is the dollar limit of your firm's General (CLS) Liability Insurance?  
Name of insuring company\_\_\_\_\_
- Policy number\_\_\_\_\_
16. What is the dollar limit of your firm's Automotive Liability Insurance?  
Owned vehicles\_\_\_\_\_
- Non-Owned vehicles\_\_\_\_\_
- Name of insuring company\_\_\_\_\_
- Policy number\_\_\_\_\_
17. List the name and address of every person having an interest in this proposal.
18. Has any federal, state or local government entity ever cited or taken any action against

your organization or any of its principals for failure to pay or remit any taxes including but not limited to income, withholding, sales, franchise or personal property taxes? If yes, please give name of Agent, date and amount of taxes overdue and resolution of the issue.

19. Is your organizations and its' principals current in payment of personal property taxes?
20. The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment or suspension, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal Department or Agent.
21. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participants shall attach an explanation to this bid.

### SECTION III: PROPOSER'S QUALIFICATION FORM

#### NOTARIZED STATEMENT

\_\_\_\_\_ being duly sworn and deposes says  
that he/she is the \_\_\_\_\_ of  
(title)

\_\_\_\_\_, and answers to all  
(organization)

the foregoing questions and all statements therein contained are true and correct.

\_\_\_\_\_  
(Signature)

Subscribed and sworn before me this \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_\_\_.

Notary Public:\_\_\_\_\_

My commission expires:\_\_\_\_\_

**SAMPLE: STATE OF OHIO INSURANCE**

***S A M P L E***

**STATE OF OHIO**

**DEPARTMENT OF INSURANCE**

---

**CERTIFICATE OF COMPLIANCE**

As Superintendent of Insurance of the State of Ohio, I

do hereby certify that \_\_\_\_\_

a corporation located at \_\_\_\_\_

in the State of \_\_\_\_\_

with the laws of this state applicable to it, and is

authorized to transact in this state its appropriate

business of insurance as prescribed under Section 3941.02.

of Ohio, including Fidelity Insurance.

From \_\_\_\_\_ 20\_\_\_\_, until \_\_\_\_\_

In witness whereof, I have hereunto  
subscribed my name and caused my  
seal to be affixed at Columbus, Ohio  
this day and date.

Superintendent of Insurance of Ohio

# SAMPLE: STANDARD ACORD INSURANCE FORM

<b>ACORD. CERTIFICATE OF INSURANCE</b>				<b>ISSUE DATE (MM/DD/YY)</b>	
<b>PRODUCER</b>		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW			
<b>COMPANIES AFFORDING COVERAGE</b>					
<b>CODE</b>	<b>SUB-CODE</b>	<b>COMPANY LETTER A</b>			
<b>INSURED</b>		<b>COMPANY LETTER B</b>			
		<b>COMPANY LETTER C</b>			
		<b>COMPANY LETTER D</b>			
		<b>COMPANY LETTER E</b>			
<b>COVERAGES</b> THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.					
CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	ALL LIMITS IN THOUSANDS
	<b>GENERAL LIABILITY</b> COMMERCIAL GENERAL LIABILITY CLAIMS MADE      OCCUR. OWNER'S & CONTRACTOR'S PROT.				GENERAL AGGREGATE \$ PRODUCTS-COMP/OPS AGGREGATE \$ PERSONAL & ADVERTISING INJURY \$ EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MEDICAL EXPENSE (Any one person) \$
	<b>AUTOMOBILE LIABILITY</b> ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY				COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	<b>EXCESS LIABILITY</b>  OTHER THAN UMBRELLA FORM  WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY  OTHER				EACH OCCURRENCE \$      AGGREGATE \$  STATUTORY \$ (EACH ACCIDENT) \$ (DISEASE—POLICY LIMIT) \$ (DISEASE—EACH EMPLOYEE)
<b>DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS</b>					
<b>CERTIFICATE HOLDER</b>			<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL _____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.		
			<b>AUTHORIZED REPRESENTATIVE</b>		
<b>ACORD 25-8 (3/88)</b>			<b>©ACORD CORPORATION 1988</b>		

**SECTION IV: NON-COLLUSION AFFIDAVIT**

This Affidavit must be executed and shall accompany the proposal in order for the proposal to be considered

**NON-COLLUSION AFFIDAVIT**

State of Ohio, Cuyahoga County

\_\_\_\_\_, being first duly sworn, deposes and says  
that he/she is \_\_\_\_\_ of

(sole owner, partner, president secretary, etc.)

\_\_\_\_\_ of the party making the foregoing Proposal; that such Proposal is genuine and not collusive or sham; that said Proposer has not colluded, conspired, connived, or agreed, directly or indirectly, with any Proposer or person, to put in a sham Proposal, or that such other person shall refrain from proposing, and has not in any manner, directly or indirectly sought by agreement or collusion, or communication or conference, with any person, to fix the Proposal price of affiant or any other Proposer, to fix any overhead, profit or cost element of said Proposal price, or of that of any Proposer, or to secure any advantage against the Board of Education of the Cleveland Metropolitan School District, or any person or persons interested in the proposal; and that all statements contained in said Proposal are true; and further that such Proposer has not, directly or indirectly, submitted this Proposal, or the contents thereof, or divulged information or data relative thereto to any Association or to any member or agent thereof.

\_\_\_\_\_  
Affiant

Sworn to and subscribed before  
me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for Cuyahoga  
County, Ohio

My commission expires: \_\_\_\_\_



## **SECTION V: DIVERSITY BUSINESS ENTERPRISE PARTICIPATION FORMS**

### **PART I**

#### **THE DISTRICT'S DBE PROGRAM**

It is the goal of the Diversity Business Enterprise (DBE) program to ensure the firms owned and/or controlled by minorities and women have the opportunity to compete for any expenditure of funds including but not limited to contracts, lease purchase requisitions, and all forms of equipment, work services, supplies, materials, construction, etc.

The DBE program shall make every good faith effort to ensure that certified DBE's in the relevant Cleveland Municipal School District geographic market have the maximum opportunity to bid for contracts. The Cleveland Municipal School District geographic market is Cuyahoga, Summit, Lake and Lorain counties.

The district has established goals for DBE participation in all contracts that it awards. The goals range from 15 to 30 percents and vary by the type of contract awarded:

- ◆ 15% service contracts
- ◆ 20% goods and supplies
- ◆ 30% maintenance/construction repair

For example if the District awards a roof repair contract in the amount of \$ 100,000 to a Non-DBE contractor, 30% or \$ 30,000 of the contract work could be awarded to a DBE subcontractor.

A Diversity Business Enterprise encompasses Minority Business Enterprise (MBE's) and Female Business Enterprises (FBE's).

A DBE is an enterprise in which minorities, African Americans, Native Americans, Hispanic or Latino Americans, Asian Pacific Islander Americans and/or women own at least 51% of the shares of stock or controlling interest.

An FBE is a female-owned enterprise with at least 51% of the shares of stock or controlling interest, which is held by a female.

A company may be in compliance with the District's DBE program although the applicable numerical goal is not met if the company makes a good faith commitment to comply with DBE regulations. The Purchasing Director determines whether a company has made a good faith commitment.

DBE requirements under certain circumstances can be waived by the district with convincing proof of good faith efforts.

**Terms and Conditions  
Of Notice and Requirements to Ensure  
Diversity Business Enterprise (DBE) Opportunity**

**Definition of DBE: A Diversity Enterprise (DBE)**

"Small Diversity business concern" means a small business concern that is at least (51) percent unconditionally owned by one or more individuals who are both socially and economically diverse, or a publicly owned business that has at least (51) percent of its stock unconditionally owned by one or more socially and economically diverse individuals and that has its management and daily business controlled by one or more such individuals. This term also means a small business concern that is at least (51) percent unconditionally owned by an economically diverse Indian tribe or Native Hawaiian Organization, or a publicly owned business that has at least (51) percent of its stock unconditionally owned by one of these entities, that has its management and daily business controlled by members of an economically diverse Indian tribe or Native Hawaiian Organization.

- (a) "Socially diverse individuals" means individuals who have been subjected to racial or ethnic prejudice or cultural bias because of their identity as a member of a group without regard to their qualities as individuals.
- (b) "Economically diverse individuals" means socially diverse individuals whose ability to compete in the free enterprise system is impaired due to diminished opportunities to obtain capital and credit as compared to others in the same line of business who are not socially diverse. Individuals who certify that they are members of named groups (African Americans, Hispanic Americans or Latino Americans, Native Americans, Asian-Pacific Islander Americans, Subcontinent-Asian Americans) are to be considered socially and economically diverse.

**A Female Business Enterprise (FBE)**

"Female-owned small business concern" means a small business concern:

- (a) Which is at least (51) percent owned by one or more women; or, in the case of any publicly owned business, at least (51) percent of the stock of which is owned by one or more women: and
  - (b) Whose management and daily business operations are controlled by one or more women.
1. DBE participation will be counted toward meeting the goals outlined in the notice as follows:
    - a. The total dollar value of a direct contract or subcontractor indirect subcontract Awarded to a certified DBE will be counted toward the applicable goal.
    - b. In the case of a joint venture, certified by the Cleveland Municipal School District, the portion of the total dollar value of the contract equal to the percentage of the ownership and control of the DBE partner in the joint venture will be counted toward the applicable goal, (PLEASE RETURN DBE FORM B).

- c. Only expenditures to DBE that perform a commercially useful function in the work of a contract or subcontract or indirect subcontract will be counted toward DBE goals. A DBE is considered to perform a commercially useful function when it is responsible for execution of a distinct element of the work of a contract or subcontract and carries out its responsibilities by actually performing, managing, and supervising the work involved. If a DBE contractor subcontracts a significantly greater portion of the work of the contract than would be expected on the basis of normal industry practices, the DBE is presumed not to be performing a commercially useful function. The DBE may present evidence to rebut this presumption.
  - d. The total dollar value of materials and supplies obtained from DBE suppliers and manufacturers will be counted toward DBE goals if the DBE assumes the actual and contractual responsibility for the provision of the materials and supplies.
- 2. A proposer who fails or refuses to complete and return this Notice may be deemed a non-responsive bidder.
- 3. The contractor's goals as set forth in this Notice shall express the contractor's commitment to the percentage of DBE utilization during the term of this contract. The contract shall be deemed to have met its commitment for DBE utilization if the DBE utilization rate of the contractor meets the goals established by this Notice.
- 4. The contractor must receive the approval of the District before making substitutions for any subcontractors listed in the Notice. Substitution of DBE is not allowed unless the contractor receives District approval.
- 5. The contractor's commitment to a specific goal is to meet the DBE objectives and is not INTENDED and shall not be used to discriminate against any qualified company or group or companies.
- 6. The contractor's commitment to a specific goal for DBE utilization as required by this Notice shall constitute a commitment to make every good faith effort to meet such goal by a subcontracting to or undertaking to joint venture with DBE firms. If the contractor fails to meet the goal, it will carry the burden of furnishing sufficient documentation as part of the bid response of its good faith efforts to justify a grant of relief from the goals set forth in this Notice. Such justification will take the forms of a detailed report which will document at least the following information.
  - a. Attendance at the pre-bid meeting, if any, scheduled by the District to inform DBE's of Subcontracting opportunities under a given solicitation.
  - b. Advertisement in general circulation media, trade association publications, and minority-focus media for at least twenty (20) days before bids or proposals are due. If twenty (20) days are not available, publication for a shorter reasonable time is acceptable.
  - c. Written notification to DBE that their interest in the contract is solicited, and follow-up contact to determine whether the DBE's were interested.
  - d. Efforts made to select portions of the proposed work to be performed by DBE in order to

increase the likelihood of achieving the stated goals.

- e. Efforts to negotiate with DBE for specific sub-bids, including at a minimum:
    - I. The names, addresses, and telephone numbers of DBE's that were contacted.
    - II. A description of the information provided to DBE regarding the plans and specifications for portion of the work to be performed; and
    - III. A statement of why additional agreements with DBE were not reached.
    - IV. Completion of (Form E) if DBE's are not involved in the bid.
  - f. Concerning each DBE the supplier/contractor contacted but rejected as unqualified, the reasons for the supplier's/contractor's conclusion.
  - g. Efforts made to help the DBE's contacted that needed assistance in obtaining required bonding, lines of credit, or insurance.
  - h. Use of the services of minority community organizations, minority contractor's groups, governmental minority business assistance offices, and other organizations that assist in the recruitment and placement of DBE's.
7. Suppliers/contractors that fail to meet DBE goals and fail to demonstrate sufficient good faith efforts are may not eligible for contract awarded
8. The District, through its Diversity Officer will review the contractor's minority business enterprise involvement efforts during performance of this contract. Such review will include, but not be limited to, contractor's quarterly statement of income from the District and what portion of said income went to the DBE enterprise(s) as evidenced by affirmation of the DBE enterprise(s) which the contractor hereby agrees to supply each quarter during the term of its contract with the District. If the contractor meets its goal or if the contractor demonstrates that every reasonable effort has been made to meet its goal, the contractor shall be presume to be in compliance. Where the Diversity Officer finds that the contractor shall be presume to be in compliance. Where the Diversity Officer finds that the contractor has failed to comply with the requirements of this Notice, said Diversity Officer shall inform the Purchasing Director who shall immediately notify the contractor to take corrective action. If the contractor fails or refuses to comply promptly, then the Purchasing Director, upon approval of the District, shall issue an order shopping all or part of the work until satisfactory corrective action has been taken. No part of the time lost due to any such stop orders shall be made subject of claim for extension of time or for excess costs or damages by the contractor. When the District proceeds with such formal action it has the burden of proving that the contractor has not met the requirements of coming forward and showing that it has met the good faith requirements of the Notice, specifically including paragraph 7 hereof. Where the contractor is found to have failed to exert every good faith effort to involve DBE in the work provided, the District may declare that the contractor is ineligible to receive further District funds, whether as a contractor, subcontractor, or as a consultant, for a period of up to three (3) years.

9. The contractor will keep records and documents for three (3) years following performances of this contract to indicate compliance with this Notice. These records and documents, or copies thereof, will be made available at reasonable times and places for inspection by any authorized representative of the District upon request together with any other compliance information which such representative may require.
10. Bidders and contractors are bound by all requirements, terms and conditions of this Notice.
12. Nothing in this Notice shall be interpreted to diminish the present contract compliance review.

**SECTION V: DIVERSITY BUSINESS ENTERPRISE PARTICIPATION FORMS**

**PART II**

**DBE Form A: General Information**

Name of Firm: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Type of Business (Product or Service): \_\_\_\_\_

\_\_\_\_\_

Date of Proposed Contract Award: \_\_\_\_\_

Amount of Proposed Contract Award: \_\_\_\_\_

Diversity Business Enterprise Subcontractor(s): \_\_\_\_\_

\_\_\_\_\_

Dollar Amount Subcontract Award: \_\_\_\_\_

Percent of Subcontract Award: \_\_\_\_\_

D.B.E. Participation \_\_\_\_\_ \$ \_\_\_\_\_

F.B.E. Participation \_\_\_\_\_ \$ \_\_\_\_\_

Name of EEO Officer: \_\_\_\_\_

\_\_\_\_\_

Signature of owner, partner or authorized officer  
Name (name or print):

\_\_\_\_\_

Date: \_\_\_\_\_ Title: \_\_\_\_\_

**DO NOT COMPLETE BELOW THIS LINE**

**Compliance** ☐ **Compliance-pending** ☐ **Non-compliance**

Compliance Date \_\_\_\_\_

\_\_\_\_\_

Signature, Diversity Business Enterprise Department

\_\_\_\_\_

Date

## **DBE Form B**

### **CLEVELAND MUNICIPAL SCHOOL DISTRICT**

#### **NOTICE OF REQUIREMENT TO ENSURE DIVERSITY BUSINESS ENTERPRISE (DBE) OPPORTUNITY**

Note: All eligible proposers for award of the contract should comply with the Requirements, Terms, and Conditions of this Notice.

The undersigned proposer hereby agrees that the goal it has established for DBE participation in this project through either subcontracting or entering into a joint Venture with DBEs in conformity with the Requirements. Terms and Conditions of this Notice is a goal of thirty 30% percent for a construction/repair/ maintenance contract, twenty (20%) percent for a supply contract, and fifteen (15%) for a service contract of the total contract amount of this project. In no event will the absence of goals as stated above be deemed as compliance with the requirements, terms and conditions of this notice.

In addition, the undersigned will complete and attach hereto the DBE (Form C) Schedule for DBE participation, showing all DBE/FBE that will participate as subcontractors or joint ventures in this contract and a DBE (Form D), DBE Letter of Intent form for each DBE/FBE listed on the Schedule.

---

**Proposer**

---

**Date**

---

**By**

---

**Title**

#### **Definition of DBE: A Diversity Business Enterprise (DBE)**

"Small Diversity business concern" means a small business concern that is at least (51) percent unconditionally owned by one or more individuals who are both socially and economically diverse, or a publicly owned business that has at least (51) percent of its stock unconditionally owned by one or more socially and economically diverse individuals and that has its management and daily business controlled by one or more such individuals. This term also means a small business concern that is at least (51) percent unconditionally owned by an economically diverse Indian tribe or Native Hawaiian Organization, or a publicly owned business that has least (51) percent of its stock unconditionally owned by one of these entities, that has its management and daily business controlled by members of an economically diverse Indian tribe or Native Hawaiian Organization.

**DBE Form C**

**CLEVELAND MUNICIPAL SCHOOL DISTRICT**

**Schedule MBE/FBE Participation**

Project Name:

---

Name of NON-DBE Contractor

---

Identification No.:

---

Location:

---

-----

Name of minority contractor

---

Address

---

City, State, Zip

---

Type of work to be performed and work hours involved

---

---

Projected commencement and completion dates for work: \_\_\_\_\_

Agreed price in dollars or percentage: \_\_\_\_\_

The undersigned will enter into a formal agreement with DBE for work listed in this schedule conditioned upon execution of a contract with the Cleveland Municipal School District.

**TO BE RETURNED WITH PROPOSAL**

---

Signature of NON-DBE Prime Contractor



**DBE Form D**  
**DBE Letter of Intent**

To: \_\_\_\_\_

*Non-DBE Prime or General Proposer*

Project: \_\_\_\_\_

**NON-DBE PRIME OR GENERAL PROPOSER**

The Undersigned intends to perform work in connection with the above-referenced project as (check one):

☐ an individual      ☐ a corporation      ☐ a partnership      ☐ a joint venture

DBE status of the undersigned is confirmed in the Cleveland Municipal School District's DBE file of bona fide enterprises with a certification date of: \_\_\_\_\_

The Undersigned is prepared to perform the following described work in connection with the above referenced project. Specify in detail particular work items or parts thereof to be performed:

---

---

---

at the following price or percent of contract: \$ \_\_\_\_\_

You have projected the following commencement date of such work, and the undersigned is projecting completion of such work as follows:

**Items** \_\_\_\_\_

**Projected Commencement Date** \_\_\_\_\_

**Projected Completion Date** \_\_\_\_\_

\_\_\_\_\_ % (percent) of the dollar value of the subcontract will be sublet and/or awarded to NON-DBE contractor (s) and/or NON-FBE SUPPLIERS.

The undersigned will enter into a formal agreement for the above work with you conditioned upon your execution of a contract with the Cleveland Municipal School District.

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Name of DBE Firm (where applicable)**

\_\_\_\_\_  
Signature of DBE (where applicable)

\_\_\_\_\_  
Signature of MBE Firm

(TO BE RETURNED WITH PROPOSAL)

\_\_\_\_\_  
**Name of FBE Firm**

\_\_\_\_\_  
**Signature of FBE Firm**

**DBE Form E**  
**DBE Unavailability Certification**

I,

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Title*

Of \_\_\_\_\_, certify that on \_\_\_\_\_

*Non-DBE Prime Bidder*

I contacted the following DBE business enterprise to obtain a bid for work items to be performed on:

Board Project: \_\_\_\_\_

Minority Contractor: \_\_\_\_\_

Work Items Sought: \_\_\_\_\_

Form of Bid Sought: \_\_\_\_\_

Female Contractor: \_\_\_\_\_

Work Items Sought: \_\_\_\_\_

Form of Bid Sought: \_\_\_\_\_

To the best of my knowledge and belief said minority business enterprise was unavailable (exclusive of the unavailability due to lack of agreement on price) for work on this project or unable to prepare a bid for the following reason (s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
*Signature, Non-DBE prime Bidder*

\_\_\_\_\_  
*Date*

\_\_\_\_\_ was offered an opportunity to bid on the above-referenced work

on \_\_\_\_\_ by \_\_\_\_\_  
*Date* *Non-DBE Prime Bidder*

\_\_\_\_\_  
*Signature, Non-DBE Prime Bidder*

The above statement is a true and accurate account of why I did not submit a bid on this project.

\_\_\_\_\_  
*Signature, Non-DBE prime Bidder*

**TO BE COMPLETED BY NON-MINORITY PRIME**

**STATE OF                    }**  
**COUNTY OF                } SS.**

**AFFIDAVIT**

The undersigned swear that the foregoing statements are correct and include all material information necessary to identify and explain the items and operation of our subcontract and the intended participation by each party in the undertaking. Further, the undersigned covenant and agree to provide to the Cleveland Municipal School District current, complete, and accurate information regarding actual subcontract work and the payments thereof, and any proposed changes in any of the subcontract arrangements and to permit the audit and examination of the books, records and files of the subcontract or those of each party relevant to the subcontract, by authorized representatives of the Cleveland Municipal School District. Any material misrepresentation will be grounds for terminating any contract which may be awarded and for initiating action under federal and state laws concerning false statements.

Name of Firm:\_\_\_\_\_

Signature:\_\_\_\_\_

Name and Title:\_\_\_\_\_

Date:\_\_\_\_\_

STATE OF                    }  
COUNTY OF                } SS.

On this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, before me appeared

\_\_\_\_\_, to me personally known, who being duly sworn,

did execute the foregoing affidavit, and did state that they were properly authorized by

\_\_\_\_\_ to execute the affidavit and did so as their free act and deed.

(Seal)

Notary Public\_\_\_\_\_

Commission expires\_\_\_\_\_

**DBE FORM F**  
**Information for Determining Joint Venture Eligibility**

(This form need not be completed if all joint venture firms are diversity business enterprises).

1. Name of Joint Venture:

---

2. Address of Joint Venture:

---

3. Phone Number of Joint Venture:

---

4. Identify the firms which comprise the joint venture. (The DBE partner must complete DBE Form A or have current DBE certification)

---

---

(a) Describe the role of the DBE firm in the joint venture:

---

---

---

(b) Describe briefly the experience and business qualifications of each non-DBE Joint Venture:

---

---

---

5. Nature of Joint Venture's business:

---

---

6. Provide a copy of the Joint Venture Agreement.

7. What is the percentage of DBE ownership? DBE \_\_\_\_\_ % FBE \_\_\_\_\_ %

8. Ownership of Joint Venture: (This need not be completed if described in the Joint venture agreement provided in response to question 6).

(a) Profit and loss sharing \_\_\_\_\_

---

(b) Capital contributions, including equipment: \_\_\_\_\_

---

(c) Other applicable ownership interests: \_\_\_\_\_

---

9. Control of and participation in this contract. Identify by name, race and "firm" those individuals and their titles who are responsible for day-to-day management and policy decision making, including, but not limited to, those with prime responsibility for:

(a) Financial decisions \_\_\_\_\_

---

(b) Management decisions, such as

(1) Estimating \_\_\_\_\_

---

(2) Marketing and Sales \_\_\_\_\_

(3) Hiring and firing of Management Personnel \_\_\_\_\_

---

(4) Purchasing of major items or supplies \_\_\_\_\_

---

(c) Supervision of Field Operations \_\_\_\_\_

---

**NOTE:** If, after completing the DBE Form B and before the completion of the joint venture's work on any contract awarded, there is any significant change in the information submitted, the joint venture must inform the Cleveland Municipal School District, either directly or through the non-DBE prime contractor if the joint venture is a subcontractor.

CLEVELAND MUNICIPAL SCHOOL DISTRICT  
Finance Department

TO BE COMPLETED BY NON-MINORITY PRIME  
(JOINT VENTURE)

STATE OF                    ]  
COUNTY OF               JSS.

**AFFIDAVIT**

The undersigned swear that the forgoing statements are correct and include all material information necessary to identify and explain the items and operation of our subcontract and the intended participation by each joint venture in the undertaking. Further, the undersigned covenant and agree to provide to the Cleveland Municipal School District current, complete, and accurate information regarding actual joint venture work and the payments thereof and any proposed changes in any of the subcontract arrangements and to permit the audit and examination of the books, records and files of the joint venture or those of each party relevant to the joint venture, by authorized representatives of the Cleveland Municipal School District. Any material misrepresentation will be grounds for terminating any contract which may be awarded and for initiating action under federal and state laws concerning false statements.

\_\_\_\_\_  
*Name of Firm (Prime)*

\_\_\_\_\_  
*Name of Firm (DBE)*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Name and Title*

\_\_\_\_\_  
*Name and Title*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Date*

STATE OF                    ]  
COUNTY OF               JSS.

On this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_, before me

appeared \_\_\_\_\_, to me personally known, who being duly sworn, did execute the foregoing affidavit, and did state that they were properly authorized by \_\_\_\_\_ to execute the affidavit and did so as their free act and deed.

(Seal)

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Commission expires

## SECTION VI: EOA CONTRACTIONAL DECLARATION FORMS

### PART III

#### CLEVELAND MUNICIPAL SCHOOL DISTRICT

##### AFFIRMATIVE ACTION PROGRAM VENDOR CONTRACT COMPLIANCE PROCEDURES AND GUIDELINES

---

**NOTE:** *Please read carefully all of the information contained in these documents.*

*Pursuant to the Affirmative Action Policy adopted by the Cleveland Municipal School District, the following guidelines and procedures will be implemented to ensure that all vendors doing business with the District are in compliance with Equal Employment Opportunity Standards.*

#### **A. SUBMISSION OF VENDOR EMPLOYMENT PRACTICE REPORT**

*All vendors and contractors who bid to provide goods, services, supplies and equipment through formal bids, informal bids, and contract term agreements are required to submit a Vendor Employment Practice Report with each bid. Approved status by the Vendor Employment Practice Report includes the following documents which must be completed in their entirety and returned with the bid.*

*Please note, compliance approval consists of both DBE and Vendor Contract Compliance approval.*

1. General Information Sheet (Form 1) - Provides basic information on the vendor.

1a. SMSA/OR RECRUITMENT AREA

*Indicates the relevant labor area in which your facility is located. Designate the Standard Metropolitan Statistical Area, county or city from which the facility can draw applicants or recruit for most positions.*

*In making relevant labor area determinations, examine the statistics on racial, ethnic, and gender composition of the Standard Metropolitan Statistical Area, county, or city surrounding your organization, as well as other appropriate adjacent areas.*

*The relevant labor area should be the SMSA, county or city with the highest population of minorities and women.*

#### **DEFINITION:**

*As defined by the U.S. Bureau of the Census, SMSA is:  
"Except in the New England States, a county or group of contiguous counties which contains at least one city of 50,000 inhabitants or more, or 'twin cities' with a combined population of at*

*least 50,000; in addition contiguous counties if they are socially and economically integrated within the central city; in the New England States towns and cities instead of counties. Each SMSA must include at least one central city."*

2. ***Compliance Declaration Form*** (Form 2) - *The Agreement indicating the vendor is In compliance with Equal Employment Opportunity requirements, will take affirmative action, and will comply with all Fair Labor Standard practice.*
3. ***Current Employment Data Form*** (Form 3) - *Current personnel data indicating employees in each job category classified by gender and race.*
4. ***Existing Affirmative Action Program*** - *If any, and copies of any agreement between the vendor and the Equal Employment Opportunity Commission, Office of Federal Contract Compliance Program or court order pertaining to equal employment opportunity.*

## ***B. EVALUATION OF COMPLIANCE DATA***

1. *The Diversity Officer will evaluate data submitted by vendors who are recommended to receive District bids and contracts. Vendors found in compliance with the District's Equal employment opportunity standards (Affirmative Action and DBE Program) will be placed on the approved vendor's list.*
2. *In the event that a vendor is found not in compliance with the District's equal employment opportunity standards, the Diversity Officer will inform the Purchasing Director of the Reason(s) and ask that the Purchasing Director not award the contract or bid to the vendor pending compliance. The Purchasing Director or Manager of Diversity will inform the vendor of reason(s) for non-compliance. Vendors found not in compliance will be given ten (10) business days from the time of notification by the Purchasing Director or Manager of Diversity to submit an acceptable affirmative action program to the Diversity Officer.*
3. *If the vendor which has been found not in compliance, submits an acceptable affirmative action plan to the Diversity Officer within ten (10) business days of notification, the vendor may be given conditional approval.*
4. *If the vendor fails to submit an acceptable affirmative action program to the Diversity Officer, the officer will notify the Purchasing Director who will disallow the bid. Vendors who fail to comply with the District's equal employment opportunity standards may be disapproved to do business with the District by the Cleveland Municipal School District.*
5. *Any company which believes that it has been wrongly found not in compliance thus preventing business opportunities with the District because it does not meet the District's equal employment opportunity standards may request reconsideration by the Diversity Officer. However, the decision of the Cleveland Municipal City School District will be considered final.*



**C. AFFIRMATIVE ACTION PLAN**

1. *Vendors found not in compliance with the District's equal employment opportunity standards are expected to develop and implement affirmative action programs if they expect to be eligible to successfully bid for District contracts.*
2. *While it is the vendor's responsibility to develop an affirmative action program which will result in equal employment opportunity for persons from all sectors of the community, the Officer in Charge of the Diversity Program may refer prospective bidders to resources which may be of assistance in developing affirmative action programs.*
3. *In the event that a vendor who has been awarded a District contract does not make satisfactory progress towards goals in the affirmative action program, the District will not negotiate a new contract until the vendor assures the Diversity Officer, that significant progress will make.*

**D. CONDITIONS UNDER WHICH BIDS MAY BE REJECTED OR CONTRACTS TERMINATED ON EQUAL EMPLOYMENT OPPORTUNITY GROUNDS**

1. *Vendor fails to submit completed and signed EEO documents with bids or other requested information in a timely manner.*
2. *The vendor is found not to be in compliance with EEO laws, regulations and District policy, and does not have an acceptable Affirmative Action Program, or if the vendor has an acceptable Affirmative Action Program but the Diversity Officer determines the vendor has not made satisfactory progress toward goals in the plan and shows no promise of achieving the goals.*
3. *Any inconsistencies or misrepresentation of the facts in any of the requested information designed to portray the vendor in a more favorable position with respect to Equal Employment Opportunity Compliance will be grounds for cancellation of the contract by the Purchasing Director, upon recommendation by the Diversity Officer and confirmation by the Cleveland Municipal School District.*

**FORM 1**

**Vendor Contract Compliance Program  
General Information**

*Name of Firm:* \_\_\_\_\_

*Address:* \_\_\_\_\_

*City, State, Zip Code:* \_\_\_\_\_

*Telephone Number:* \_\_\_\_\_

*Standard Metropolitan Statistical Area* \_\_\_\_\_

*Recruitment Area:* \_\_\_\_\_

*Type of Business (product or service):* \_\_\_\_\_

*Name of EEO Officer:* \_\_\_\_\_

*Signature of Owner, Partner or Authorized Officer:* \_\_\_\_\_

*Name (type or print):* \_\_\_\_\_

*DATE:* \_\_\_\_\_ *TITLE:* \_\_\_\_\_

***DO NOT COMPLETE BELOW THIS LINE***

***STATUS OF VENDOR***

☐ Compliance

☐ Conditional Compliance

☐ Non-Compliance

☐ Compliance Pending

*Comments:* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature*  
***Affirmative Action Division***

---

**FORM 2**

**Compliance Declaration**

The following must be filled out completely.

It is the policy of \_\_\_\_\_ that equal employment opportunity be afforded to all qualified persons without regard to race, religion, color, sex, national origin, age, or handicap.

In support of this policy, \_\_\_\_\_ will not discriminate against any employee or applicant for employment because of race, religion, color, sex, national origin, age, or handicap.

\_\_\_\_\_ will take affirmative action to insure that applicants are employed and that employees are treated during employment without regard to race, color, sex, national origin, age, or handicap. Such action will include, but not be limited to:

Recruitment, advertising, or solicitation for employment, hiring, placement, upgrading, transfer or demotion, selection for training, including apprenticeship rates of pay or other forms of compensation, layoffs or termination.

The undersigned company states that they are of current applicable requirement pertaining to Fair Labor Standards and Non-Discriminatory Practices of Federal, State and Local Governments.

The undersigned further acknowledges that if the contract is awarded to the undersigned, that the undersigned will comply with all Fair Labor Standard Practice.

\_\_\_\_\_  
**Name of Company**

\_\_\_\_\_  
**Signature of company Official**

Date: \_\_\_\_\_  
STATE OF ( \_\_\_\_\_ )  
COUNTY OF ( \_\_\_\_\_ )SS.

BEFORE ME, a Notary Public in and for said County and State personally appeared the above-named Company \_\_\_\_\_ by \_\_\_\_\_

Its \_\_\_\_\_, who acknowledged that they knowingly signed the aforesaid instrument, and that the same is their free act and deed duly authorized and the free act and deed of said company.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed seal at

\_\_\_\_\_, \_\_\_\_\_, this

\_\_\_\_\_,

\_\_\_\_\_  
day of \_\_\_\_\_, 20\_\_\_\_.

---

## **DESCRIPTION OF JOB CATEGORIES**

### **OFFICIAL, MANAGERS AND SUPERVISORS**

Occupations requiring administrative personnel who set District policies, exercise overall responsibility for execution of the plaices, and direct individual departments or special phases of a firm's operations includes: officials, executives, middle management, plant managers, department managers and superintendents, salaried supervisors who are members of management, purchasing agents and buyers, and kindred workers.

### **PROFESSIONALS**

Occupations requiring either college graduation or experience of such kind and amount as to provide a background. Includes: accountants and auditors, airplane pilots and editors, engineers, lawyers, librarians, mathematicians, natural scientists, personnel and labor relations workers, physical scientists, physicians, social scientists, teacher's and kindred workers.

### **TECHNICIANS**

Occupations requiring a combination of basic scientific knowledge and manual skill which can be obtained through (about) two years of post high school education, such as that which is offered in many technical institutes and junior colleges, or through equivalent on-the-job training. Includes: drafters, engineering aides, junior engineers, mathematical aids, nurses, photographers, radio operators, scientific assistants, surveyor of technical illustrators, technicians (medical, dental, electronic physical sciences), and kindred workers.

### **SALES WORKERS**

Occupations engaging wholly or primarily in direct selling. Includes: advertising agents and salespersons, insurance agents and brokers, real estate agents and brokers, stock bond salespersons, demonstrators, sales persons, sales clerks, and kindred workers.

### **OFFICE AND CLERICAL**

Includes all clerical-type work regardless of level of difficulty, where the activities are predominantly non-manual, includes: bookkeepers, cashiers, collectors (bills and account), messengers and office clerks, office machine operators, shipping and receiving clerks, stenographers, typists and secretaries, telegraph and telephone operators and kindred workers.

### **CRAFTWORKERS (SKILLED)**

Manual workers of relatively high skill level having a thorough and comprehensive knowledge of the process involved in their work, exercise considerable independent judgment, and usually receive an extensive period of training. Includes: the building trades hourly paid foremen who are not members of management, mechanics and repairers, skilled machine operators, compositors and typesetters, electricians, engravers, job setters (metal), motion picture projectionists, pattern and model makers, stationary engineers, tailors and kindred workers.

---

**OPERATIVE (SEMI-SKILLED)**

Workers who operate machine or processing equipment or perform other factor-type duties of intermediate skill level which can be mastered in a few weeks and require limited training

**LABORERS (UNSKILLED)**

Workers in manual occupations which generally require no special training. Perform elementary duties that may be learned in a few days and require the application of little or no independent judgment. Includes: garage laborers, car washers and greasers, gardeners (except farmers), ground-keepers, long-shore workers, craftsperson and stevedores, lumber's and wood chippers, laborers performing lifting, digging, mixing, loading, and pulling operations, and kindred workers.

**SERVICE WORKERS**

Workers in both protective and non-protective service occupations. Includes: attendants (hospital and other instruction, professional and personal service), barbers, and cleaners, cooks, guards, doorkeepers, stewards, janitors, police officers and detectives, porters, food servers, and kindred workers.

**APPRENTICES**

Persons employed in a program including work training and related instruction to learn a trade or craft which is traditionally considered an apprenticeship, regardless of whether the program is registered with a Federal or State Agent.

## SECTION VI: EMPLOYMENT DATA FORM

Please note this data may be obtained by visual survey or post-employment records. Neither visual surveys nor post-employment records are prohibited by any Federal, State or local law. All specified data is required to be filled in by District policy.																
	ALL EMPLOYEES				MALES				FEMALES							
<b>JOB CATEGORIES</b>	<b>TOTAL MALES &amp; FEMALES</b>	<b>MALES</b>	<b>FEMALES</b>	<b>WHITE (NOT OF HISPANIC ORIGIN)</b>	<b>BLACK (NOT OF HISPANIC ORIGIN)</b>	<b>ASIAN AMERICAN OR PACIFIC ISLANDER</b>	<b>AMERICAN INDIAN OR ALASKAN NATIVE</b>	<b>HISPANIC</b>	<b>WHITE (NOT OF HISPANIC ORIGIN)</b>	<b>BLACK (NOT OF HISPANIC ORIGIN)</b>	<b>ASIAN AMERICAN OR PACIFIC ISLANDER</b>	<b>AMERICAN INDIAN OR ALASKAN NATIVE</b>	<b>HISPANIC</b>			
OFFICIALS MGRS & SUPERVISORS																
PROFESSIONALS																
TECHNICIANS																
SALES WORKERS																
OFFICE/CLERICAL CRAFTWORKERS (SKILLED)																
OPERATIONS (SEMI- SKILLED)																
LABORERS (UNSKILLED)																
SERVICE WORKERS																
APPRENTICES																
<b>TOTALS</b>																
<b>ADDITIONAL INFORMATION (OPTIONAL)</b>																
Describe any other action taken which show that all employees are recruited, hired, or trained or promoted without regard to their race, religion, color, sex, handicap, age or national origin. Use second sheet if additional space is needed.																
The undersigned certifies that they are legally authorized by the bidder to make the statements and representations contained in this report, and that they have read all of the foregoing statements and representations which are true and correct to the best of their knowledge and belief.																
FIRM OR CORPORATE NAME:																
DATE:																
SIGNATURE:																
TITLE:																



## **Term Agreement**

### **Furnish and Delivery of Janitorial Supplies and Materials on an “As Needed” Term Agreement Basis for the Cleveland Metropolitan School District**

This Term Agreement is made and entered into by and between the Cleveland Metropolitan School District (the “District”), 1111 Superior Avenue E, Suite 1800, Cleveland, Ohio 44114 and VENDOR (the “Vendor”) for Furnishing and Delivering Janitorial Supplies and Materials on an “As Needed” Term Agreement Basis for the Cleveland Metropolitan School District on an “As Needed” Term Agreement Basis

Vendor agrees to adhere to all terms and conditions contained within the specifications and documentation of RFQ #21135 and fully understands that their services and/or products will be based on an “as needed” basis according to the Proposal Form(s) submitted by the Vendor.

The Cleveland Metropolitan School District does not commit to any specific dollar figure or quantity amount being awarded to the Vendor for this Term Agreement or possible renewal periods. If Vendor is providing a specific service, vendor agrees to maintain all required insurance, without interruption, during the period of this Term Agreement.

The term of this Agreement will be from February 1, 2015 through June 30, 2016 pending authorization of funds at the discretion of the District. There are two renewal options for this agreement. Renewal Option One is from July 1, 2016 through June 30, 2017. Renewal Option Two is from July 1, 2017 through June 30, 2018.

Initial Term Agreement rates and/or prices and renewal option rates and/or prices are listed in Attachment “A”, vendors submitted cost proposal, included and made a part herein. Vendor further agrees and understands that all pricing submitted with their proposal is non-negotiable, including renewal option periods.

Either party may cancel this Term Agreement by giving a thirty (30) day written notice to the other party.

Vendor is not to furnish any supplies or services without first obtaining a certified purchase order for said supplies or services. Invoice submitted to the District without a certified purchase order will **NOT** be paid.

**Indemnification and Hold Harmless** – The Vendor shall indemnify, defend, and hold harmless the District, all of its members, officers, employees, and agents, from and against any and all liability (whether real or asserted), claims, demands expenses, costs (including legal fees), and causes of action of any nature whatsoever for injury or death of persons, or damage or destruction of property which may result from or arise out of the negligence or intentional misconduct of the Vendor or its employees, officers, or agents, in the course of the Vendor’s performance of this Agreement or the Vendor’s failure to perform. This indemnification and hold harmless obligation survives the term of this Agreement.

No Damages for Delay - The District shall not be held responsible for any loss, damage, costs, or expenses sustained by the Vendor as the result of any project delays, disruptions, suspensions, work stoppages, or interruptions of any kind, whether reasonable or unreasonable or whether occasioned by changes ordered in the work or otherwise caused by an act or omission of the District, its agents, employees, or representatives, or by any cause whatsoever beyond the control of the Vendor.

Criminal Background Check - Vendor agrees to successfully complete a criminal background check on any of its employees who provide services under this Agreement in the school district and who are required by Ohio Revised Code Section 3319.39, 3319.31 or 3319.392, as amended. A copy of all such background checks shall be provided by the Vendor to the District at vendor's expense.

Damage to Buildings, Equipment, and Vegetation - The Vendor shall use reasonable care to avoid damaging existing buildings, equipment, and vegetation on the District premises. If the Vendor's failure to use reasonable care causes damage to any District property, the Vendor shall replace or repair the damage at no expense to the District as the District directs. If the Vendor fails or refuses to make such repair or replacement, the Vendor shall be liable for the cost, which may be deducted from the contract price.

Miscellaneous -

- a. Vendor represents and warrants that she possesses the qualification and personnel, if required, to provide the services agreed to herein.
- b. Neither party may assign, modify, or sub-contract this Agreement, or any right or interest herein, without the prior written consent of the other party.
- c. This Agreement shall be binding upon and inure to the benefit of the Parties, their successors, and permitted assigns.
- d. To the extent that the terms of this Agreement materially conflict with or render ambiguous any provision of the Vendor's (Bid/Proposal), the terms of this Agreement shall govern.
- e. The paragraph headings are for convenience only and shall not effect the interpretation of this Agreement.
- f. This validity, construction of this Agreement shall be determined in accordance with the laws of the State of Ohio.
- g. The vendor and all subcontractors shall comply with all local, state and federal laws, rules, regulations and ordinances.
- h. No travel expense reimbursement is authorized unless specifically stated in this contract. If so stated, the meals, travel, and lodging are reimbursable only in strict compliance with the Ohio Auditor of State Technical Bulletins, Guidance and Rules and Regulations and, if this contract is federally funded in whole or in part, in strict compliance with all rules, regulations and guidance of the U.S. Office of Management and Budget and any other federal office or agency having jurisdiction over federally funded contracts.
- i. This Agreement contains the entire agreement between the parties with respect to the services to be provided hereunder, and there are no representations, understandings or agreements, oral or written, which are not included herein.

Conflict of Interest - The Vendor represents that he/she is not an employee or board member of the Cleveland Metropolitan School District. The Vendor further represents that no employee or board member of the Cleveland Metropolitan School District has any ownership interest in or fiduciary duties to the Vendor or any of its parent



affiliations and is not on the board of directors of the Vendor or hold any officer position with the Vendor. The District's signatory to this agreement represents that neither he/she or any family member have any ownership interest in or fiduciary duties to the Vendor or any of its parent affiliations and are not on the board of directors of the Vendor or hold any officer position with the Vendor.

Agreed to and signed this \_\_\_\_\_ day of \_\_\_\_\_, 2015

VENDOR NAME

CLEVELAND METROPOLITAN SCHOOL DISTRICT

\_\_\_\_\_

\_\_\_\_\_  
Chief Operating Officer

\_\_\_\_\_  
date

Title: \_\_\_\_\_

\_\_\_\_\_  
Chief Financial & Administrative Officer

\_\_\_\_\_  
date

Approved to as Form: \_\_\_\_\_  
Chief Legal Counsel

\_\_\_\_\_

**CERTIFICATE OF FUNDS**  
**(Section 5705.41, O.R.C)**

In the matter of:                      **VENDOR**

**IT IS HEREBY CERTIFIED** that moneys required to meet the obligation of the Board of Education of the Cleveland Municipal School District under the above referenced Agreement have been lawfully appropriated for such purposes and are in the treasury of the School District or are in the process of collection to an appropriate fund, free from any previous encumbrance

CLEVELAND METROPOLITAN SCHOOL DISTRICT

By: \_\_\_\_\_  
CHIEF FINANCIAL & ADMINISTRATIVE OFFICER

Dated: \_\_\_\_\_



## **PART 2**

### **RFP #21135**

Furnish and Delivery of Janitorial Supplies and Materials to Various Facilities on an “As Needed” Term Agreement Basis For the Cleveland Metropolitan School District

#### **SPECIFICATIONS AND PROPOSAL FORMS**

## **SECTION I: INTRODUCTION**

The Cleveland Metropolitan School District (hereafter the “District, “CMSD” or Cleveland Municipal School District) is soliciting proposals to establish term contracts with one or more qualified vendor to Furnish and Deliver Janitorial Supplies and Materials to Various Facilities on an “As Needed” Term Agreement Basis under Request for Proposal (“RFP”) #21135.

## **SECTION II: CLEVELAND METROPOLITAN SCHOOL DISTRICT GENERAL INFORMATION**

The Cleveland Metropolitan School District is a large urban school system with over 100 instructional and non-instructional sites, approximately 5,000 teachers and administrative staff, 40,000 students, and 3,500 classrooms.

## **SECTION III: GENERAL SERVICE REQUIREMENTS**

The following general service requirements apply to each RFP and are in addition to any component or service-specific requirements presented in the individual RFP.

- All prices must clearly delineate all costs.
- All prices must be line itemized, where applicable.
- Time and materials costs must be listed clearly, by like item, where applicable.
- An agreed-upon dispute resolution mechanism must be defined.
- There is no guarantee of any minimum amount of services that may be requested during the term of the contract.

## **SECTION IV: VENDOR PROFILE**

The primary attributes the District seeks in a vendor include:

- Demonstrated experience and success of vendor in furnishing and delivering janitorial supplies and materials.
- Responsiveness to specifications and an understanding of District needs.
- Capacity & resources to perform the services described in the RFP.
- Availability and flexibility when it comes to meeting District needs.

## **SECTION V: PROPOSAL PROCESS**

The proposal process will proceed along the following guidelines, for which pertinent dates are presented in the RFP transmittal letter and respective RFP:

- Posting of RFP on CMSD Procurement webpage
- Notice in local newspaper regarding RFP posting
- Vendor submission of written questions
- On-line publication of written questions and responses
- Issuance of addendum, as necessary

- Receipt of vendors' intent to propose or not propose
- Receipt of proposals at CMSD
- Evaluation Committee review
- Notification of proposal award to selected vendor(s) and notification of non-award to other vendors
- Contract negotiation(s) with selected vendor(s)
- Contract finalization with selected vendor, final signatures obtained

All questions must be written and directed to **denyse.hirsch@clevelandmetroschools.org**. All questions received and responses thereto will be distributed via the District's website and to all vendors expressing intent to propose.

All information received by the District shall become the property of CMSD. The District reserves the right to accept or reject any or all proposals without explanation.

Proposers should note that the following Request for Proposals is general in nature to express a wide-ranging need. Proposers should feel free to define and specify in detail their services and products.

## **SECTION VI: CONTRACT PERIOD & AWARD**

The initial contract period will be from **February 1, 2015 through June 30, 2016**, with the option to renew for two (2) one year periods (**July 1, 2016 to June 30, 2017** and **July 1, 2017 to June 30, 2018**) commencing at the expiration of this contract period under the same terms and conditions as the initial contract and at the sole discretion of the District. Notice of intent to renew will be given to the contractor in writing prior to the expiration of the contract term. The initial contract term start date is subject to change at the discretion of the District with written notice to the awarded vendor(s).

## **SECTION VII: EVALUATION CRITERIA**

Proposals will be evaluated, first, as responsive or non-responsive to the RFP's specifications. A preliminary review will be conducted of all proposals submitted on time to ensure the proposal adheres to the mandatory requirements specified in the RFP. Proposals that do not meet the mandatory requirements will be deemed non-responsive and may be rejected. In the event that all proposers do not meet one or more of the mandatory requirements, CMSD reserves the right to continue the evaluation of the proposals and to select the proposal(s) which most closely meets the requirements specified in the RFP. Responsive proposals to this RFP must meet, the following mandatory requirements:

1. Timely Submission
2. Transmittal Cover Letter
3. Responses to proposal requirements
4. Experience and qualifications to provide the services
5. Cost proposals
6. Signature Acknowledgement
7. References

Second, the proposals will be evaluated based on the information presented in the proposal and on additional information obtained during the evaluation process. Responses will be evaluated based on the following weighted criteria:

35% - Cost of Services

25% - Vendor Qualifications and Experience Providing Services

25% - Understanding of District Needs

15% - Vendor References

Evaluations are based on the submitted proposal. Follow-up discussions with the proposer's best suited to complete the work may be requested. CMSD reserves the right to interview or to seek additional information related to criteria already specified in the RFP after opening the proposals, but prior to entering into a contract, to reject any or all proposals, and to award a contract to one or multiple vendors as the District deems necessary to meet its objectives. The District also reserves the right to check references identified by any proposer from any vendor that submitted a proposal. CMSD will select the proposal(s) deemed to be most advantageous, with price and other criteria factors considered.

## SECTION VIII: PROPOSAL REQUIREMENTS

The specifications for RFP #21135 are described below. Vendors are required to provide the information below as well as complete the Compliance Section Part I (Purchasing Documents). The narrative part of the proposals must present the following information and be organized with the following headings. Each heading should be separated by tabs or otherwise clearly marked.

Proposal responses are to be divided into sections as follows:

1. Transmittal Cover Letter-prepare a letter transmitting the proposal on business letterhead. The letter should identify the business name, phone number, and business web address along with the name, phone number and email address of the key contact person. The letter must have the signature of a person with authority to obligate the business. The transmittal letter shall also contain a statement that the proposal is a firm offer for a ninety (90) day period.
2. A completed set of Required Purchasing Division documents set forth in Part 1 of this RFP.
3. General Information Section
  - a. **Executive summary:** Information about the firm's history, structure, organizational metrics, and qualifications for fulfilling CMSD's requirements
  - b. **Business Health:** information about the firm's financial structure and viability, particularly as it relates to fulfilling a multiple year agreement.
  - c. **Experience and expertise:** information about the firm's current and previous contracts, particularly those with organizations similar to CMSD.
  - d. General narratives about at least three clients using services similar to those being proposed for CMSD (including detailed reference information for those clients in Section IX).
  - e. **Management support services:** information about staff, project, issue, performance, quality, and risk management methodology.
  - f. **Security:** information about the firm's policies, practices, and standards for maintaining the confidentiality and integrity of client's data, intellectual property, and trade secrets.
  - g. **Risks:** firm's evaluation of the greatest challenges and risks associated with the particular services and suggestions for mitigating risk
  - h. **Dispute resolution:** information about the firm's standard dispute resolution methodologies.
4. **Technical Section:** The Technical Section of the proposal shall specifically address the manner in which the proposer will meet the minimum requirements present below in Section X. Proposer shall address the quantitative and qualitative resources to the accomplishment of these requirements. The proposal shall provide enough information so that the evaluators will be able to determine the proposer's ability to meet each requirement set forth below. Simply paraphrasing the RFP statement of requirements will not be sufficient data for the evaluation and may be considered as a non-responsive proposal response.

### SECTION IX: REFERENCES

Include below three references of equal or larger size to this current RFP project. Public sector experience is preferred, but not required. Please attach relevant supporting documentation, such as project plans, scope of work.

**Reference #1:**

Company/School Name: \_\_\_\_\_

Address: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone and Fax #: \_\_\_\_\_

Dates of Service: \_\_\_\_\_

Description of Services Provided: \_\_\_\_\_

**Reference #2:**

Company/School Name: \_\_\_\_\_

Address: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone and Fax #: \_\_\_\_\_

Dates of Service: \_\_\_\_\_

Description of Services Provided: \_\_\_\_\_

**Reference #3:**

Company/School Name: \_\_\_\_\_

Address: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone and Fax #: \_\_\_\_\_

Dates of Service: \_\_\_\_\_

Description of Services Provided: \_\_\_\_\_



## **SECTION X: SPECIFICATIONS**

### **Overview**

The Cleveland Metropolitan School District is seeking professionals from qualified companies for furnishing and delivering janitorial supplies and materials on an “as needed” basis to various CMSD facilities for the school year. The District reserves the right to award to multiple vendors and is seeking line item pricing as well as an across the board catalog Discount off of current vendor pricing. The attached list of products (page 58-62) is a sampling of some, but not all of the items used in high volume by the District.

Vendors are not required to submit pricing for all items listed.

### **General Specifications**

- The proposed prices must be based on the container sized listed on the Proposal Forms
- Pricing must include shipping and handling and any other related charges
- Invoices must not contain sales tax. A tax exempt certificate will be provided to the awarded vendor(s) upon request
- Vendors are to complete all columns immediately following the proposed product on page 58-62 and all other parts of the proposal form
- Company name and name of person completing the form must be listed on all Proposal Forms.
- If interested in supplying products not listed on the Proposal Form, please complete the Optional Pricing Section on Page 63.

### **Delivery/Return Specifications**

- The District will bear no additional cost for the receipt of damaged merchandise, restocking, or the return of merchandise that does not meet the intended need.
- Deliveries must be F.O.B. to addresses that the CMSD Facilities Manager will provide to the awarded vendor(s).
- All prices of stock and non-stock items must be inclusive of freight charges from the manufacturer to the awarded vendor and/or to the ordering department. Delivery must be made to the office of ordering department.
- Delivery of items in stock must be made within forty-eight (48) hours after the vendor receives the order. Delivery of non-stocked items must be within the Manufacturer’s quoted lead time.
- All merchandise is to be acknowledged by signature upon delivery. A minimum of three (3) copies must be recorded:
  - Vendor Copy
  - CMSD Accounting Department Copy
  - Receiver Copy

## SECTION XI: COST PROPOSAL FORMS

The undersigned proposes to provide Janitorial Supplies and Materials to Various Facilities on an “As Needed” Term Agreement Basis for the Cleveland Metropolitan School District in accordance with the Specifications and to the entire satisfaction of, and acceptance by, the District and for the following prices. The term of this agreement begins on February 1, 2015 through June 30, 2016 with two (2) renewal options. The First Renewal Option is from July 1, 2016 through June 30, 2017. The Second Renewal Option is from July 1, 2017 through June 30, 2018. These renewal options will be under the same terms and conditions as the current contract year and at the discretion of the District. CMSD reserves the right to request additional price from the awarded Vendors for services not identified herein. Vendor shall provide the best rates for services later identified by CMSD based on the request and in accordance with the specifications and requirements outlined herein. The District does not guaranteed utilization of services or make any comment as to minimum amount of services through the term of any awarded agreement.

If the price of an item increases during a contract or renewal term due to market conditions, the awarded vendor may request a price adjustment by submitting such request to the Purchasing Department. Vendor’s request will be reviewed and a determination will be made by the District to either accept or deny the request for a price adjustment. Any increase in pricing during the term of a contract period will not be permitted otherwise.

Item Description	Unit of Measure	Cost per Unit	Number per Case/Box	Cost per Case/Box	2015-2016 % Discount	2016-2017 % Discount	2017-2018 % Discount
Acid-Bowl Cleaner							
All Purpose Cleaner Liquid (5 gal pails)							
Baywest Roll Towels							
Bleach (1 gal bottles)							

<b>Item Description</b>	<b>Unit of Measure (box, case, each, etc.)</b>	<b>Cost Per Unit</b>	<b>Number per Unit of Measure</b>	<b>Cost per Unit of Measure</b>	<b>2015-2016 % Discount</b>	<b>2016-2017 % Discount</b>	<b>2017-2018 % Discount</b>
<b>Cleaner/Degreaser (5 gal pails)</b>							
<b>C-Fold Paper Towels</b>							
<b>Corn Broom 4 Band</b>							
<b>Disinfectant Liquid (5 gal pails)</b>							
<b>Dust Mops Disposable 18x5</b>							
<b>Dust Mops Disposable 24x5</b>							
<b>Dust Mops Disposable 36x5</b>							
<b>Dust Mops Disposable 48x5</b>							
<b>Electronic Ballast 2 Tube 120 Volt</b>							
<b>Electronic Ballast 4 Tube 120 Volt</b>							
<b>Finish Mops 16 OZ Looped End</b>							

Item Description	Unit of Measure (box, case, each, etc.)	Cost Per Unit	Number per Unit of Measure	Cost per Unit of Measure	2015-2016 % Discount	2016-2017 % Discount	2017-2018 % Discount
Floor Stripper Liquid (5 gal pails)							
Floor Finish 25% Solids (5 gal pails)							
Fluorescent Tubes T-12 4ft.							
Gym Floor Finish 350Vis Polyurethane (5gal pails)							
Hand Soap Bar (72 count per case)							
Hand Soap Liquid Lotion (5gal pails)							
Lemon Quat Disinfectant Liquid (							
Multi-Fold Paper Towels							
Neutral Cleaner Liquid 5 gal pails							
Non-Acid Bowl Cleaner							
Scrubbing Floor Pads Black (5 per case)							

<b>Item Description</b>	<b>Unit of Measure (box, case, each, etc.)</b>	<b>Cost Per Unit</b>	<b>Number per Unit of Measure</b>	<b>Cost per Unit of Measure</b>	<b>2015-2016 % Discount</b>	<b>2016-2017 % Discount</b>	<b>2017-2018 % Discount</b>
<b>Scrubbing Floor Pads Green (5 per case)</b>							
<b>Scrubbing Floor Pads Red (5 per case)</b>							
<b>Single-Fold Paper Towel (4000 per case)</b>							
<b>Toilet Tissue – 2 Ply 500 Sheets</b>							
<b>Trash Liners 15 gal. 9 mil.</b>							
<b>Trash Liners 45 gal. 1.5 mil.</b>							
<b>Weed Killer concentrate (5 gal. pails)</b>							
<b>Wet Mops 12 OZ Cutlege</b>							
<b>Wet Mops 12 OZ Looped End</b>							
<b>Wet Mops 16 OZ Cutlege</b>							

Item Description	Unit of Measure (box, case, each, etc.)	Cost Per Unit	Number per Unit of Measure	Cost per Unit of Measure	2015-2016 % Discount	2016-2017 % Discount	2017-2018 % Discount
Wet Mops 16 OZ Looped End							
Wet Mops 20 OZ Cutlege							
Wet Mops 20 OZ Looped End							

*(cost proposal continues on next page)*

### **Catalog/ Manufacturer Pricing**

Please indicate if a Catalog or Manufacturer Price List Discount is proposed below. Vendors wishing to offer a discount off of more than one catalog may submit multiple forms.

Catalog/Price list

Name/Number: \_\_\_\_\_

#### **Initial Term Agreement – February 1, 2015 – June 30, 2016**

Overall Catalog Discount: \_\_\_\_\_%

Single Percentage Under List Price: \_\_\_\_\_%

#### **Renewal Option 1 – July 1, 2016 – June 30, 2017**

Overall Catalog Discount: \_\_\_\_\_%

Single Percentage Under List Price: \_\_\_\_\_%

#### **Renewal Option 2 – July 1, 2017 – June 30, 2018**

Overall Catalog Discount: \_\_\_\_\_%

Single Percentage Under List Price: \_\_\_\_\_%

### **Renewal Period Increases**

Vendors must indicate price increases for renewal periods as a flat percentage to be applied to all items across the board. This percentage will be automatically applied to all line items submitted above and will not apply to overall catalog discount or single percentage under list price.

Requests to increase pricing beyond the proposed percentage must be submitted to the District in writing 30 days prior to the time of renewal for consideration.

#### **Renewal Option 1 – July 1, 2016 – June 30, 2017**

Price Increase: \_\_\_\_\_%

#### **Renewal Option 2 – July 1, 2017 – June 30, 2018**

Price Increase: \_\_\_\_\_%

*(Vendors must complete the signature requirement on the next page)*

Company Name:\_\_\_\_\_

Address:\_\_\_\_\_

City, State, Zip Code:\_\_\_\_\_

Telephone Number:\_\_\_\_\_ Fax Number:\_\_\_\_\_

Email Address:\_\_\_\_\_

Signature:\_\_\_\_\_

Printed Name:\_\_\_\_\_

Date:\_\_\_\_\_



**This is an estimate of supplies ordered every 90 calendar days per school, especially for paper products, trash liners and cleaning chemicals. Other items such as brooms or mops will not need to be ordered as often.**

TYPE OF PRODUCT	DESCRIPTION OF PRODUCT	QUANTITIES FOR 90 DAYS
TOILET TISSUE	BAYWEST	12 CASES
PAPER TOWELS	ROLLED BAYWEST	12 CASES
TOILET TISSUE	REGULAR 2 PLY	12 CASES
PAPER TOWELS	SINGLE FOLD	12 CASES
PAPER TOWELS	C - FOLD	12 CASES
DISINFECTANT		3 PAILS
NATURAL CLEANER		12 PAILS
HAND SOAP	LIQUID	3 PAIL
HAND SOAP	BAR	3 CASE
SCOURING SAOP CLEANSER	LIQUID	3 CASE
BLEACH		3 CASE
TOILET BOWL CLEANER	NON ACID	18 QTS.
TOILET BOWL CLEANER	ACID	18 QTS.
GLASS CLEANER	AEROSOL	18 CANS
GLASS CLEANER	LIQUID	3 PAILS
GRAFFITT REMOVER		6 CANS
ABSORBANT - VOMIT		12 EACH
BROOMS	CORN (4) BAND	AS NEEDED
BROOMS	ANGLE (LG)	AS NEEDED
TOILET BRUSHES		3 EACH
MOP HANDLES	WOOD 60"	AS NEEDED
MOP HANDLES	FIBER GLASS 60"	AS NEEDED
DUST MOPS	18" DISPOSABLE	6 EACH
DUST MOPS	24" DISPOSABLE	6 EACH
DUST MOPS	36" DISPOSABLE	3 EACH
DUST MOPS	48" DISPOSABLE	3 EACH
MOP BUCKET/RINGER COMBO		3 EACH
ALL PURPOSE CLEANER		3 PAILS
TRASH LINERS	1.5 MIL. 45 GALLONS	9 CASES
TRASH LINERS	15 GALLONS	1 CASE
WET MOPS	12 OZ	3 EACH
WET MOPS	16 OZ	3 EACH
WET MOPS	20 OZ	6 EACH
WET MOPS	24 OZ	3 EACH

DUST PANS	METAL	3 EACH
TOILET TISSUE HOLDERS	SINGLE ROLL	3 EACH
TOILET TISSUE HOLDERS	DOUBLE ROLL	3 EACH
PAPER TOWEL BOXES	SINGLE FOLD	3 EACH
PAPER TOWEL BOXES	C - FOLD	3 EACH
LATEX GLOVES	POWDERED (LG)	3 EACH
LATEX GLOVES	NON- POWDERED (LG)	3 EACH
PLATEX GLOVES	(LG)	3 EACH
JERSEY GLOVES	(LG)	3 EACH
WASTE BASKETS	PLASTIC LARGE	3 EACH
WASTE BASKETS	PLASTIC SMALL	3 EACH
TRASH DRUMS	32 GAL. GREY	1 EACH
TRASH DRUM DOLLY		1 EACH
RAGS	#25	3 EACH
RAGS	#50	3 EACH
DUST MASKS	PAPER	1 CASE (every 90 days)
SCRUBBING PADS 20"	RED	1 CASE (every 90 days)
SCRUBBING PADS 20"	BLACK	1 CASE (every 90 days)
SCRUBBING PADS 20"	GREEN	1 CASE (every 90 days)
SCRUBBING PADS 20"	BLUE	1 CASE (every 90 days)
PAILS	2 1/2 GAL. W/ POUR LIP	1 EACH (as needed)
FLUORESCENT TUBES	F34 T12 CWES	3 CASES
FLUORESCENT TUBES	F34 T8 CWES	3 CASES
BALLAST	ELECTRONIC T8 LAMPS	4 EACH
BALLAST	ELECTRONIC T8 LAMPS	4 EACH
BALLAST	ELECTRONIC T8 LAMPS	4 EACH
BALLAST	ELECTRONIC T8 LAMPS	4 EACH
BALLAST	MAGNETIC T12 LAMPS	4 EACH
BALLAST	MAGNETIC T12 LAMPS	4 EACH

**CMSD****CUSTODIAL PERSONNEL LISTING**

<b>A. A. BENESCH</b>		<b>5393 QUINCY AVENUE</b>		<b>44104</b>	<b>MUTI-SITE</b>
<i>SCHOOL OFFICE:</i>	<b>391-2916</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>391-5109</b>	<i>SITE:</i>	<i>CMSD REGION:</i>
<u>POSITION</u>		<u>NAME</u>		<b>003</b>	<i>SUPERVISOR:</i>
CUSTODIAN		EDDIE HARRIS			<b>J JOYCE</b>
CUSTODIAN, ASST		VACANT			<u>CELL</u>
					785-4517
<b>A. J. RICKOFF</b>		<b>3500 EAST 147 STREET</b>		<b>44120</b>	
<i>SCHOOL OFFICE:</i>	<b>767-2100</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>838-5144</b>	<i>SITE:</i>	<i>CMSD REGION:</i>
<u>POSITION</u>		<u>NAME</u>		<b>016</b>	<i>SUPERVISOR:</i>
CUSTODIAN		QUIN MCCULLY			<b>J PRATT</b>
CUSTODIAN, ASST		MARIO EVANS			<u>CELL</u>
					785-4468
					533-4971
<b>ADLAI STEVENSON</b>		<b>18300 WODA AVENUE</b>		<b>44122</b>	<b>MULTI-SITE</b>
<i>SCHOOL OFFICE:</i>	<b>751-3443</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>482-2970</b>	<i>SITE:</i>	<i>CMSD REGION:</i>
<u>POSITION</u>		<u>NAME</u>		<b>004</b>	<i>SUPERVISOR:</i>
CUSTODIAN		MICHAEL CREEL			<b>J PRATT</b>
CUSTODIAN, ASST		LARRY BATTLE JR.			<u>CELL</u>
					702-4036
<b>ADMINISTRATION BUILDING</b>		<b>1111 SUPERIOR AVENUE</b>		<b>44114</b>	
<i>MAIL ROOM</i>				<i>SITE:</i>	
<u>POSITION</u>		<u>NAME</u>		<b>001</b>	<u>CELL</u>
LABORER - STEP 7		RICHARD BUTLER			785-4627
<b>ALMIRA</b>		<b>3375 WEST 99 STREET</b>		<b>44102</b>	
<i>SCHOOL OFFICE:</i>	<b>476-6810</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>838-6155</b>	<i>SITE:</i>	<i>CMSD REGION:</i>
<u>POSITION</u>		<u>NAME</u>		<b>012</b>	<i>SUPERVISOR:</i>
CUSTODIAN		WILLIAM CHAMBERS			<b>J JOYCE</b>
					<u>CELL</u>
					785-4601
<b>ANTON GRDINA</b>		<b>2955 E. 71 STREET</b>		<b>44127</b>	<b>MULTI-SITE</b>
<i>SCHOOL OFFICE:</i>	<b>641-7477</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>812-1622</b>	<i>SITE:</i>	<i>CMSD REGION:</i>
<u>POSITION</u>		<u>NAME</u>		<b>021</b>	<i>SUPERVISOR:</i>
CUSTODIAN		J. MIDDLETON-BEY			<b>J JOYCE</b>
CUSTODIAN, ASST		CURTIS EDWARDS			<u>CELL</u>
					785-4584

<b>ARTEMIS WARD</b>		<b>4315 WEST 140TH STREET</b>		<b>44135</b>	<b>MULTI-SITE</b>
<i>SCHOOL OFFICE:</i>	920-5395	<i>CUSTODIAN 'S OFFICE:</i>	920-7100	<i>SITE:</i>	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>023</b>	<i>SUPERVISOR:</i> J JOYCE
CUSTODIAN		THEODORE CZALKIEWICZ			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		JAMES PRODAN			785-4548
					280-3069
<b>B. B. B. CENTER</b>		<b>11404 LAKE SHORE DRIVE</b>		<b>44108</b>	<b>MULTI-SITE</b>
<i>SCHOOL OFFICE:</i>	851-3258	<i>CUSTODIAN 'S OFFICE:</i>	851-3315 or 3334	<i>SITE:</i>	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>061</b>	<i>SUPERVISOR:</i> L BATTLE
CUSTODIAN		JOHN MARGHERET			<a href="#"><u>CELL</u></a>
LABORER - STEP 1		RANDY MOSS			315-4030
					785-4624
<b>BARD HIGH SCHOOL</b>		<b>11801 WORTHINGTON AVENUE</b>		<b>44111</b>	
<b>AT BROOKLAWN</b>					
<i>SCHOOL OFFICE:</i>	838-9700	<i>CUSTODIAN 'S OFFICE:</i>	838-9705	<i>SITE:</i>	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>58</b>	<i>SUPERVISOR:</i> J JOYCE
CUSTODIAN		ANTHONY MONTVILLE			<a href="#"><u>CELL</u></a>
					785-4378
<b>BENJAMIN FRANKLIN</b>		<b>1905 SPRING ROAD</b>		<b>44109</b>	
<i>SCHOOL OFFICE:</i>	749-8580	<i>CUSTODIAN 'S OFFICE:</i>	749-8598	<i>SITE:</i>	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>036</b>	<i>SUPERVISOR:</i> J JOYCE
CUSTODIAN		TYROME TURNER			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		FRANK WESTLEY			
					258-8572
<b>BOLTON</b>		<b>9803 QUEBEC AVENUE</b>		<b>44106</b>	
<i>SCHOOL OFFICE:</i>	231-2585	<i>CUSTODIAN 'S OFFICE:</i>	231-8173	<i>SITE:</i>	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>041</b>	<i>SUPERVISOR:</i> J JOYCE
CUSTODIAN		DUANE HUNT			<a href="#"><u>CELL</u></a>
					785-4577
<b>BUCKEYE WOODLAND</b>		<b>9511 BUCKEYE ROAD</b>		<b>44104</b>	<b>MULTI-SITE</b>
<i>SCHOOL OFFICE:</i>	231-2661	<i>CUSTODIAN 'S OFFICE:</i>	421-7093	<i>SITE:</i>	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>636</b>	<i>SUPERVISOR:</i> J JOYCE
CUSTODIAN		J MIDDLETON-BEY			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		LONIECE LEE			785-4584
<b>BUHRER</b>		<b>1600 BUHRER AVENUE</b>		<b>44109</b>	
<i>SCHOOL OFFICE:</i>	744-2800	<i>CUSTODIAN 'S OFFICE:</i>	744-2820	<i>SITE:</i>	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>064</b>	<i>SUPERVISOR:</i> J JOYCE
CUSTODIAN		ERHARD NITSCH			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		WILLIE GAINES			785-4538
					785-2006

<b>CAMPUS INTERNATIONAL</b>		<b>3100 CHESTER AVENUE</b>		<b>44115</b>	
<i>SCHOOL OFFICE:</i>	551-5495	<i>CUSTODIAN 'S OFFICE:</i>		<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<i>SUPERVISOR:</i>	L BATTLE
CUSTODIAN		KELLY WINCHESTER		<a href="#"><u>CELL</u></a>	315-4205
<b>CAMPUS INTERNATIONAL</b>		<b>1935 EUCLID AVENUE</b>		<b>44115</b>	
<i>SCHOOL OFFICE:</i>	838-0000	<i>CUSTODIAN 'S OFFICE:</i>		<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		162	<i>SUPERVISOR:</i>
CUSTODIAN		VALERIE WILLIAMS			L BATTLE
				<a href="#"><u>CELL</u></a>	785-4572
<b>CARL F. SHULER</b>		<b>13501 TERMINAL AVENUE</b>		<b>44135</b>	
<i>SCHOOL OFFICE:</i>	667-0272	<i>CUSTODIAN 'S OFFICE:</i>	838-6005	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		066	<i>SUPERVISOR:</i>
CUSTODIAN		MARK ROTH			L BATTLE
CUSTODIAN, ASST		THOMAS SKEENS		<a href="#"><u>CELL</u></a>	678-0271
					577-7745
<b>CASE</b>		<b>4050 SUPERIOR AVENUE</b>		<b>44103</b>	
<i>SCHOOL OFFICE:</i>	431-4390	<i>CUSTODIAN 'S OFFICE:</i>	431-4377	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		068	<i>SUPERVISOR:</i>
CUSTODIAN		LORENZO SMITH			J PRATT
				<a href="#"><u>CELL</u></a>	315-4220
<b>CENTRAL KITCHEN</b>		<b>16807 ST. CLAIR AVENUE</b>		<b>44110</b>	<b>MULTI-SITE</b>
<i>SCHOOL OFFICE:</i>	383-4678	<i>CUSTODIAN 'S OFFICE:</i>	383-4678	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		170	<i>SUPERVISOR:</i>
CUSTODIAN		JOHN MARGHERET			L BATTLE
CUSTODIAN, ASST		GREGORY BENSON		<a href="#"><u>CELL</u></a>	315-4030
					262-6384
<b>CHARLES A. MOONEY</b>		<b>3213 MONTCLAIR AVENUE</b>		<b>44109</b>	
<i>SCHOOL OFFICE:</i>	741-1183	<i>CUSTODIAN 'S OFFICE:</i>	749-8558	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		080	<i>SUPERVISOR:</i>
CUSTODIAN		MICHAEL NOTTINGHAM			J PRATT
CUSTODIAN, ASST		DANIEL CRISAFI		<a href="#"><u>CELL</u></a>	785-4451
					212-9326
<b>CHARLES DICKENS</b>		<b>13013 CORLETT AVENUE</b>		<b>44105</b>	
<i>SCHOOL OFFICE:</i>	921-8558	<i>CUSTODIAN 'S OFFICE:</i>	921-1975	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		077	<i>SUPERVISOR:</i>
CUSTODIAN		RAMON BROWN			J PRATT
CUSTODIAN, ASST		ALEXANDER JACKSON		<a href="#"><u>CELL</u></a>	785-4476
					785-4609

<b>CHARLES W. ELIOT</b>			<b>15700 LOTUS DRIVE</b>		<b>44128</b>		
<i>SCHOOL OFFICE:</i>	<b>752-0100</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>295-2491</b>	<i>SITE:</i>	<b>078</b>	<i>CMSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>SUPERVISOR:</u>	<b>J PRATT</b>
CUSTODIAN		ROBERT CASTRO				<u>CELL</u>	
CUSTODIAN, ASST		MONIQUE TURNER				785-4495	
						544-8903	
<b>CLARA E. WESTROPP</b>			<b>19101 PURITAS AVENUE</b>		<b>44135</b>		
<i>SCHOOL OFFICE:</i>	<b>267-3706</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>267-6212</b>	<i>SITE:</i>	<b>090</b>	<i>CMSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>SUPERVISOR:</u>	<b>J JOYCE</b>
CUSTODIAN		DENNIS TURNER				<u>CELL</u>	
CUSTODIAN, ASST		KURT DORNER				496-3046	
<b>CLARK</b>			<b>5550 CLARK AVENUE</b>		<b>44102</b>		
<i>SCHOOL OFFICE:</i>	<b>631-2760</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>631-2791</b>	<i>SITE:</i>	<b>088</b>	<i>CMSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>SUPERVISOR:</u>	<b>L BATTLE</b>
CUSTODIAN		DEBRA MCCAULEY-JONES				<u>CELL</u>	
CUSTODIAN, ASST		DEAN GIBSON				785-4488	
<b>COLLINWOOD HIGH</b>			<b>15210 ST. CLAIR AVENUE</b>		<b>44110</b>		
<i>SCHOOL OFFICE:</i>	<b>451-8782</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>268-6071</b>	<i>SITE:</i>	<b>096</b>	<i>CMSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>SUPERVISOR:</u>	<b>L BATTLE</b>
CUSTODIAN		GARY FISHER				<u>CELL</u>	
CUSTODIAN, ASST		NIKOLOS JACKSON				785-4564	
LABORER - STEP 1		KEVIN JOYCE				534-7081	
<b>DANIEL E. MORGAN</b>			<b>8912 MORRIS AVENUE</b>		<b>44106</b>		
<i>SCHOOL OFFICE:</i>	<b>983-8300</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>938-8360</b>	<i>SITE:</i>	<b>109</b>	<i>CMSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>SUPERVISOR:</u>	<b>L BATTLE</b>
CUSTODIAN		JOHN GRAHAM JR				<u>CELL</u>	
						258-4245	
<b>DENISON</b>			<b>3799 WEST 33RD STREET</b>		<b>44109</b>		
<i>SCHOOL OFFICE:</i>	<b>741-2916</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>741-1822</b>	<i>SITE:</i>	<b>112</b>	<i>CMSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>SUPERVISOR:</u>	<b>J JOYCE</b>
CUSTODIAN		ROBERT WELLES				<u>CELL</u>	
CUSTODIAN, ASST		FRANK DUCHON				785-4504	
						246-3615	
<b>DIKE MONTESSORI</b>			<b>2501 EAST 61ST STREET</b>		<b>44104</b>	<b>MULTI-SITE</b>	
<i>SCHOOL OFFICE:</i>	<b>361-0708</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>361-2020</b>	<i>SITE:</i>	<b>124</b>	<i>CMSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>SUPERVISOR:</u>	<b>J JOYCE</b>
CUSTODIAN		EDDIE HARRIS				<u>CELL</u>	
CUSTODIAN, ASST		CLEAVER VAUGHN				785-4517	
						212-8912	

<b>DOUGLAS MAC ARTHUR</b>	<b>4401 VALLEYSIDE ROAD</b>	<b>44135</b>	<b>MULTI-SITE</b>
---------------------------	-----------------------------	--------------	-------------------

<i>SCHOOL OFFICE:</i>	<b>267-5969</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>267-4646</b>	<i>SITE:</i>	<b>130</b>	<i>CMUSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>CELL</u>	
CUSTODIAN		DANIEL ROY				785-4730	
CUSTODIAN, ASST		TIMOTHY STUDENT				577-8736	

<b>EAST 49 DEPOT</b>	<b>4177 EAST 49TH STREET</b>	<b>44105</b>	
----------------------	------------------------------	--------------	--

<i>SCHOOL OFFICE:</i>	<b>441-8232</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>441-8232</b>	<i>SITE:</i>	<b>968</b>	<i>CMUSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>CELL</u>	
LABORER - STEP 7		THEODIES JONES				785-4634	

<b>EAST CLARK</b>	<b>885 EAST 146TH STREET</b>	<b>44110</b>	<b>MULTI-SITE</b>
-------------------	------------------------------	--------------	-------------------

<i>SCHOOL OFFICE:</i>	<b>531-2872</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>920-0929</b>	<i>SITE:</i>	<b>148</b>	<i>CMUSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>CELL</u>	
CUSTODIAN		PETE POSEDLY				785-4486	
CUSTODIAN, ASST		SHANNON MOSLEY					

<b>EAST PROFESSIONAL CENTER</b>	<b>1349 EAST 79TH STREET</b>	<b>44104</b>	
---------------------------------	------------------------------	--------------	--

<i>MAIN OFFICE:</i>	<b>531-2872</b>	<i>CUSTODIAN 'S OFFICE:</i>		<i>SITE:</i>	<b>144</b>	<i>CMUSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>CELL</u>	
CUSTODIAN		DUANE GIBSON				785-4508	
LABORER - STEP 1		ARCHIE REDDIX JR.				375-7823	
CUSTODIAN		CHERYL ELDER				785-4470	

<b>EAST TECH</b>	<b>2439 EAST 55TH STREET</b>	<b>44104</b>	
------------------	------------------------------	--------------	--

<i>SCHOOL OFFICE:</i>	<b>431-2626</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>432-4561</b>	<i>SITE:</i>	<b>161</b>	<i>CMUSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>CELL</u>	
CUSTODIAN		EMMANUEL LEVI				785-4533	
CUSTODIAN, ASST		JESSE COATS				280-0931	
LABORER - STEP 1		THOMAS KENNEDY				785-4638	
LABORER - STEP 1		FAYE STEWARD					

<b>EUCLID PARK</b>	<b>17914 EUCLID AVENUE</b>	<b>44112</b>	<b>MULTI-SITE</b>
--------------------	----------------------------	--------------	-------------------

<i>SCHOOL OFFICE:</i>	<b>920-1855</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>383-4675</b>	<i>SITE:</i>	<b>168</b>	<i>CMUSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>CELL</u>	
CUSTODIAN		WILLIAM SIMPSON				785-4606	
CUSTODIAN, ASST		JEFFERY KING				272-6949	



<b>FD ROOSEVELT</b>		<b>800 LINN DRIVE</b>		<b>44108</b>	
<i>SCHOOL OFFICE:</i>	268-8100	<i>CUSTODIAN 'S OFFICE:</i>	268-6037	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		172	<i>SUPERVISOR:</i> L BATTLE
CUSTODIAN		FRANCHEZCO FRIERSON			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		MAURICE A. SAFFO			785-4547
<b>FULLERTON</b>		<b>5920 FULLERTON AVENUE</b>		<b>44105</b>	
<i>SCHOOL OFFICE:</i>	341-2393	<i>CUSTODIAN 'S OFFICE:</i>	341-6902	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		184	<i>SUPERVISOR:</i> J PRATT
CUSTODIAN		TOMMIE JENKINS			<a href="#"><u>CELL</u></a>
					647-2361
<b>GARFIELD</b>		<b>3800 WEST 140TH STREET</b>		<b>44111</b>	<b>MULTI-SITE</b>
<i>SCHOOL OFFICE:</i>	251-3876	<i>CUSTODIAN 'S OFFICE:</i>	920-7028	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		188	<i>SUPERVISOR:</i> J JOYCE
CUSTODIAN		THEODORE CZALKIEWICZ			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		GARY MATWIJW			785-4548
<b>GARRETT MORGAN</b>		<b>4016 WOODBINE AVENUE</b>		<b>44113</b>	<b>MULTI-SITE</b>
<i>SCHOOL OFFICE:</i>	281-6188	<i>CUSTODIAN 'S OFFICE:</i>	634-2166	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		802	<i>SUPERVISOR:</i> J JOYCE
CUSTODIAN		SCOTT ARTBAUER			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		VACANT			785-4527
					284-2813
<b>GEORGE W. CARVER</b>		<b>2201 EAST 49TH STREET</b>		<b>44103</b>	
<i>SCHOOL OFFICE:</i>	391-2916	<i>CUSTODIAN 'S OFFICE:</i>	391-5109	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		198	<i>SUPERVISOR:</i> L BATTLE
CUSTODIAN		BARON HALL			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		WILLIE KING			785-4490
					785-4715
<b>GINN @ MARGARET SPELLACY</b>		<b>655 EAST 162ND STREET</b>		<b>44110</b>	
<i>SCHOOL OFFICE:</i>	531-2872	<i>CUSTODIAN 'S OFFICE:</i>	383-4660	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		343	<i>SUPERVISOR:</i> L BATTLE
CUSTODIAN		GEORGE MOSER			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		MARK CURRY			785-4568
					533-6191
<b>GLENVILLE</b>		<b>650 EAST 113TH STREET</b>		<b>44108</b>	
<i>SCHOOL OFFICE:</i>	268-6000	<i>CUSTODIAN 'S OFFICE:</i>	268-6016	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		220	<i>SUPERVISOR:</i> L BATTLE
CUSTODIAN		JOHN JACKSON			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		VASHTI PAYNE			258-8741
LABORER - STEP 1		VINCENT HUNT			647-2691
					785-4653



<b>H. BARBARA BOOKER</b>	<b>2121 WEST 67TH STREET</b>	<b>44102</b>	<b>MULTI-SITE</b>
--------------------------	------------------------------	--------------	-------------------

<i>SCHOOL OFFICE:</i>	961-1753	<i>CUSTODIAN 'S OFFICE:</i>	634-8704	<i>SITE:</i>	224	<i>CMSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>SUPERVISOR:</u>	J PRATT
CUSTODIAN		MARTIN KEMMETT				<u>CELL</u>	
CUSTODIAN, ASST		THOMAS FAHEY					315-4329

<b>HANNAH GIBBONS</b>	<b>1401 LARCHMONT ROAD</b>	<b>44117</b>	<b>MULTI-SITE</b>
-----------------------	----------------------------	--------------	-------------------

<i>SCHOOL OFFICE:</i>	383-5111	<i>CUSTODIAN 'S OFFICE:</i>	383-5123	<i>SITE:</i>	229	<i>CMSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>SUPERVISOR:</u>	L BATTLE
CUSTODIAN		WILLIAM SIMPSON				<u>CELL</u>	
CUSTODIAN, ASST		VACANT					785-4606

<b>HARRY E. DAVIS</b>	<b>10700 CHURCHILL AVENUE</b>	<b>44106</b>	
-----------------------	-------------------------------	--------------	--

<i>SCHOOL OFFICE:</i>	791-6272	<i>CUSTODIAN 'S OFFICE:</i>	791-6365	<i>SITE:</i>	233	<i>CMSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>SUPERVISOR:</u>	L BATTLE
CUSTODIAN		CARL THOMAS				<u>CELL</u>	
							785-4420

<b>HARVEY RICE</b>	<b>2730 EAST 116 STREET</b>	<b>44120</b>	<b>MULTI-SITE</b>
--------------------	-----------------------------	--------------	-------------------

<i>SCHOOL OFFICE:</i>	707-5136	<i>CUSTODIAN 'S OFFICE:</i>	916-0104	<i>SITE:</i>	240	<i>CMSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>SUPERVISOR:</u>	J PRATT
CUSTODIAN		MARK LEWIS				<u>CELL</u>	
CUSTODIAN, ASST		CHERYL LASHLEY					315-4271
							215-7385

<b>IOWA MAPLE</b>	<b>12510 MAPLE AVENUE</b>	<b>44108</b>	<b>MULTI-SITE</b>
-------------------	---------------------------	--------------	-------------------

<i>SCHOOL OFFICE:</i>	451-6630	<i>CUSTODIAN 'S OFFICE:</i>	451-3189	<i>SITE:</i>	270	<i>CMSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>SUPERVISOR:</u>	L BATTLE
CUSTODIAN		PETER POSEDLY				<u>CELL</u>	
CUSTODIAN, ASST		THEODORE MCCARY					785-4486
							659-0534

<b>JAMES F. RHODES</b>	<b>5100 BIDDULPH AVENUE</b>	<b>44144</b>	
------------------------	-----------------------------	--------------	--

<i>SCHOOL OFFICE:</i>	351-6285	<i>CUSTODIAN 'S OFFICE:</i>	459-4215	<i>SITE:</i>	273	<i>CMSD REGION:</i>	
<u>POSITION</u>		<u>NAME</u>				<u>SUPERVISOR:</u>	J PRATT
CUSTODIAN		HUGH FORREY				<u>CELL</u>	
CUSTODIAN, ASST		TERESA LEFLER					215-6265
							659-0009

<b>JAMES F. RHODES FIELD</b>	<b>5100 BIDDULPH AVENUE</b>	<b>44144</b>
------------------------------	-----------------------------	--------------

<b>SCHOOL OFFICE:</b>	<b>351-6285</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>749-8142</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b>POSITION</b>		<b>NAME</b>		<b>272</b>	<b>SUPERVISOR:</b>
LABORER - STEP 7		JOHN TORRES			<b>J PRATT</b>
					<b>CELL</b>
					785-4602

<b>JANE ADDAMS</b>	<b>2373 EAST 30TH STREET</b>	<b>44115</b>
--------------------	------------------------------	--------------

<b>SCHOOL OFFICE:</b>	<b>621-2131</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>623-8919</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b>POSITION</b>		<b>NAME</b>		<b>275</b>	<b>SUPERVISOR:</b>
CUSTODIAN		MICHAEL MARGHERET			<b>J JOYCE</b>
CUSTODIAN, ASST		DENNIS TURAY			<b>CELL</b>
LABORER - STEP 7		MICHAEL WASIK			785-4437
					225-6179
					785-4607

<b>JOHN ADAMS</b>	<b>3817 MARTIN L. KING DRIVE</b>	<b>44105</b>
-------------------	----------------------------------	--------------

<b>SCHOOL OFFICE:</b>	<b>491-5700</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>491-5735</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b>POSITION</b>		<b>NAME</b>		<b>276</b>	<b>SUPERVISOR:</b>
CUSTODIAN		ABEL AIKENS			<b>J PRATT</b>
CUSTODIAN, ASST		RHONDA JONES			<b>CELL</b>
LABORER - STEP 1		MICHAEL BANKS			785-4373
					534-8152

<b>JFK E3AGLE ACAD. 9TH GR.</b>	<b>13604 CHRISTINE AVENUE</b>	<b>44105</b>
<b>AT CRANWOOD SCH</b>		

<b>SCHOOL OFFICE:</b>	<b>838-5150</b>	<b>CUSTODIAN 'S OFFICE:</b>		<b>SITE:</b>	<b>CMSD REGION:</b>
<b>POSITION</b>		<b>NAME</b>			<b>SUPERVISOR:</b>
CUSTODIAN		JOHN CHILKCUTT			<b>J PRATT</b>
					<b>CELL</b>
					548-0130

<b>JOHN F. KENNEDY</b>	<b>17100 HARVARD AVENUE</b>	<b>44128</b>
------------------------	-----------------------------	--------------

<b>SCHOOL OFFICE:</b>	<b>921-1450</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>295-2475</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b>POSITION</b>		<b>NAME</b>		<b>285</b>	<b>SUPERVISOR:</b>
CUSTODIAN		GARY MARTIN			<b>J PRATT</b>
CUSTODIAN, ASST		WILLIAM WASHINGTON			<b>CELL</b>
					785-4567
					678-0460

<b>JOHN F. KENNEDY FIELD</b>	<b>17100 HARVARD AVENUE</b>	<b>44128</b>
------------------------------	-----------------------------	--------------

<b>SCHOOL OFFICE:</b>	<b>921-1450</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>295-4497</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b>POSITION</b>		<b>NAME</b>		<b>286</b>	<b>SUPERVISOR:</b>
LABORER - STEP 7		RICHARD DIETRICH			<b>J PRATT</b>
					<b>CELL</b>
					785-4631

<b>JOHN HAY</b>			<b>2075 STOKES BOULEVARD</b>		<b>44106</b>	
<i>SCHOOL OFFICE:</i>	<b>421-7700</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>229-0123</b>	<i>SITE:</i>	<b>284</b>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>				<i>SUPERVISOR:</i>
CUSTODIAN		ANTHONY WILSON				<b>L BATTLE</b>
CUSTODIAN, ASST		DAVID KIMBROUGH				<a href="#"><u>CELL</u></a>
LABORER - STEP 1		ALAN-JEROME LOWERY				785-4384
						225-1860
<b>JOHN MARSHALL FIELD</b>			<b>3952 WEST 140TH STREET</b>		<b>44111</b>	
<i>SCHOOL OFFICE:</i>	<b>251-5740</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>476-4996</b>	<i>SITE:</i>	<b>291</b>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>				<i>SUPERVISOR:</i>
LABORER - STEP 7		VACANT				<b>J JOYCE</b>
						<a href="#"><u>CELL</u></a>
<b>JOSEPH M. GALLAGHER</b>			<b>6601 FRANKLIN BOULEVARD</b>		<b>44102</b>	
<i>SCHOOL OFFICE:</i>	<b>961-0057</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>634-2363</b>	<i>SITE:</i>	<b>279</b>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>				<i>SUPERVISOR:</i>
CUSTODIAN		WILFREDO REYES				<b>J JOYCE</b>
CUSTODIAN, ASST		VACANT				<a href="#"><u>CELL</u></a>
						785-4595
<b>KENNETH CLEMENT</b>			<b>14311 WOODWORTH ROAD</b>		<b>44112</b>	
<i>SCHOOL OFFICE:</i>	<b>541-7543</b>	<i>CUSTODIAN 'S OFFICE:</i>		<i>SITE:</i>	<b>297</b>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>				<i>SUPERVISOR:</i>
CUSTODIAN		MICHAEL DONEGAN				<b>L BATTLE</b>
						<a href="#"><u>CELL</u></a>
<b>KENTUCKY</b>			<b>3805 TERRETT AVENUE</b>		<b>44113</b>	<b>MULTI-SITE</b>
<i>SCHOOL OFFICE:</i>	<b>631-3310</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>631-2038</b>	<i>SITE:</i>	<b>301</b>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>				<i>SUPERVISOR:</i>
CUSTODIAN		MICHAEL HANSEN				<b>J JOYCE</b>
						<a href="#"><u>CELL</u></a>
						315-5409
<b>LAKE CENTER DEPOT</b>			<b>870 EAST 79TH STREET</b>		<b>44103</b>	
<i>SCHOOL OFFICE:</i>	<b>432-4600</b>	<i>CUSTODIAN 'S OFFICE:</i>		<i>SITE:</i>	<b>969</b>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>				<i>SUPERVISOR:</i>
LABORER - STEP 7		JOE WIRT				<b>L BATTLE</b>
						<a href="#"><u>CELL</u></a>
						785-4598
<b>LAKESIDE ADMINISTRATION</b>			<b>1440 LAKESIDE AVENUE</b>		<b>44114</b>	<b>MULTI-SITE</b>
<i>SCHOOL OFFICE:</i>	<b>621-2087</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>621-2087</b>	<i>SITE:</i>	<b>099</b>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>				<i>SUPERVISOR:</i>
CUSTODIAN		JOHN MARGHERET				<b>L BATTLE</b>
CUSTODIAN, ASST		JAMES TAYLOR III				<a href="#"><u>CELL</u></a>
						315-4030
						272-2752

<b>LINCOLN WEST</b>		<b>3202 WEST 30TH STREET</b>		<b>44109</b>	
<i>SCHOOL OFFICE:</i>	<b>631-1505</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>634-2416</b>	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>330</b>	<i>SUPERVISOR:</i>
CUSTODIAN		PAUL SHOW			<b>L BATTLE</b>
CUSTODIAN, ASST		RICHARD LUZIER			
LABORER - STEP 7		ROBERT RUTHERFORD			
					<i>CELL</i>
					785-4462
					548-8191
					785-4632
<b>LOUIS AGASSIZ</b>		<b>3595 BOSWORTH ROAD</b>		<b>44111</b>	
<i>SCHOOL OFFICE:</i>	<b>251-7747</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>251-5048</b>	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>338</b>	<i>SUPERVISOR:</i>
CUSTODIAN		DAVID MOENICH			<b>J PRATT</b>
					<i>CELL</i>
					225-4561
<b>LOUISA MAY ALCOTT</b>		<b>10308 BALTIC ROAD</b>		<b>44102</b>	
<i>SCHOOL OFFICE:</i>	<b>631-3151</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>631-3156</b>	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>340</b>	<i>SUPERVISOR:</i>
CUSTODIAN		THOMAS COLE			<b>J PRATT</b>
					<i>CELL</i>
					785-4558
<b>LUIS MUNOZ MARIN</b>		<b>1701 CASTLE AVENUE</b>		<b>44113</b>	
<i>SCHOOL OFFICE:</i>	<b>241-7440</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>241-5871</b>	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>328</b>	<i>SUPERVISOR:</i>
CUSTODIAN		ROBERT COLEMAN			<b>J JOYCE</b>
CUSTODIAN, ASST		MICHAEL ROMINE			
					<i>CELL</i>
					548-9534
					533-7900
<b>MARGARET IRELAND (PEP)</b>		<b>1800 EAST 63RD STREET</b>		<b>44106</b>	
<i>SCHOOL OFFICE:</i>	<b>658-2620</b>	<i>CUSTODIAN 'S OFFICE:</i>		<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>343</b>	<i>SUPERVISOR:</i>
CUSTODIAN		RONALD WENTZ			<b>L BATTLE</b>
					<i>CELL</i>
					785-4536
<b>MARION SELTZER</b>		<b>1468 WEST 98TH STREET</b>		<b>44102</b>	
<i>SCHOOL OFFICE:</i>	<b>631-0678</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>634-8713</b>	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>353</b>	<i>SUPERVISOR:</i>
CUSTODIAN		MATTHEW KILBANE			<b>J PRATT</b>
CUSTODIAN, ASST		THOMAS YAMAMOTO			
					<i>CELL</i>
					785-4644
<b>MARION STERLING</b>		<b>3033 CENTRAL AVENUE</b>		<b>44115</b>	<b>MULTI-SITE</b>
<i>SCHOOL OFFICE:</i>	<b>621-0612</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>241-6916</b>	<i>SITE:</i>	<i>CMSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>354</b>	<i>SUPERVISOR:</i>
CUSTODIAN		AARON CREEL			<b>L BATTLE</b>
CUSTODIAN, ASST		JUSTIN FULLER			
					<i>CELL</i>
					785-4367
					392-6059

<b>MARSHALL 9TH GR. ACAD. @</b>		<b>3575 WEST 130TH STREET</b>		<b>44111</b>	<b>MULTI-SITE</b>
<b>HAWTHORNE</b>				<i>SITE:</i>	<i>CMSD REGION:</i>
<i>SCHOOL OFFICE:</i>	889-4015	<i>CUSTODIAN 'S OFFICE:</i>	889-4074	412	<i>SUPERVISOR:</i> L BATTLE
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<a href="#"><u>CELL</u></a>	
CUSTODIAN		GREGORY RINALDI		785-4586	
CUSTODIAN, ASST		DAVID FLEACA		225-0964	
<b>MARTIN LUTHER KING, JR</b>		<b>1651 EAST 71ST STREET</b>		<b>44103</b>	
				<i>SITE:</i>	<i>CMSD REGION:</i>
<i>SCHOOL OFFICE:</i>	431-6858	<i>CUSTODIAN 'S OFFICE:</i>	432-4934	355	<i>SUPERVISOR:</i> J JOYCE
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<a href="#"><u>CELL</u></a>	
CUSTODIAN		DAVID LANDRUM		785-4483	
CUSTODIAN, ASST		TRACY BURRUS		767-6541	
LABORER - STEP 1		LARRY GLENN			
<b>MARY B. MARTIN</b>		<b>8200 BROOKLINE AVENUE</b>		<b>44103</b>	
				<i>SITE:</i>	<i>CMSD REGION:</i>
<i>SCHOOL OFFICE:</i>	229-2025	<i>CUSTODIAN 'S OFFICE:</i>	229-2205	347	<i>SUPERVISOR:</i> J JOYCE
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<a href="#"><u>CELL</u></a>	
CUSTODIAN		GARDNER TAYLOR		785-4561	
<b>MARY M. BETHUNE</b>		<b>11815 MOULTON AVENUE</b>		<b>44106</b>	
				<i>SITE:</i>	<i>CMSD REGION:</i>
<i>SCHOOL OFFICE:</i>	231-0100	<i>CUSTODIAN 'S OFFICE:</i>	231-0111	350	<i>SUPERVISOR:</i> L BATTLE
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<a href="#"><u>CELL</u></a>	
CUSTODIAN		LARRY HENDERSON		496-6126	
<b>MAX HAYES</b>		<b>4600 DETROIT AVENUE</b>		<b>44102</b>	
				<i>SITE:</i>	<i>CMSD REGION:</i>
<i>SCHOOL OFFICE:</i>	631-1528	<i>CUSTODIAN 'S OFFICE:</i>	634-8675	349	<i>SUPERVISOR:</i> L BATTLE
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<a href="#"><u>CELL</u></a>	
CUSTODIAN		TREVOR KERSHEVICH		785-4565	
CUSTODIAN, ASST		ALLEN SMITH		785-4611	
LABORER - STEP 1		ROBERTO ESPINOSO			
<b>MCKINLEY</b>		<b>3349 WEST 125TH STREET</b>		<b>44111</b>	<b>MULTI-SITE</b>
				<i>SITE:</i>	<i>CMSD REGION:</i>
<i>SCHOOL OFFICE:</i>	251-4175	<i>CUSTODIAN 'S OFFICE:</i>	476-6824	352	<i>SUPERVISOR:</i> J JOYCE
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<a href="#"><u>CELL</u></a>	
CUSTODIAN		GREGORY RINALDI		785-4586	
CUSTODIAN, ASST		RICHARD GOLEMBIOWSKI		548-3019	
<b>MEMORIAL</b>		<b>410 EAST 152 STREET</b>		<b>44110</b>	
				<i>SITE:</i>	<i>CMSD REGION:</i>
<i>SCHOOL OFFICE:</i>	692-4180	<i>CUSTODIAN 'S OFFICE:</i>	692-4119	027	<i>SUPERVISOR:</i> L BATTLE
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<a href="#"><u>CELL</u></a>	
CUSTODIAN		ARTIS DUNCAN			
CUSTODIAN, ASST		ERIC BIGGS			

<b>MICHAEL R. WHITE</b>	<b>1000 EAST 92ND STREET</b>	<b>44108</b>
-------------------------	------------------------------	--------------

<b>SCHOOL OFFICE:</b>	<b>451-7013</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>451-4690</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b><u>POSITION</u></b>		<b><u>NAME</u></b>		<b>376</b>	<b>SUPERVISOR:</b>
CUSTODIAN		SAMUEL HALSEY			<b>L BATTLE</b>
					<b><u>CELL</u></b>
					548-3187

<b>MILES</b>	<b>11918 MILES AVENUE</b>	<b>44105</b>
--------------	---------------------------	--------------

<b>SCHOOL OFFICE:</b>	<b>518-3871</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>518-3876</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b><u>POSITION</u></b>		<b><u>NAME</u></b>		<b>368</b>	<b>SUPERVISOR:</b>
CUSTODIAN		FRANK VAUGHN			<b>J PRATT</b>
					<b><u>CELL</u></b>
					333-4852

<b>MILES PARK</b>	<b>4090 EAST 93RD STREET</b>	<b>44105</b>
-------------------	------------------------------	--------------

<b>SCHOOL OFFICE:</b>	<b>641-3993</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>838-5255</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b><u>POSITION</u></b>		<b><u>NAME</u></b>		<b>372</b>	<b>SUPERVISOR:</b>
CUSTODIAN		ERICH KRUMHANS�			<b>J PRATT</b>
CUSTODIAN, ASST		JOSEPH MAIMONE			<b><u>CELL</u></b>
					785-4543
					333-9568

<b>MOBILE GROUNDS CREW</b>	<b>3832 RIDGE ROAD</b>	<b>44144</b>
----------------------------	------------------------	--------------

<b>SCHOOL OFFICE:</b>	<b>621-2131</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>623-8919</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b><u>POSITION</u></b>		<b><u>NAME</u></b>		<b>998</b>	<b>SUPERVISOR:</b>
LABORER - STEP 7		DARRELL STOKES			<b>L BATTLE</b>
LABORER - STEP 1		DEAN GIBSON			<b><u>CELL</u></b>
LABORER - STEP 7		ISIAH MILLS			502-1822
LABORER - STEP 1		MONICA BATTLE			543-9980
LABORER - STEP 1		NORMA CARRASQUILLO			785-4589
LABORER - STEP 1		ROBERTO MORALES			785-4610

<b>MOUND</b>	<b>5935 ACKLEY ROAD</b>	<b>44105</b>
--------------	-------------------------	--------------

<b>SCHOOL OFFICE:</b>	<b>341-2671</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>458-7499</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b><u>POSITION</u></b>		<b><u>NAME</u></b>		<b>396</b>	<b>SUPERVISOR:</b>
CUSTODIAN		JOSEPH EDWARDS			<b>J PRATT</b>
CUSTODIAN, ASST		VACANT			<b><u>CELL</u></b>
					577-5028

<b>NATHAN HALE</b>	<b>3588 MARTIN L. KING DRIVE</b>	<b>44105</b>
--------------------	----------------------------------	--------------

<b>SCHOOL OFFICE:</b>	<b>295-3503</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>482-3340</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b><u>POSITION</u></b>		<b><u>NAME</u></b>		<b>411</b>	<b>SUPERVISOR:</b>
CUSTODIAN		LINDA ADAMS			<b>J PRATT</b>
CUSTODIAN, ASST		SEAN BIRKS			<b><u>CELL</u></b>
					315-4218

<b>NEWTON D. BAKER</b>			<b>3690 WEST 159TH STREET</b>	<b>44111</b>		
<i>SCHOOL OFFICE:</i>	252-2131	<i>CUSTODIAN 'S OFFICE:</i>	476-6832	<i>SITE:</i>	<i>CMUSD REGION:</i>	
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		415	<i>SUPERVISOR:</i>	J JOYCE
CUSTODIAN		RICHARD STUART			<a href="#"><u>CELL</u></a>	
CUSTODIAN, ASST		GLEN HINEGARDNER			785-4484	
					262-3562	
<b>ORCHARD</b>			<b>4200 BAILEY AVENUE</b>	<b>44113</b>		
<i>SCHOOL OFFICE:</i>	838-7350	<i>CUSTODIAN 'S OFFICE:</i>	838-7355	<i>SITE:</i>	<i>CMUSD REGION:</i>	
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		436	<i>SUPERVISOR:</i>	J PRATT
CUSTODIAN		BRIAN READING			<a href="#"><u>CELL</u></a>	
					496-5380	
<b>OLIVER H. PERRY</b>			<b>18400 SCHENELY AVENUE</b>	<b>44119</b>		
<i>SCHOOL OFFICE:</i>	481-7528	<i>CUSTODIAN 'S OFFICE:</i>	383-5167	<i>SITE:</i>	<i>CMUSD REGION:</i>	
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		428	<i>SUPERVISOR:</i>	L BATTLE
CUSTODIAN		KENT KLINGER			<a href="#"><u>CELL</u></a>	
					647-2019	
<b>PATRICK HENRY</b>			<b>11901 DURRANT AVENUE</b>	<b>44108</b>		
<i>SCHOOL OFFICE:</i>	774-2860	<i>CUSTODIAN 'S OFFICE:</i>	744-2860	<i>SITE:</i>	<i>CMUSD REGION:</i>	
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		448	<i>SUPERVISOR:</i>	L BATTLE
CUSTODIAN		VACANT			<a href="#"><u>CELL</u></a>	
<b>PATRICK HENRY FIELD</b>			<b>11901 DURRANT AVENUE</b>	<b>44108</b>		
<b>(BUMP TAYLOR FIELD)</b>						
<i>SCHOOL OFFICE:</i>	851-6600	<i>CUSTODIAN 'S OFFICE:</i>	268-6095	<i>SITE:</i>	<i>CMUSD REGION:</i>	
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		449	<i>SUPERVISOR:</i>	L BATTLE
LABORER - STEP 1		PHILIP PAYNE JR			<a href="#"><u>CELL</u></a>	
					785-4614	
<b>PAUL DUNBAR (NEW)</b>			<b>2159 WEST 29TH STREET</b>	<b>44113</b>		
<i>SCHOOL OFFICE:</i>		<i>CUSTODIAN 'S OFFICE:</i>	838-7405	<i>SITE:</i>	<i>CMUSD REGION:</i>	
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		451	<i>SUPERVISOR:</i>	J PRATT
CUSTODIAN		JEFFERY LLOYD			<a href="#"><u>CELL</u></a>	
					785-4748	
<b>PAUL REVERE</b>			<b>10706 SANDUSKY AVENUE</b>	<b>44105</b>		
<i>SCHOOL OFFICE:</i>	341-2172	<i>CUSTODIAN 'S OFFICE:</i>	641-2081	<i>SITE:</i>	<i>CMUSD REGION:</i>	
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		452	<i>SUPERVISOR:</i>	J PRATT
CUSTODIAN		ERIC ELDER			<a href="#"><u>CELL</u></a>	
CUSTODIAN, ASST		MATTHEW FORT JR			233-1852	
					533-7176	

<b>RIDGE RD DEPOT</b>		<b>3832 RIDGE ROAD</b>		<b>44144</b>	
<i>SCHOOL OFFICE:</i>	<b>634-7000</b>	<i>CUSTODIAN 'S OFFICE:</i>		<i>SITE:</i>	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>964</b>	<i>SUPERVISOR:</i> <b>L BATTLE</b>
FACILITIES EQUIPMENT TECH		ROBERT BLAIR			<a href="#"><u>CELL</u></a>
LABORER - STEP 7		BRIAN MARSHALL			785-4493
CUSTODIAN, ASST		ROBERT YOUNG			392-5179
					551-8209
<b>RIVERSIDE</b>		<b>14601 MONTROSE AVENUE</b>		<b>44111</b>	
<i>SCHOOL OFFICE:</i>	<b>688-3600</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>838-6705</b>	<i>SITE:</i>	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>485</b>	<i>SUPERVISOR:</i> <b>J JOYCE</b>
CUSTODIAN		OTTO ARTBAUER JR			<a href="#"><u>CELL</u></a>
					785-4454
<b>ROBERT H. JAMISON</b>		<b>4092 EAST 146 STREET</b>		<b>44128</b>	<b>MULTI-SITE</b>
<i>SCHOOL OFFICE:</i>	<b>920-1305</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>920-1316</b>	<i>SITE:</i>	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>482</b>	<i>SUPERVISOR:</i> <b>J PRATT</b>
CUSTODIAN		MICHAEL CREEL			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		PHILLIP ELBERT			702-4036
<b>ROBINSON G. JONES</b>		<b>4550 WEST 150TH STREET</b>		<b>44135</b>	
<i>SCHOOL OFFICE:</i>	<b>889-4071</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>920-7147</b>	<i>SITE:</i>	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>487</b>	<i>SUPERVISOR:</i> <b>L BATTLE</b>
CUSTODIAN		JESSE DUDAS			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		VACANT			406-8735
<b>SCRANTON</b>		<b>1991 BARBER AVENUE</b>		<b>44113</b>	
<i>SCHOOL OFFICE:</i>	<b>621-2165</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>621-2206</b>	<i>SITE:</i>	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>500</b>	<i>SUPERVISOR:</i> <b>J PRATT</b>
CUSTODIAN		VACANT			<a href="#"><u>CELL</u></a>
<b>STEM @ HEALTH CAREERS</b>		<b>1740 EAST 32ND STREET</b>		<b>44114</b>	<b>MULTI-SITE</b>
<i>SCHOOL OFFICE:</i>	<b>579-9984</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>592-6881</b>	<i>SITE:</i>	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>804</b>	<i>SUPERVISOR:</i> <b>L BATTLE</b>
CUSTODIAN		AARON CREEL			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		LORETTA PETERSON			785-4367
					501-3982
<b>SOUTH</b>		<b>7415 BROADWAY AVENUE</b>		<b>44120</b>	<b>MULTI-SITE</b>
<i>SCHOOL OFFICE:</i>		<i>CUSTODIAN 'S OFFICE:</i>		<i>SITE:</i>	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>		<b>532</b>	<i>SUPERVISOR:</i> <b>J PRATT</b>
CUSTODIAN		STEVEN DOGGETT			<a href="#"><u>CELL</u></a>
LABORER - STEP 1		AMELIA MAYFIELD			785-4542



<b>SUNBEAM</b>		<b>11731 MT. OVERLOOK AVENUE</b>		<b>44120</b>	<b>MULTI-SITE</b>
<i>SCHOOL OFFICE:</i>	231-0961	<i>CUSTODIAN 'S OFFICE:</i>	795-8099	<i>SITE:</i> 532	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>			<i>SUPERVISOR:</i> J JOYCE
CUSTODIAN		MARK LEWIS			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		RHONDA BLEVINS-COURTS			315-4271
					534-7284
<b>THOMAS JEFFERSON</b>		<b>3145 WEST 46TH STREET</b>		<b>44102</b>	
<b>9TH GRADE ACADEMY</b>					
<i>SCHOOL OFFICE:</i>	404-5100	<i>CUSTODIAN 'S OFFICE:</i>	404-5104	<i>SITE:</i> 536	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>			<i>SUPERVISOR:</i> J PRATT
CUSTODIAN		CHRISTOPHER KEANE			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		SEAN ELBERT			785-4474
<b>TREMONT</b>		<b>2409 WEST 10TH STREET</b>		<b>44113</b>	
<i>SCHOOL OFFICE:</i>	621-2082	<i>CUSTODIAN 'S OFFICE:</i>	621-2558	<i>SITE:</i> 544	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>			<i>SUPERVISOR:</i> J PRATT
CUSTODIAN		DONALD MCLEROY JR			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		DOUGLAS SCHUTT			785-4741
					225-9853
<b>VALLEY VIEW</b>		<b>17200 VALLEYVIEW AVENUE</b>		<b>44135</b>	<b>MULTI-SITE</b>
<i>SCHOOL OFFICE:</i>	251-5873	<i>CUSTODIAN 'S OFFICE:</i>	251-5873	<i>SITE:</i> 550	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>			<i>SUPERVISOR:</i> J PRATT
CUSTODIAN		DANIEL ROY			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		BERNARD SOBOSLAY			785-4730
					785-4623
<b>WADE PARK</b>		<b>7600 WADE PARK AVENUE</b>		<b>44103</b>	
<i>SCHOOL OFFICE:</i>	361-0580	<i>CUSTODIAN 'S OFFICE:</i>	920-6945	<i>SITE:</i> 556	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>			<i>SUPERVISOR:</i> L BATTLE
CUSTODIAN		LAMONT FIELDS			<a href="#"><u>CELL</u></a>
<b>WALTON</b>		<b>3409 WALTON AVENUE</b>		<b>44113</b>	
<i>SCHOOL OFFICE:</i>	961-1649	<i>CUSTODIAN 'S OFFICE:</i>	631-3520	<i>SITE:</i> 560	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>			<i>SUPERVISOR:</i> L BATTLE
CUSTODIAN		IVAN GABRIEL			<a href="#"><u>CELL</u></a>
CUSTODIAN,ASST		THOMAS LACEY			280-3135
<b>WARNER</b>		<b>8315 JEFFRIES AVENUE</b>		<b>44105</b>	
<i>SCHOOL OFFICE:</i>	206-4620	<i>CUSTODIAN 'S OFFICE:</i>	206-4647	<i>SITE:</i> 572	<i>CMUSD REGION:</i>
<a href="#"><u>POSITION</u></a>		<a href="#"><u>NAME</u></a>			<i>SUPERVISOR:</i> J PRATT
CUSTODIAN		DONALD LYONS			<a href="#"><u>CELL</u></a>
CUSTODIAN, ASST		VACANT			785-4499

<b>WASHINGTON PARK</b>	<b>3875 WASHINGTON PARK BLVD</b>	<b>44105</b>
------------------------	----------------------------------	--------------

<b>SCHOOL OFFICE:</b>	<b>441-8070</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>482-2677</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b><u>POSITION</u></b>		<b><u>NAME</u></b>		<b>587</b>	<b>SUPERVISOR:</b>
CUSTODIAN		ROBERT HALE			<b>J PRATT</b>
					<b><u>CELL</u></b>
					785-4524

<b>WATTERSON-LAKE</b>	<b>1422 WEST 74TH STREET</b>	<b>44102</b>
-----------------------	------------------------------	--------------

<b>SCHOOL OFFICE:</b>	<b>961-0154</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>634-2449</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b><u>POSITION</u></b>		<b><u>NAME</u></b>		<b>592</b>	<b>SUPERVISOR:</b>
CUSTODIAN		MATTHEW KILBANE			<b>L BATTLE</b>
CUSTODIAN, ASST		FRANK MAROLT			<b><u>CELL</u></b>
					246-9752

<b>WAVERLY</b>	<b>1810 WEST 54TH STREET</b>	<b>44102</b>	<b>MULTI-SITE</b>
----------------	------------------------------	--------------	-------------------

<b>SCHOOL OFFICE:</b>	<b>634-2121</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>634-2127</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b><u>POSITION</u></b>		<b><u>NAME</u></b>		<b>596</b>	<b>SUPERVISOR:</b>
CUSTODIAN		MARTIN KEMMETT			<b>J PRATT</b>
CUSTODIAN ASST		CHARLES SCHUTT			<b><u>CELL</u></b>
					315-4329

<b>WHITNEY YOUNG</b>	<b>17900 HARVARD AVENUE</b>	<b>44128</b>
----------------------	-----------------------------	--------------

<b>SCHOOL OFFICE:</b>	<b>283-5220</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>283-2894</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b><u>POSITION</u></b>		<b><u>NAME</u></b>		<b>615</b>	<b>SUPERVISOR:</b>
CUSTODIAN		DENNIS JACKSON			<b>J PRATT</b>
CUSTODIAN, ASST		CLARENCE SOLOMON			<b><u>CELL</u></b>
					785-4738
					212-7081

<b>WILBUR WRIGHT</b>	<b>11005 PAKHURST DRIVE</b>	<b>44111</b>
----------------------	-----------------------------	--------------

<b>SCHOOL OFFICE:</b>	<b>476-4200</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>476-4213</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b><u>POSITION</u></b>		<b><u>NAME</u></b>		<b>616</b>	<b>SUPERVISOR:</b>
CUSTODIAN		JAMES GASIEWSKI			<b>J JOYCE</b>
CUSTODIAN, ASST		JOSEPH SCHILLACE			<b><u>CELL</u></b>
					246-1585
					375-5713

<b>WILLIAM C. BRYANT</b>	<b>3121 OAK PARK AVENUE</b>	<b>44109</b>
--------------------------	-----------------------------	--------------

<b>SCHOOL OFFICE:</b>	<b>351-6343</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>749-8595</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b><u>POSITION</u></b>		<b><u>NAME</u></b>		<b>622</b>	<b>SUPERVISOR:</b>
CUSTODIAN		CHRISTOPHER PERTZ			<b>J JOYCE</b>
					<b><u>CELL</u></b>
					785-4660

<b>WILLOW</b>	<b>5004 GLAZIER AVENUE</b>	<b>44127</b>
---------------	----------------------------	--------------

<b>SCHOOL OFFICE:</b>	<b>883-6118</b>	<b>CUSTODIAN 'S OFFICE:</b>	<b>641-2055</b>	<b>SITE:</b>	<b>CMSD REGION:</b>
<b><u>POSITION</u></b>		<b><u>NAME</u></b>		<b>605</b>	<b>SUPERVISOR:</b>
CUSTODIAN		MARK MATUSZNY			<b>J JOYCE</b>
					<b><u>CELL</u></b>
					659-0510

<b>WILLSON</b>		<b>1126 ANSEL ROAD</b>		<b>44106</b>	
<i>SCHOOL OFFICE:</i>	<b>920-1205</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>432-4945</b>	<i>SITE:</i>	<i>CMSD REGION:</i>
<u>POSITION</u>		<u>NAME</u>		<b>624</b>	<i>SUPERVISOR:</i> L BATTLE
CUSTODIAN		BRENDA RANSAW			<u>CELL</u>
CUSTODIAN, ASST		TRUDIE MIDDLEBROOKS			785-4625
					767-6723

<b>WOODLAND DATA CENTER</b>		<b>4966 WOODLAND AVENUE</b>		<b>44104</b>	<b>MULTI-SITE</b>
<i>SCHOOL OFFICE:</i>	<b>432-4641</b>	<i>CUSTODIAN 'S OFFICE:</i>	<b>431-5850</b>	<i>SITE:</i>	<i>CMSD REGION:</i>
<u>POSITION</u>		<u>NAME</u>		<b>274</b>	<i>SUPERVISOR:</i> L BATTLE
CUSTODIAN		STEVEN DOGETT			<u>CELL</u>
CUSTODIAN, ASST		ALVIN CASSEL			785-4542
LABORER - STEP 1		AMELIA MAYFIELD			785-4618
<b>LEAD FACILITIES MANAGER</b>	<b>LARRY BATTLE</b>	<b>701-1374</b>	Cell Phone		
<b>FACILITIES MANAGER</b>	<b>JEROME PRATT</b>	<b>701-2593</b>	Cell Phone		
<b>FACILITIES MANAGER</b>	<b>JOSEPH JOYCE</b>	<b>780-7402</b>	Cell Phone		
<b>TRADES DIRECTOR</b>	<b>ROBERT KASLER</b>	<b>701-5744</b>	Cell Phone		