CONTRACTOR INFORM Name: Kronos Incorpo					TRACK	RACT
			Chalmaf			04004
Address: 297 Billerica R	080		Chelmsfo City	ord, MA State		01824 Zip
Contractor's Administrator N	Jame: Kim Surprenant		Ti	tle: Contrac	t Administ	rator
Tel#: 800-225-1561 or 978-94	7-4060 Fax: (978) 9	47-2801	Email: k	im surpr	enant@l	ronos cor
10in				and the second	change	
		TRACT INFO			0.5	
Contract Name: Telestaff	Software Support Se	ervices		Contra	ct Value: <u>\$5</u> ,	574.33
Brief Description: Renews	al of the Telestaff Soft	ware Suppor	rt Services	100		
Contract Dates : From:	to:	Status:	New X	Renew _	Amend#	WA/Task O
How Procured: Sole Sole	arce Single Source	ITB R	FP RFO	Coop.	Other	
If Processing an Amendme						
Contract #:	Increase Amount of //2018 to 08/31/2019				AND DESCRIPTION OF	
New Contract Dates: 09/01	/2018 to 08/31/2019	D TOTAL OR	AMENDME	ENT AMOUN ASING POL	ит: <u>\$5,574</u> ісу, sectio	4.33
New Contract Dates: 09/01	/2018_to_08/31/2019 ALS PURSUANT TO NA	D TOTAL OR	AMENDME	ENT AMOUN ASING POL	ит: <u>\$5,574</u> ісу, sectio	4.33 DN 6
New Contract Dates: 09/01	2018 to 08/31/2019 ALS PURSUANT TO NA	2 TOTAL OR SSAU COUNT 6-22-18	AMENDME TY PURCH	ASING POL	ICY, SECTION ICY, SECTION ICY ICY, SECTION ICY ICY ICY ICY ICY ICY ICY ICY ICY ICY	4.33 DN 6 nt
New Contract Dates: 09/01	ALS PURSUANT TO NA	Date	AMENDME TY PURCH	ASING POL	ICY, SECTION ICY, SECTION ICY ICY, SECTION ICY ICY ICY ICY ICY ICY ICY ICY ICY ICY	4.33 DN 6 nt
New Contract Dates: 09/01 APPROV 1. Department flead Si 2. Department flead Si 2. Contract Manageme 3. Office of Manageme 4.	ALS PURSUANT TO NA	$\frac{1}{2} \text{ TOTAL OR}$ $\frac{1}{2} \text{ TOTAL OUN}$ $\frac{1}{2} \text{ Date}$ $\frac{1}{2} \frac{1}{2} $	AMENDME TY PURCH	ASING POL	IT: <u>\$5,574</u> ICY, SECTION UC ICY, SECTION ICY, SECTION	4.33 DN 6 nt
New Contract Dates: 09/01 APPROV 1. Department Head Si 2. Department Head Si 2. Contract Manageme 3. Office of Manageme 4. County Attorney (app	ALS PURSUANT TO NA	$\frac{1}{2} \text{TOTAL OR}$	AMENDME TY PURCH	ASING POL	ICY, SECTION ICY, SECTION ICY ICY, SECTION ICY ICY ICY ICY ICY ICY ICY ICY ICY ICY	4.33 DN 6 nt
New Contract Dates: 09/01 APPROV 1. Department flead Si 2. Department flead Si Contract Management 4. Department flead Si Contract Management 5. Department flead Si 5. Depa	ALS PURSUANT TO NA	TOTAL OR ASSAU COUNT 6-12-18 Date 7/5/18 Date 7/18/18 9/6/14 Date	AMENDME TY PURCH	ENT AMOUN ASING POL Te Resci Submit 261526-5460 Funding	ICY, SECTION UCY,	4.33 DN 6 nt
New Contract Dates: 09/01 APPROV 1. Department Head Si 2. Department Head Si 2. Contract Manageme 3. Office of Manageme 4. County Attorney (app	ALS PURSUANT TO NA ignature ant where Badget oproved as to form only) COUNTY MANAG	TOTAL OR 5 TOTAL OUN 6 - L2 - 18 Date 7/5/18 Date 7/8/18 Date 7/8/18 Date 7/8/18 Date 7/8/18 Date 7/8/18	AMENDME TY PURCH	ENT AMOUN ASING POL Te Resci Submit 261526-5460 Funding	ICY, SECTION UCY,	4.33 DN 6 nt
New Contract Dates: 09/01 APPROV 1. Department flead Si 2. Department flead Si 2. Contract Manageme 3. Office of Manageme 4. County Attorney (approximate) COUNTY MGR	ALS PURSUANT TO NA	TOTAL OR 5 TOTAL OUN 6 - L2 - 18 Date 7/5/18 Date 7/8/18 Date 7/8/18 Date 7/8/18 Date 7/8/18 Date 7/8/18	AMENDME TY PURCH	ENT AMOUN ASING POL Te Resci Submit 261526-5460 Funding	ICY, SECTION UCY,	4.33 DN 6 nt
New Contract Dates: 09/01 APPROV 1. Department flead Si 2. Department flead Si 2. Contract Manageme 3. Office of Manageme 4. County Attorney (approximate) COUNTY MGR	ALS PURSUANT TO NA ignature ignature ignore	Date 7/5/18 Date 7/18/18 Date 7/18/18 Date 7/18/18 Date Date B/6/14 Date B/6/14 Date B/6/14 Date	AMENDME TY PURCH 01: GISTRIBU	ENT AMOUN ASING POL Submit 261526-5460 Funding	IT: \$5,574 ICY, SECTION UE ing Departme 20 (50%) & 04 3 Source/Acct	4.33 DN 6 nt

Nassau County Board of County Commissioners Sole Source/Single Source Certification Form

Vendor Name:	Kronos Incorporated	Department: Fire Rescue
Address:	297 Billerica Road	Department Head Signature:
	Chelmsford, MA 01824	Brady Rigdon
Phone:	800-225-1561	Date: 06/22/18
Contact Name:	Kim Surprenant	
	04223522-546020 &	
Account:	01261526-546020	Cost: \$5,574.33
D	E.	

Description of Commodity:

Telestaff annual service and support, webstaff usage, for one (1) year.

Check one (1) of the following two (2) choices:

Sole Source: The goods or services can be legally purchased from only one source.

Single Source: The goods or services can be purchased from multiple sources, but, in order to meet certain functional or performance requirements, there is only one economically feasible source for this purchase.

Please check all of the following that apply:

Purchase can only be obtained from original manufacturer-not available through J distributors.

Only authorized area distributor of the original manufacturer.

- Parts/Equipment are not interchangeable with similar parts of another manufacturer. 1
- This is the only known source that will meet the specialized needs of this department J or perform the intended function.
 - This source must be used to meet warranty or service maintenance requirements.
- This source is required for standardization.
- None of the above apply.

Comments/Explanations: (required)

Approval

County Manager

Date



Support Services Quote Page 1 of 2

Payment Currency Customer		Quote Type: Customer: Solution ID: Contract #: Date: Prepared by:	Renewal NASSAU COUNTY FIRE 6105867 1189053 R03-MAY-18 10-MAY-2018 Kim Surprenant / US Southeast6	
Bill To:	NASSAU COUNTY FIRE 96135 NASSAU PLACE SUITE 1 YULEE FL 32097-8625 UNITED STATES	961: YUL	SSAU COUNTY FIRE 35 NASSAU PLACE SUITE 1 EE FL 32097-8625 TED STATES	
Contact: Email:	JAMES CASTEEL JCASTEEL@NASSAUCOUNTYFL.COM			

CONTRACT SUMMARY

Contract Period: 01-SEP-2018 - 31-AUG-2019

Description	Support Services	Estimated Tax	Subtotal
Software Support Services	5,574.33	0.00	5,574.33
Total and	5,574.33	0.00	5,574.33

Annualized Contract Value: 5,574.33

The Annualized Contract Value is the value of the contract if all services are priced for 365 days. The Annualized Contract Value does not include estimated tex. Please note that this quote may include services priced for prorated periods.

IMPORTANT NOTES

Support Services are subject to applicable taxes. The tax amount shown on this quote is only an estimate. The actual tax due will be reflected on the invoice.

NASSAU COUNTY FIRE	KRONOS INCORPORATED
Signature:	Signature: Ki Jugnerant
Name: Michael Mullin	Name: Kim Surprenant
Title: Interim County Manager	Title: Core Renewal Specialist TIT
Date: 8/6/18	Date: 7/9/18



Support Services Quote Page 2 of 2

Payment Terms:	Net 30 Days
Currency:	USD
Customer PO Number:	

Bill To:	NASSAU COUNTY FIRE
	96135 NASSAU PLACE SUITE 1
	YULEE FL 32097-8625
	UNITED STATES

JCASTEEL@NASSAUCOUNTYFL.COM

JAMES CASTEEL

Contact: Email: Quote Type:RenewalCustomer:NASSAU COUNTY FIRESolution ID:6105867Contract #:1189053 R03-MAY-18Date:Frepared by:Kim Surprenant / US Southeast6

Ship To: NASSAU COUNTY FIRE 96135 NASSAU PLACE SUITE 1 YULEE FL 32097-8625 UNITED STATES

SOFTWARE SUPPORT SERVICES

Line	Support Service Level	Covered Product	License Count	Start Date	End Date	Duration (days)
1	Platinum	TELESTAFF ENTERPRISE V2	110	01-SEP-2018	31-AUG-2019	365
2	Web Access	TELESTAFF WEB ACCESS V2 - TSG HOSTED	110	01-SEP-2018	31-AUG-2019	365

	Support Services	Estimated Tax	Subtotal
Software Support Services	5,574.33	0.00	5,574.33



Kronos Incorporated 900 Chelmsford Street Lowell, MA 01851

10-MAY-2018 JAMES CASTEEL NASSAU COUNTY FIRE Solution ID: 6105867

Subject: Kronos Support Services Quote for NASSAU COUNTY FIRE Contract #: 1189053 R03-MAY-18

Dear JAMES,

The support services and benefits provided under your existing maintenance services terms are due to expire. In order to continue to receive support services and benefits for your Kronos products, you will need to renew the maintenance support for another year. Please review the attached quote so that we can ensure that the upcoming invoice we send to your Accounts Payable organization accurately reflects your Kronos investment. (Please be aware that per the terms of your agreement Kronos will send an invoice 60 days prior to the start of your contract.) If the attached quote matches your records, please sign the quote and return a copy to me within 10 business days.

If your organization requires a Purchase Order for payment, please forward me a copy at this time so I can make sure it is referenced on the invoice.

When the invoice is paid, your organization is acknowledging that they are renewing the maintenance support services for another year under the existing terms and conditions with Kronos. If the invoice is not paid, your support services for the products will be cancelled and Kronos will require you to sign a new support services contract, with applicable charges, in order to reactivate your service.

I encourage you to visit the Kronos Customer Portal at http://customer.kronos.com for access to SuperSearch, eCase management, Customer Forums, Product Documentation, Training tips and so much more! Experience the array of services Kronos offers.

Please contact me at the email address or telephone number provided below if you have any questions regarding your renewal.

Thank you for your business.

Regards,

Kim Surprenant Contract Administrator

tel: 978-947-4060 fax: (978)-596-0007 email: <u>kim.surprenant@kronos.com</u>