

<b>RFP RESULTS</b>	
<b>CC2023-14 FURNISH, DELIVER, INSTALL AND MAINTAIN ONE (1) NEW JAIL MANAGEMENT SOFTWARE SYSTEM FOR THE MERCER COUNTY CORRECTION CENTER</b>	
<b>RFP OPENING DATE: JUNE 6,2023</b>	
<b>PROPOSALS WILL BE REVIEWED BY A EVALUATION COMMITTEE AND REVIEWED BASE ON COST AND OTHER FACTORS</b>	
<b>NUMBER OF RESPONDENTS</b>	<b>1</b>
NAME OF RESPONDENT	GLOBAL TEL*LINK CORPORATION
ADDRESS	3120 FAIRVIEW PARK DRIVE, SUITE 300
CITY, STATE, ZIP	FALLS CHURCH, VA 22042-4570
CONTACT	JONATHAN WALKER
TELEPHONE	855-631-8857
FAX	703-435-0980
E-MAIL	<a href="mailto:RFP@VIAPATH.COM">RFP@VIAPATH.COM</a>
NJ SAVI DESIGNATION	N/A
ADDENDUMS ONE THROUGH THREE	INCLUDED
INSURANCE AND INDEMNIFICATION REQUIREMENTS	SIGNED AND DATED
RUSSIA BELARUS/IRAN CERTIFICATION	SIGNED AND DATED
NEW JERSEY BUSINESS REGISTRATION	OK
STATEMENT OF OWNERSHIP	SIGNED AND DATED
EEO FORM	INCLUDED
EMPLOYEE INFORMATION CERTIFICATE	27873 EXPIRES 2.15.2025
REFERENCES	INCLUDED, EVALUATION TEAM TO REVIEW
QUALFICATION STATEMENT	INCLUDED
COST PROPOSAL	INCLUDED, EVALUATION TEAM TO REVIEW
EXTEND BEYOND 60 DAYS	YES
CONTINUITY OF SERVICES	YES

**CC2023-14 COST PROPOSAL FOR JAIL MANAGEMENT SYSTEM**

<b>SECTION ONE: CONSULTANT SERVICES</b>	<b>NUMBER OF CONTRACTOR HOURS REQUIRED</b>	<b>HOURLY RATE</b>	<b>TOTAL</b>
RFP OPENING DATE: JUNE 6, 2023	904	\$ 170.00	\$ 153,680.00
System Interface and Data Conversion	392	\$ 150.00	\$ 58,800.00
Training (Including Travel)	256	\$ 170.00	\$ 43,520.00
Other consultant services cost (please describe): PROJECT MANAGEMENT/CUSTOM REPORT DEVELOPMENT	234	\$ 190.00	\$ 44,460.00
<b>SECTION ONE SUBTOTAL</b>			<b>\$ 300,460.00</b>

**SOFTWARE, MAINTENANCE AND SUPPORT AND LICENSING**

<b>SECTION TWO: SOFTWARE</b>	<b>Product No.*</b>	<b>Quantity</b>	<b>Cost per Module</b>	<b>Total for each Module</b>
Primary JMS software			\$ -	\$ -
Other components			\$ -	\$ -
Other licenses			\$ -	\$ -
Other software costs (please describe)			\$ -	\$ -
<b>SECTION TWO SUBTOTAL</b>				<b>\$ -</b>

<b>SECTION THREE: SOFTWARE MAINTENANCE AND SUPPORT</b>	<b>First Year</b>	<b>Second Year</b>	<b>Third Year</b>	<b>Fourth Year</b>	<b>Fifth Year</b>
Software Maintenance	\$ -	\$ 33,580.00	\$ 34,587.00	\$ 35,625.00	\$ 36,694.00
Software Assurance	\$ -	\$ -	\$ -	\$ -	\$ -
Other Software Maintenance and Support (please describe)	\$ -	\$ -	\$ -	\$ -	\$ -
<b>SECTION THREE SUBTOTAL FOR EACH YEAR</b>	<b>\$ -</b>	<b>\$ 33,580.00</b>	<b>\$ 34,587.00</b>	<b>\$ 35,625.00</b>	<b>\$ 36,694.00</b>

<b>SECTION FOUR: LICENSING FOR ALL USERS</b>	<b>First year</b>	<b>Second Year</b>	<b>Third Year</b>	<b>Fourth Year</b>	<b>Fifth Year</b>
<b>SECTION FOUR SUBTOTAL FOR EACH YEAR</b>	<b>\$ 177,900.00</b>				\$ -

**HARDWARE, HARDWARE MAINTENANCE AND SUPPORT**

<b>SECTION FIVE: HARDWARE</b>	<b>Make and Model</b>	<b>Quantity</b>	<b>Cost Per Unit</b>	<b>Total</b>
Databases	COUNTY TO PROVIDE		\$ -	\$ -
Servers	COUNTY TO PROVIDE		\$ -	\$ -
Power Supplies / Redundant Power Supplies	COUNTY TO PROVIDE		\$ -	\$ -
Scanners	DRIVERS LICENSE SCANNER- ESSEK M260 W/6' USB SMART	2	\$ 934.00	\$ 1,868.00
Printers	CITIZEN CT-S651 RECEIPT PRINTER	1	\$ 310.80	\$ 310.80
Barcode Readers	METROLOGIC MS9520 VOYAGER SCANNER W/CABLES & STAND	5	\$ 215.00	\$ 1,075.00
Other Hardware costs (please describe)	SIGNATURE PADS-SIGLITE 1X5 (T-S460 OR T-S461)	5	\$ 131.00	\$ 655.00
<b>Sub-Total</b>				<b>\$ 3,908.80</b>

<b>SECTION SIX: HARDWARE MAINTENANCE AND SUPPORT</b>	<b>First year</b>	<b>Second Year</b>	<b>Third Year</b>	<b>Fourth Year</b>	<b>Fifth Year</b>
Hardware Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -
Hardware Assurance	\$ -	\$ -	\$ -	\$ -	\$ -
Other Hardware Maintenance and Support (please describe)	\$ -	\$ -	\$ -	\$ -	\$ -
<b>Sub-Total</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

<b>TOTAL PROJECT COSTS</b>	<b>\$</b>
<b>SECTION ONE CONSULTANT COSTS</b>	<b>\$ 300,460.00</b>
<b>SECTION TWO SOFTWARE COSTS</b>	<b>\$ -</b>
<b>SECTION THREE SOFTWARE MAINTENANCE AND SUPPORT</b>	
YEAR ONE	\$ -
YEAR TWO	\$ 33,580.00
YEAR THREE	\$ 34,587.00
YEAR FOUR	\$ 35,625.00
YEAR FIVE	\$ 36,694.00
<b>SECTION FOUR LICENSING</b>	
YEAR ONE	\$ 177,900.00
YEAR TWO	\$ -
YEAR THREE	\$ -
YEAR FOUR	\$ -
YEAR FIVE	\$ -
<b>SECTION FIVE HARDWARE</b>	<b>\$ 3,908.80</b>
<b>SECTION SIX HARDWARE MAINTENANCE AND ASSURANCE</b>	
YEAR ONE	\$ -
YEAR TWO	\$ -
YEAR THREE	\$ -
YEAR FOUR	\$ -
YEAR FIVE	\$ -
<b>GRAND TOTAL*</b>	<b>\$ 622,754.80</b>

INCLUDED IN WARRANTY

CONTRACTS FOR YEARS FOUR AND FIVE MAINTENANCE AND SUPPORT AND LICENSING SHALL BE GENERATED PRIOR TO YEAR FOUR AND PRIOR TO YEAR FIVE AS PROPRIETARY MAINTENANCE AND SUPPORT

**BID RESULTS****AB2023-21 VISION DISCOUNT PLAN FOR THE COUNTY OF MERCER AND EMPLOYEES AND THEIR DEPENDENTS****RFP OPENING DATE: JUNE 6,2023**

<b>NUMBER OF BIDDERS</b>	<b>1</b>
NAME OF BIDDER	EYEMED VISION CARE LLC
ADDRESS	4000 LUXOTTICA PLACE
CITY, STATE, ZIP	MASON, OHIO 45040
CONTACT	HECTOR RINCON
TELEPHONE	513-765-6000
FAX	513-492-6000
E-MAIL	<a href="mailto:SWODYAR@EYEMEDCOM">SWODYAR@EYEMEDCOM</a>
TECHNICAL RESPONSE REQUIRED AND REFERENCES	RISK MANAGER TO REVIEW
STATEMENT OF OWNERSHIP	SIGNED AND DATED
NEW JERSEY BUSINESS REGISTRATION	OK
EIC	REQUIRED IF AWARDED
INSURANCE AND INDEMNIFICATION REQUIREMENTS	SIGNED AND DATED
EXHIBIT A	INCLUDED
HOLD BEYOND 60 DAYS	YES
RUSSIA/IRAN CERTIFICATION	SIGNED AND DATED
CONTINUITY OF SERVICE DURING EMERGENCIES FOR CO-OP	NO
<b>ANNUAL COST YEAR ONE</b>	\$ 50,820.96
<b>ANNUAL COST YEAR TWO</b>	\$ 50,820.96
<b>ANNUAL COST YEAR THREE ( OPTION YEAR)</b>	\$ 50,820.96
<b>GRAND TOTAL FOR THREE YEARS</b>	\$ 152,462.88
EXCEPTIONS	YES, TO BE REVIEWED
FATAL FLAW	NO

**RFP RESULTS**

**CC2023-13 PAYROLL PROCESSING AND ADMINISTRATION SERVICES FOR THE COUNTY OF MERCER**

**RFP OPENING DATE: JUNE 6,2023**

<b>PROPOSALS WILL BE REVIEWED BY A EVALUATION COMMITTEE AND REVIEWED BASE ON COST AND OTHER FACTORS</b>				
<b>NUMBER OF RESPONDENTS</b>	<b>4</b>			
NAME OF RESPONDENT	EDMUNDS GOVTECH	PAYCOM PAYROLL	PRIMEPOINT LLC	UNICORN HRO
ADDRESS	301 TILTON ROAD	7501 W. MEMORIAL RD	2 SPRINGSIDE ROAD	25B HANOVER ROAD
CITY, STATE, ZIP	NORTHFIELD, NJ 08225	OKLAHOMA CITY, OK 73142	WESTAMPTON, NJ 08060	FLORHAM PARK, NJ 07932
CONTACT	BOB EDMUNDS	SHAWN CLOWERS	ALEXANDER BOTHWELL	DAVID POTTER
TELEPHONE	609-645-7333	434-203-6692	609-298-7373	609-303-0466
FAX	609-645-3111	N/A	609-298-6742	973-360-6999
E-MAIL	<a href="mailto:BJEDMUNDS@EDMUNDSGOVTECH.COM">BJEDMUNDS@EDMUNDSGOVTECH.COM</a>	<a href="mailto:SHAWN.CLOWERS@PAYCOMONLINE.COM">SHAWN.CLOWERS@PAYCOMONLINE.COM</a>	<a href="mailto:ABOTHWELL@PRIMEPOINT.COM">ABOTHWELL@PRIMEPOINT.COM</a>	<a href="mailto:DPOTTER@UNICORNHRO.COM">DPOTTER@UNICORNHRO.COM</a>
NJ SAVI DESIGNATION	N/A	N/A	N/A	N/A
ADDENDUM NO.ONE	INCLUDED	INCLUDED	INCLUDED	INCLUDED
INSURANCE AND INDEMNIFICATION REQUIREMENTS	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED
IRAN/RUSSIA CERTIFICATION	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED
NEW JERSEY BUSINESS REGISTRATION	OK	OK	OK	OK
STATEMENT OF OWNERSHIP	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED
EXHIBIT A	INCLUDED	INCLUDED	REQUIRED IF AWARDED	REQUIRED IF AWARDED
EMPLOYEE INFORMATION CERTIFICATE	5995 EXPIRES 11.15.25	REQUIRED IF AWARDED	49923 EXPIRES 12.15.2025	REQUIRED IF AWARDED
REFERENCES	INCLUDED, EVALUATION TEAM TO REVIEW	INCLUDED, EVALUATION TEAM TO REVIEW	INCLUDED, EVALUATION TEAM TO REVIEW	INCLUDED, EVALUATION TEAM TO REVIEW
QUALFICATION STATEMENT/PERSONNEL	INCLUDED, EVALUATION TEAM TO REVIEW	INCLUDED, EVALUATION TEAM TO REVIEW	INCLUDED, EVALUATION TEAM TO REVIEW	INCLUDED, EVALUATION TEAM TO REVIEW
COST PROPOSAL	INCLUDED, EVALUATION TEAM TO REVIEW	INCLUDED, EVALUATION TEAM TO REVIEW	INCLUDED, EVALUATION TEAM TO REVIEW	INCLUDED, EVALUATION TEAM TO REVIEW
EXCEPTIONS	YES , EVALUATION TEAM TO REVIEW	NO	NO	NO
EXTEND BEYOND 60 DAYS	YES	YES	YES	YES
CONTINUITY OF SERVICES	YES	YES	YES	YES



BID RESULTS									
AB2023-17 NURSING SERVICES FOR THE MERCER COUNTY CORRECTION CENTER FOR A PERIOD OF TWO YEARS									
RFP OPENING DATE: JUNE 6, 2023									
NUMBER OF BIDDERS	20								
NAME OF BIDDER	COMPU-VISION CONSULTING, INC	CEDAR PARK GROUP INC	ATC HEALTHCARE SERVICES LLC	ELOHIM REHAB CARE ASSOCIATES	GREENSTAFF MEDICAL STAFFING LLC	ADELPHI MEDICAL STAFFING	PRIORITY GROUPS	GREGORY MEDICAL STAFFING	
ADDRESS	2050 ROUTE 27 SUITE 202	2 LAWSON AVE, SUITE 11	1983 MARCUS AVE SUITE E122	485 C US HIGHWAY 1S, SUITE 330	6900 DALLAS PARKWAY SUITE 300	965 GENEVA WALK NW	4989 STELTON RD.	212 E 8TH STREET	
CITY, STATE, ZIP	NORTH BRUNSWICK, NJ 08902	EAST ROCKAWAY, NY 11518-1700	LAKE SUCCESS, NY 11042	ISELIN, NJ, 08830	PLANO TX 75024	KENNESAW, GA, 30152	SOUTH PLAINFIELD, NJ, 07080	WESTON, WEST VIRGINIA, 26452	
CONTACT	LINDA LOPES	SAMANTHA TERLINE	CHERYL STEIN	DINA BRUTUS	ANMOL KAPOOR	DAYNE TROUPE	EZEKIEL SEGU OLANITI	NATHAN H. AREY	
TELEPHONE	732-422-1500	516-559-7002 EXT. 1103	516-750-1618	732-231-5920	469-551-9661	678-365-1101	347-985-3863	304-657-2570	
FAX	732-422-4667	718-228-7002	516-750-1783	732-231-5011	N/A	678-257-2992	212-898-0458	N/A	
E-MAIL	<a href="mailto:LLOPES@COMPUVIS.COM">LLOPES@COMPUVIS.COM</a>	<a href="mailto:SAMANTHA@CEDARPARKGROUP.CO">SAMANTHA@CEDARPARKGROUP.CO</a>	<a href="mailto:CSTEIN@ATCHEALTHCARE.COM">CSTEIN@ATCHEALTHCARE.COM</a>	<a href="mailto:DBRUTUS@ELOHIMREHAB.COM/INFORM@ELOHIMREHAB.COM">DBRUTUS@ELOHIMREHAB.COM/INFORM@ELOHIMREHAB.COM</a>	<a href="mailto:ANMO.KAPOOR@GREENSTAFFMEDICAL.COM">ANMO.KAPOOR@GREENSTAFFMEDICAL.COM</a>	<a href="mailto:GOVT-TEAM@ADELPHIMEDICALSTAFFING.COM">GOVT-TEAM@ADELPHIMEDICALSTAFFING.COM</a>	<a href="mailto:PRIORITYCAREHOME@GMAIL.COM">PRIORITYCAREHOME@GMAIL.COM</a>	<a href="mailto:NATHANAREY@GREGORYMEDICALSTAFFING.ORG">NATHANAREY@GREGORYMEDICALSTAFFING.ORG</a>	
NJ SAVI DESIGNATION	MINORITY, WOMEN AND SMALL BUSINESS ENTERPRISE	N/A	N/A	N/A	N/A	N/A	SMALL BUSINESS ENTERPRISE	N/A	
ADDENDUM NO ONE	INCLUDED	INCLUDED	INCLUDED	INCLUDED	INCLUDED	INCLUDED	INCLUDED	NOT INCLUDED	
ADDENDUM NO TWO	INCLUDED	INCLUDED	INCLUDED	INCLUDED	INCLUDED	INCLUDED	INCLUDED	NOT INCLUDED	
NJ LICENSE	INCLUDED	NOT INCLUDED	NOT INCLUDED	INCLUDED	NOT INCLUDED	INCLUDED	NOT INCLUDED	NOT INCLUDED	
INSURANCE AND INDEMNIFICATION	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	NOT INCLUDED	
NEW JERSEY BUSINESS REGISTRATION	OK	REQUIRED IF AWARDED	OK	OK	OK	OK	OK	REQUIRED IF AWARDED	
STATEMENT OF OWNERSHIP	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	NOT INCLUDED	
HOLD PRICING BEYOND 60 DAYS	YES	YES	YES	YES	YES	YES	YES	NOT INCLUDED	
CONTINUITY OF OPERATIONS	YES	YES	YES	YES	YES	YES	YES	NOT INCLUDED	
REFERENCES	TO BE REVIEWED BY THE AGENCY	TO BE REVIEWED BY THE AGENCY	TO BE REVIEWED BY THE AGENCY	NOT INCLUDED	TO BE REVIEWED BY AGENCY	TO BE REVIEWED BY AGENCY	TO BE REVIEWED BY AGENCY	NOT INCLUDED	
EXHIBIT A	REQUIRED IF AWARDED	INCLUDED	INCLUDED	INCLUDED	INCLUDED	INCLUDED	INCLUDED	NOT INCLUDED	
EIC	63957 EXPIRES 12.15.2023	REQUIRED IF AWARDED	INCLUDED	REQUIRED IF AWARDED	REQUIRED IF AWARDED	INCLUDED	NOT INCLUDED	NOT INCLUDED	
EXECUTIVE ORDER 98-1	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	NOT INCLUDED	
RUSSIA/IRAN CERTIFICATION	SIGNED AND DATED	REQUIRED IF AWARDED	REQUIRED IF AWARDED	REQUIRED IF AWARDED	REQUIRED IF AWARDED	SIGNED AND DATED	REQUIRED IF AWARDED	NOT INCLUDED	
RN CORRECTION CENTER AND PUBLIC HEALTH IF REQUIRED RATE PER HR	\$ 82.00	\$ 82.50	\$ 82.50	\$ 90.00	\$ 95.00	\$ 100.00	\$ 100.00	\$ 226.56	
TOTAL FOR 14,000 HOURS ANNUALLY YEAR ONE	\$ 1,148,000.00	\$ 1,155,000.00	\$ 1,155,000.00	\$ 1,260,000.00	\$ 1,330,000.00	\$ 1,400,000.00	\$ 1,470,000.00	\$ 3,171,840.00	
LPN CORRECTION CENTER IF REQUIRED RATE PER HR	\$ 58.00	\$ 60.00	\$ 60.00	\$ 70.00	\$ 75.00	\$ 85.00	\$ 85.00	\$ 150.44	
TOTAL FOR 6,400 HOURS ANNUALLY YEAR ONE	\$ 371,200.00	\$ 384,000.00	\$ 384,000.00	\$ 448,000.00	\$ 480,000.00	\$ 544,000.00	\$ 544,000.00	\$ 962,816.00	
TOTAL COST YEAR ONE	\$ 1,519,200.00	\$ 1,539,000.00	\$ 1,539,000.00	\$ 1,708,000.00	\$ 1,810,000.00	\$ 1,944,000.00	\$ 1,944,000.00	\$ 4,134,656.00	
RN CORRECTION CENTER AND PUBLIC HEALTH IF REQUIRED RATE PER HR	\$ 83.00	\$ 84.00	\$ 87.00	\$ 95.00	\$ 105.00	\$ 105.00	\$ 105.00	\$ 253.75	
TOTAL FOR 14,000 HOURS ANNUALLY YEAR TWO	\$ 1,162,000.00	\$ 1,176,000.00	\$ 1,218,000.00	\$ 1,330,000.00	\$ 1,470,000.00	\$ 1,470,000.00	\$ 1,470,000.00	\$ 3,552,500.00	
LPN CORRECTION CENTER IF REQUIRED RATE PER HR	\$ 59.00	\$ 63.00	\$ 65.00	\$ 75.00	\$ 85.00	\$ 89.25	\$ 89.25	\$ 179.44	
TOTAL FOR 6400 HOURS ANNUALLY YEAR TWO	\$ 377,600.00	\$ 403,200.00	\$ 416,000.00	\$ 480,000.00	\$ 544,000.00	\$ 571,200.00	\$ 571,200.00	\$ 1,148,416.00	
TOTAL COST YEAR TWO	\$ 1,539,600.00	\$ 1,579,200.00	\$ 1,634,000.00	\$ 1,810,000.00	\$ 2,014,000.00	\$ 2,041,200.00	\$ 2,041,200.00	\$ 4,700,916.00	
<b>GRAND TOTAL COST YEAR ONE &amp; TWO (BASIS OF AWARD)</b>	<b>\$ 3,058,800.00</b>	<b>\$ 3,118,200.00</b>	<b>\$ 3,173,000.00</b>	<b>\$ 3,518,000.00</b>	<b>\$ 3,824,000.00</b>	<b>\$ 3,985,200.00</b>	<b>\$ 3,985,200.00</b>	<b>\$ 8,835,572.00</b>	
EXCEPTIONS	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	
FATAL FLAW							ADDENDUM NO. 1 & 2 NOT INCLUDED RESULTING IN REJECTION	DID NOT PROVIDE ANY OF THE REQUIRED BID DOCUMENTS AND PROVIDED RATES BASE ON 13 WEEKS	