



**TO:** Felicia McRae, Purchasing Agent  
Purchasing Division  
**FROM:** Frank Capello, Director *FC*  
Broward County Aviation Department – Security Division  
**SUBJECT:** Solicitation No.: L2114437B1  
Credentialing Media, Identification (ID) Badging Printers and Supplies

Recommended Vendor: Bender Associates, Inc.  
Recommended Group(s)/Line Item(s): Items (4)  
Initial Award Amount: \$214,800                      Potential Total Amount: \$644,400  
Initial Contract Term: One Year                      Contract Term, including Renewals: Three Years

**CONCURRENCE:**  
The agency has reviewed Vendor's response(s) for specification compliance and Vendor responsibility. I  
 have reviewed all documents including the Vendor Questionnaire and after careful evaluation, I concur with recommendation for award to the Vendor.

**FINANCIAL BACKGROUND/D & B REPORT: (check one)**  
 I am satisfied with the Vendor's financial background and/or rating and payment performance.  
 Not applicable Provide explanation if choosing this option

**LITIGATION HISTORY: (check one)**  
 I have reviewed the Litigation History Form and there is no issue of concern.  
 Refer to additional information from the Office of the County Attorney to address an issue/concern.

**PAST PERFORMANCE: (check all that apply)**  
I have reviewed the Vendor's past Performance Evaluations in Contracts Central and:  
 Vendor received an overall rating  $\geq 2.59$  on all evaluations.  
 No evaluations within the past three years contained any items rated a score of 2 or less.  
 Vendor received a rating  $\leq 2.59$  on an evaluation(s). Refer to additional information.  
 Vendor received a score of  $\leq 2$  on an individual item(s). Refer to additional information.  
 Past evaluations are not relevant to the scope of this contract.  
 No past Performance Evaluations exist in Contracts Central.

**AND**

Reference Verification Forms are attached.

**OR**

Reference Verification Forms are not required: Commodity only purchase (less than \$250,000); Service less than \$50,000 and the Vendor has a Performance Evaluation within the past three years.

**NON-CONCURRENCE:**  
 I do not concur. Detailed reason for non-concurrence is attached.

TYPED NAME OF SIGNER: Debbie Cherisma                      TITLE: Contracts/Grants Administrator, Senior  
(Individual authorized to administer the contract.)

SIGNATURE: *Debbie Cherisma*                      DATE: February 6, 2018



**Vendor Reference Verification Form**

Broward County Solicitation No. and Title: L2114437B1 - Credentialing Media, Identification (ID) Badging Printers and Supplies

Reference for: (Name of Firm) Bender Associates, Inc.

Organization/Firm Name providing reference: Tucson International Airport Authority

Contact Name/Title: Maria Zamora, Senior Access Control Specialist

Contact E-mail: mzamora@flytucson.com

Contact Phone: 520-573-8156

Name of Referenced Project: Access Cards - Supply Access/Proximity Cards

Contract No. n/a

Contract Amount: \$10,000/yr

Date Services Provided: 2016-2018

(list date range or date services began until "current")

Vendor's role in Project:  Prime Vendor  Sub-consultant/Sub-contractor  
 Would you use this vendor again?  Yes  No If No, please specify in Additional Comments (below).

**Description of services provided by Vendor:**  
**Vendor provides access control cards and badge inventory.**

Please rate your experience with the referenced Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Additional Comments: (provide on additional sheet if needed)**  
**Vendor is very professional (Point of Contact is Phil); very helpful. Great to work with.**

References Checked By  
 Name: Debbie Cherisma Title: Contracts/Grants Administrator, Sr.  
 Division/Department: Aviation Department - Security Division Date of Verification: January 26, 2018



**Vendor Reference Verification Form**

Broward County Solicitation No. and Title: L2114437B1 - Credentialing Media, Identification (ID) Badging Printers and Supplies

Reference for: (Name of Firm) Bender Associates, Inc.  
 Organization/Firm Name providing reference: City of Mesa  
 Contact Name/Title: Allen Wick  
 Contact E-mail: allen.wick@mesaaz.gov  
 Contact Phone: 480-644-2665  
 Name of Referenced Project: ID Badging Sales & Support - Supply Access/Proximity Cards  
 Contract No. n/a  
 Contract Amount: \$5,000/yr  
 Date Services Provided: 2015-2018

(list date range or date services began until "current")

Vendor's role in Project:  Prime Vendor  Sub-consultant/Sub-contractor  
 Would you use this vendor again?  Yes  No If No, please specify in Additional Comments (below).

**Description of services provided by Vendor:**  
**Access Cards - Proximity Cards**

Please rate your experience with the referenced Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Additional Comments: (provide on additional sheet if needed)**

References Checked By  
 Name: Debbie Cherisma Title: Contracts/Grants Administrator, Sr.  
 Division/Department: Aviation Department - Security Division Date of Verification: February 02, 2018



**Vendor Reference Verification Form**

Broward County Solicitation No. and Title: L2114437B1 - Credentialing Media, Identification (ID) Badging Printers and Supplies

Reference for: (Name of Firm) Bender Associates, Inc.

Organization/Firm Name providing reference: Sky Harbor International

Contact Name/Title: Mike Young

Contact E-mail: mike.youngs@phoenix.gov

Contact Phone: 602-683-3709

Name of Referenced Project: ID Badging System

Contract No. n/a

Contract Amount: \$15,000/yr

Date Services Provided: 2016-2018

(list date range or date services began until "current")

Vendor's role in Project:  Prime Vendor  Sub-consultant/Sub-contractor  
 Would you use this vendor again?  Yes  No If No, please specify in Additional Comments (below).

**Description of services provided by Vendor:**  
**Credentialing supplies and support services.**

Please rate your experience with the referenced Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Additional Comments: (provide on additional sheet if needed)**  
**Great working relationship with Clay and Bender team.**

References Checked By  
 Name: Debbie Cherisma Title: Contracts/Grants Administrator, Sr  
 Division/Department: Aviation Department - Security Division Date of Verification: February 01, 2018