PAYROLL COMPARISON – 2021

Proposer Name: Kyle Jones

Evaluator Printed Name: Robert A. Fragale

PAYROLL from Operational Form 4.3 Staffing and Personnel Calculation						
	Location Number(s)					
	Loc. 1	Loc. 2	Loc. 3	Loc. 4	Loc. 5	Loc. 6
	50-A	50-A	76-A	76-F	77-E	
Highest Rate	$12	$12	$12	$12	$12	
Lowest Rate	$9.50	$9.50	$9.50	$9.50	$9.50	
Number of Hours Recommended	107	107	214	268	228	
Number of Hours Proposed	180	180	280	300	280	
Total Monthly Wages	$6,460	$6,460	$10,420	$11,180	$10,420	

Comments:

PERSONAL EVALUATION (2021)

Kyle Jones
50-A / 21019
Mahoning County, Youngstown
3623 Market St.

Evaluation Team Number: 1

Location(s) Proposed: (#1) 50-A 50-A 76-A 76-F 77-E

Proposed as 2nd Location

Verify Proposer's Full Name: (#2) Kyle Jones

Proposer's County of Residence (NPC Operation): (#4) Trumbull

Verify Proposer's Driver's License Number: (#6) [redacted]

Proposing as Minority: (#9) Yes ____ No X

Proposing as: (#10) Individual X Clerk of Courts ____ Co. Auditor ____ Nonprofit Corp. ____

SCORING SUMMARY

FORM 3.0, PERSONAL CHECKLIST	(Max. 16 Points):	16
PERSONAL EVALUATION, Page 2	(Max. 55 Points):	55
BUSINESS AND EMPLOYMENT EXPERIENCE, Page 3	(Max. 100 Points):	100
PERSONAL EVALUATION, Page 5	(Max. 28 Points):	28
PERSONAL EVALUATION, Page 6	(Max. 17 Points):	17
PERSONAL EVALUATION, Page 7	(Max. 27 Points):	27
PERSONAL EVALUATION, Page 8	(Max. 15 Points):	15

TOTAL POINTS **(Max. 258 Points):** 258

Comments:

	Evaluators' Signatures	Evaluators' Printed Names	Date
(1)	Robert A. Fragale	Robert A. Fragale	3/4/21
(2)			

PERSONAL EVALUATION	OK	NO
1. Proposer does not and will not hold a PROHIBITED elective public office other than County Clerk of Courts or County Auditor? (#11 & 12)	5	*
2. Proposer does not hold an overlapping deputy registrar contract? (#13) If contract overlaps, what is the expiration date of the contract? _____	0	0
3. Proposer is not a prohibited relative of a current deputy registrar? (#14, 15 & 16)	5	*
4. Proposer is not a prohibited relative of an ODPS employee, or (if a relative) proposer has either been a deputy registrar continuously since January 1, 1992, or the ODPS employee became employed after the proposer was first appointed deputy registrar? (#17)	5	*
5. Proposer is not a State of Ohio employee or will resign? (#19)	5	*
6. Proposer is not an active insurance agent or is nonprofit? (#20)	5	*
7. Proposer states no criminal conviction within the last 10 years? (#21)	5	*
8. Proposer owes no local, state, or federal delinquent taxes, social security payments, workers' compensation premiums or mandatory contributions? (#22)	5	*
9. Proposer agrees to maintain acceptable business liability insurance in accordance with Ohio Revised Code section 4503.03(C)? (#23)	5	*
10. Proposer can meet bond requirements? (#24 and acceptable proof)	5	*
11. Acceptable educational information OR nonprofit corporation? (#25)	5	0
12. Proposer has computer training or experience? (#26)	5	0

PERSONAL EVALUATION POINTS, Page 2 (Max. 55 Points) 55

NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.

Comments: _____

BUSINESS AND EMPLOYMENT EXPERIENCE VERIFICATION

Person called: Marcia Hatcher at telephone (704) 998-9565

Company: S.A.A.S

Relationship: Head Administrator

Verified experience as: Deputy Registrar Agency Owner (50) _____ Other Business Owner (34) _____

Manager or Supervisor (25) X Deputy Registrar Employee (23) _____ Other Employee (20) _____

Hours per week: 50

From (date): 12/15 To (date): current Length: 6 yrs

Verified Hours 40+ **= Factor** 1 **x Years** 6. **x Points** 25 **=** 150

Person called: _____ at telephone ( ) _____

Company: _____

Relationship: _____

Verified experience as: Deputy Registrar Agency Owner (50) _____ Other Business Owner (34) _____

Manager or Supervisor (25) _____ Deputy Registrar Employee (23) _____ Other Employee (20) _____

Hours per week: _____

From (date): _____ To (date): _____ Length: _____

Verified Hours _____ **= Factor** _____ **x Years** ____.____ **x Points** _____ **=** _____

Person called: _____ at telephone ( ) _____

Company: _____

Relationship: _____

Verified experience as: Deputy Registrar Agency Owner (50) _____ Other Business Owner (34) _____

Manager or Supervisor (25) _____ Deputy Registrar Employee (23) _____ Other Employee (20) _____

Hours per week: _____

From (date): _____ To (date): _____ Length: _____

Verified Hours _____ **= Factor** _____ **x Years** ____.____ **x Points** _____ **=** _____

BUSINESS AND EMPLOYMENT EXPERIENCE CALCULATION

13. DEPUTY REGISTRAR AGENCY OWNER Experience, Form 3.2

ITEM	AGENCY/COMPANY	HOURS	=	FACTOR	x	YEARS	x	POINTS	=	SCORE	VERIFIED
A.		# NA	=	1.0	x		x	50	=		
B.		# NA	=	1.0	x		x	50	=		
C.		# NA	=	1.0	x		x	50	=		
									Subtotal of 13-A, 13-B & 13-C =		

14. OTHER BUSINESS OWNERSHIP Experience, Form 3.2

ITEM	AGENCY/COMPANY	HOURS	=	FACTOR	x	YEARS	x	POINTS	=	SCORE	VERIFIED
A.		#	=		x		x	34	=		
B.		#	=		x		x	34	=		
C.		#	=		x		x	34	=		
									Subtotal of 14-A, 14-B & 14-C =		

15. SUPERVISORY / MANAGEMENT (ANY BUSINESS – INCLUDING DR) Experience, Form 3.2

ITEM	AGENCY/COMPANY	HOURS	=	FACTOR	x	YEARS	x	POINTS	=	SCORE	VERIFIED
A.	S.A.A.S	# 50	=	1	x	6	x	25	=	150	
B.		#	=		x		x	25	=		
C.		#	=		x		x	25	=		
									Subtotal of 15-A, 15-B & 15-C =	150	

Total DR, Ownership and/or Management #13-15 (Max. 100 Points) = 100

16. DEPUTY REGISTRAR EMPLOYMENT (NON-MANAGEMENT) Experience, Form 3.2

ITEM	AGENCY	HOURS	=	FACTOR	x	YEARS	x	POINTS	=	SCORE	VERIFIED
A.		#	=		x		x	23	=		
B.		#	=		x		x	23	=		
C.		#	=		x		x	23	=		
D.		#	=		x		x	23	=		
									Subtotal of 16-A, 16-B, 16-C & 16-D =		

Total DR Employment Experience #16 (Max. 90 Points) =

17. OTHER EMPLOYMENT Experience, Form 3.2

ITEM	AGENCY/COMPANY	HOURS	=	FACTOR	x	YEARS	x	POINTS	=	SCORE	VERIFIED
A.		#	=		x		x	20	=		
B.		#	=		x		x	20	=		
C.		#	=		x		x	20	=		
D.		#	=		x		x	20	=		
									Subtotal of Lines 17-A, 17-B, 17-C & 17-D =		

Total Other Employment Experience #17 (Max. 80 Points) =

ENTER LARGEST OF TOTALS [13-15 (100 pts.), 16 (90 pts.), or 17 (80 pts.)] = 100

PERSONAL EVALUATION	OK	NO
18. Form 3.3 – Customer Service Experience		
Did proposer provide acceptable list of ideas to improve customer service at a deputy registrar agency or provide an example of something done as part of a job or business to improve services for customers?	2	0
19. Form 3.4 – Start-Up Cost Funds On Deposit (not required for Auditors or Clerks of Courts)		
A. Are funds in acceptable financial institution and verified with bank/teller stamp?	5	*
B. Are funds in proposer's or proposer's business name or joint with spouse?	5	*
20. Form 3.5 – Political Contributions Report (not required for Auditors or Clerks of Courts)		
Did proposer mark "NO" for every category, every year? (For Nonprofit Corporations, evaluate both Corporation's and CEO's Form 3.5)	5	*
21. Form 3.6 – Personnel Policy Summary		
Does proposer agree to provide/maintain a written personnel policy covering the following:		
A. Hiring employees with deputy registrar agency experience?	1	0
B. Equal Employment Opportunity?	1	0
C. Employee training by the deputy registrar?	1	0
D. Participation in BMV provided training?	1	0
E. Evaluation of employee performance?	1	0
F. Grounds for discipline or dismissal/termination (list)?	1	0
G. Progressive disciplinary steps?	1	0
H. Dress code with list of acceptable attire?	1	0
I. Dress code with list of unacceptable attire?	1	0
J. A policy for maintaining the professional appearance of all staff at all times?	1	0
K. Fringe benefits (beyond those required by law or contract)?	1	0

PERSONAL EVALUATION POINTS, Page 5 (Max. 28 Points) 28

NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.

Comments: _____

PERSONAL EVALUATION	OK	NO
22. Form 3.7 – Security Plan Summary - Did proposer agree to provide:		
A. An electronic alarm system? (Mandatory)	1	*
B. Alarm system monitored 24 hours, off-site? (Mandatory)	1	*
C. Alarm system reports off-site if wires cut or tampered with? (Mandatory)	1	*
D. Adequate alarm monitored panic/hold-up buttons? (Mandatory)	1	*
E. Motion detectors connected to alarm system? (Mandatory)	1	*
F. Alarm monitored contacts on all exterior doors? (Mandatory)	1	*
G. Alarm monitored contacts on all exterior windows? (Mandatory)	1	*
H. Video recording camera surveillance system? (Mandatory)	1	*
I. Safe or secured locking cabinet? (Mandatory)	1	*
J. Secured storage room with alarm monitored contacts on door(s) and window(s), if applicable? (Mandatory)	1	*
K. Cross cut shredder to be made available to destroy customer copy records? (Mandatory)	1	*
L. All doors and all windows will be securely locked when license agency is closed? (Mandatory)	1	*
M. Smoke, fire, and carbon monoxide detection devices (Mandatory)?	1	*
N. Interior/Exterior motion activated security lights? (Suggested) – Check OK or NO	OK	NO
23. Form 3.8 – Facility Maintenance Plan Summary - Did proposer agree to provide:		
A. Indoor/Outdoor maintenance and cleaning?	1	0
B. Prompt snow and ice removal?	1	0
C. Carpet and/or floor cleaning (if appropriate)?	1	0
D. Repainting?	1	0

PERSONAL EVALUATION POINTS, Page 6 (Max. 17 Points) 17

NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.

Comments: _____

PERSONAL EVALUATION	OK	NO
24. Form 3.9 – Involved and Invested in Your Business		
1. How do you plan to manage, be responsible, and be accountable for this business at all times?	1	0
2. How will you ensure that all laws, rules, guidelines and procedures are followed, at all times, specifically with regard to issuing and renewing driver licenses, identification cards, and vehicle registrations?	1	0
3. What measures will you put in place to detect, deter, and prevent fraud?	1	0
4. The Ohio Bureau of Motor Vehicles routinely issues new and/or revised policy and procedural changes through email broadcasts to the deputy registrars. How will you ensure that policies and procedures are communicated to the staff and followed on a daily basis?	1	0
5. How will you demonstrate good leadership to your employees?	1	0
6. How will you maintain a high level of professionalism each day in this business?	1	0
7. How do you intend to recruit and retain high quality employees?	1	0
8. How will you provide a safe, clean, and friendly place to do business?	1	0
9. How would you deal with an irate customer?	1	0
10. What training or advice do you, or will you, give to your employees for dealing with irate customers?	1	0
11. How will you meet the expectations of the Ohio Bureau of Motor Vehicles?	1	0
12. Why should the Ohio Bureau of Motor Vehicles consider you for a deputy registrar license agency contract?	1	0
25. Form 3.10(A) (B) or (C) – Affidavit of Individual, Auditor/Clerk of Courts or Nonprofit Corporation		
A. Did proposer submit proper affidavit **without alteration** and does it **appear to be complete, accurate, and truthful**?	3	*
B. Is it the affidavit duly signed and notarized?	2	*
26. Local Law Enforcement Report / Articles of Incorporation (AOI)		
A. No disqualifying convictions for individual / AOI for nonprofit corporation?	3	*
B. No convictions (except minor traffic) / AOI for nonprofit corporation?	2	0
27. BCI / FBI Criminal Background (WebCheck) Report / AOI for Nonprofit Corporation		
No disqualifying convictions for individual / AOI for nonprofit corporation?	5	*

PERSONAL EVALUATION POINTS, Page 7 (Max. 27 Points) 27

PERSONAL EVALUATION	OK	NO
28. Credit Report (issued in 2021) / Certificate of Good Standing for Nonprofit Corporation Credit Reports are not required for County Auditors and County Clerks of Courts		
A. Credit report submitted contains credit score?	2	0
B. No tax liens (state or federal)?	3	0
C. No judgments for the past 36 months?*	3	0
D. *No bankruptcy filed or trusteeship imposed for the past 36 months?	2	0
E. *No other negative items (charge-offs, collections, etc.) for the past 36 months?	2	0
F. *No negative items (pattern of delinquencies, etc.) for the past 60 months?	1	0
* Exclude minor medical judgments and disputed items with good cause explanation.		
29. The overall quality of this proposal is deemed to be of satisfactory or higher overall quality? (Note any deficiencies in comments area below or on page 1)	2	0

PERSONAL EVALUATION POINTS, Page 8 (Max. 15 Points) 15

NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.

Comments:

3.0 PERSONAL CHECKLIST

Proposer's Full Legal Name Kyle Jones

Proposer Number (*BMV use only*) 21019, 21020, 21021, 21022, 21023

INSTRUCTIONS: You must submit one original and one copy of this form and all documents listed on this form as appropriate based on your status as a proposer (individual, county auditor, clerk of courts or nonprofit corporation). Even if you are submitting more than one proposal, only one original and one copy of these forms are required. Please place these forms in a separate envelope marked "Personal Documents."

INDIVIDUAL	✓	BMV	COUNTY AUDITOR OR CLERK OF COURTS	✓	BMV	NONPROFIT CORPORATION	✓	BMV
Form 3.0 Personal Checklist (this form)	✔	1	Form 3.0 Personal Checklist (this form)			Form 3.0 Personal Checklist (this form)		
Form 3.1 Personal Questionnaire	✔	1	Form 3.1 Personal Questionnaire			Form 3.1 Personal Questionnaire		
Form 3.2 Business and Employment Experience	✔	1	Forms 3.2 Business and Employment Experience			Forms 3.2 Business and Employment Experience		
Form 3.3 Customer Service Experience	✔	1	Form 3.3 Customer Service Experience			Form 3.3 Customer Service Experience		
Form 3.4 Start-Up Cost Funds on Deposit	✔	1	N/A	X	1	Form 3.4 Start-Up Cost Funds on Deposit		
Form 3.5 Political Contributions Report	✔	1	N/A	X	1	Form 3.5 Political Contributions Report Nonprofit Corporation		
N/A	X	1	N/A	X	1	Form 3.5 Political Contributions Report Chief Executive Officer		
Form 3.6 Comprehensive Personnel Policy Agreement	✔	1	Form 3.6 Comprehensive Personnel Policy Agreement			Form 3.6 Comprehensive Personnel Policy Agreement		
Form 3.7 Security Plan Agreement	✔	1	Form 3.7 Security Plan Agreement			Form 3.7 Security Plan Agreement		
Form 3.8 Facility Maintenance Plan Agreement	✔	1	Form 3.8 Facility Maintenance Plan Agreement			Form 3.8 Facility Maintenance Plan Agreement		
Form 3.9 Involved and Invested in Your Business	✔	1	Form 3.9 Involved and Invested in Your Business			Form 3.9 Involved and Invested in Your Business		
Form 3.10(A) Affidavit of Individual	✔	1	Form 3.10(B) Affidavit of Auditor or Clerk of Courts			Form 3.10(C) Affidavit of Nonprofit Corporation		
2021 Credit Report	✔	1	N/A	X	1	2021 Certificate of Good Standing		
2021 Local Law Enforcement Report	✔	1	2021 Local Law Enforcement Report			Articles of Incorporation		
2021 WebCheck Receipt	✔	1	2021 WebCheck Receipt			N/A	X	1
Pre-approval Statement for $25,000 Bond	✔	1	Current Bond with BMV added as Additional Insured			Pre-approval Statement for $25,000 Bond		
INDIVIDUAL	16		COUNTY AUDITOR OR CLERK OF COURTS			NONPROFIT CORPORATION		

3.1 PERSONAL QUESTIONNAIRE

1. List all location numbers for which the applicant intends to submit a proposal (limit six locations). Check the box underneath if proposing the location as a second site in addition to a current agency:

   50-A 76-A 76-F 77-E _____ _____

   _____ _____ _____ _____ _____ _____

2. Full legal name of proposer Kyle Jones

3. Proposer's street address [redacted]

   City [redacted] State Ohio Zip code [redacted]

4. County of residence (nonprofit corporation county of operation) Trumbull

5. Daytime telephone [redacted] Home telephone ([redacted]

6. Proposer's driver's license number (nonprofit corporation N/A) [redacted]

7. Spouse's name (nonprofit corporation N/A) N/A

8. Spouse's home street address (nonprofit corporation N/A) N/A

   City N/A State N/A Zip code N/A

9. Are you proposing as the owner of a minority business enterprise (MBE)? No ✔ Yes _____

10. Proposer is (check one and follow instructions):

    ✔ An **individual person**. These forms are designed to be self-explanatory for Proposers proposing as individual persons. Answer all questions as they apply to you personally. If a question does not apply to you, enter "N/A" or "Not applicable;

    ____ The **Clerk of Courts** of _____ County;

    ____ The **County Auditor** of _____ County. Answer all questions as they apply to you and your position as Clerk of Courts or County Auditor. If a question does not apply to you or your position, enter "N/A" or "Not applicable;

    ____ A **nonprofit corporation (NPC)**. An officer or an authorized agent should answer all questions and sign all documents on behalf of the NPC. The answers must refer to the NPC itself and not to the individual officers, agents, or employees of the NPC, unless otherwise specified. Many questions are not applicable to nonprofit corporations. To assist your responses, we have marked those questions "NPC N/A" meaning we believe the marked question is not applicable to most nonprofit corporations. Please answer all other questions unless clearly inapplicable.

11. A. Are you currently serving in elective public office, other than Clerk of Courts or County Auditor, either by election or appointment (includes precinct committee person)? (NPC N/A)

Yes _____ No ✔

B. If YES, in what elective office are you serving? N/A

C. If YES, date that you plan to leave this office? N/A

12. A. Are you currently running for any elective public office. (including precinct committee person)? (NPC N/A) Yes _____ No ✔

B. If YES, what office? N/A

13. A. Are you currently a deputy registrar? Yes _____ No ✔

B. If YES, on what date does your contract expire? N/A

C. If YES, have you served as a deputy registrar continuously since January 1, 1992? No _____ Yes _____

14. A. Is your spouse currently a deputy registrar? (NPC N/A) Yes _____ No ✔

B. If YES, on what date does your spouse's contract expire? N/A

For the following three questions, **extended family** includes your spouse, parent, brother, sister, son, daughter, father-in-law, mother-in-law, brother-in-law, sister-in-law, son-in-law, or daughter-in-law:

15. A. Does any member of your extended family currently hold a deputy registrar contract? (NPC N/A)

Yes _____ No ✔

B. If YES, list their name, relationship to you, whether you share the same household, and date their contract expires here:

Name	Relationship	Same Household		Contract Expires
N/A	N/A	Yes	No	N/A
		Yes	No	
		Yes	No	
		Yes	No	

16. A. To the best of your knowledge, will any member of your extended family submit a proposal in response to this RFP? (NPC N/A)

Yes _____ No ✔

B. If YES, list their name, relationship to you, and whether you share the same household:

Name	Relationship	Same Household
N/A	N/A	Yes ____ No ____
		Yes ____ No ____
		Yes ____ No ____
		Yes ____ No ____

17. A. Is any member of your extended family employed by any subdivision of the Ohio Department of Public Safety? (NPC N/A)

Yes _____ No ✔

B. If YES, list their name, relationship to you, and the date they became so employed:

Name	Relationship	Employment Date
N/A	N/A	N/A

18. A. Have you completed the Political Contributions Report, Form 3.5? (NPC must submit one for NPC itself and one for its C.E.O.) No _____ Yes ✔

B. If "NO," are you applying as a Clerk of Courts or County Auditor? No _____ Yes _____

19. A. Are you an employee of the State of Ohio? (NPC N/A) Yes _____ No ✔

B. If "YES," will you resign, if appointed? No _____ Yes _____

20. Are you an insurance company agent, writing automobile insurance? (NPC N/A) Yes _____ No ✔

21. Has Proposer (including NPC and proposed office manager) been convicted within the past ten years of a crime punishable by death or imprisonment in excess of one year (felony), or any crime involving dishonesty or false statement?

Yes _____ No ✔

22. As of the date of this certification does Proposer owe any overdue taxes, unemployment compensation contributions, social security payments, or workers' compensation premiums either to the State of Ohio or any political subdivision thereof, or to the federal government, or any other state or locality within the United States?

Yes _____ No ✔

23. Is Proposer willing and able, if appointed, to maintain during the entire term of your contract a policy of business liability property damage, and theft insurance satisfactory to the Registrar and hold the Department of Public Safety, the Director of Public Safety, the Bureau of Motor Vehicles, and the Registrar of Motor Vehicles harmless upon claims for damages in accordance with Ohio Revised Code 4503.03(C)? (County Auditor/Clerk of Courts N/A)

No _____ Yes ✔

24. Is Proposer bondable as outlined in Ohio Administrative Code 4501:1-6-01(B)?

No _____ Yes ✔

25. Please provide the following information regarding your education. If applying as a NPC, please provide educational information for the individual who will manage the license agency business.

High school diploma? No _____ Yes ✔

High school name Cardinal Mooney High School

City Youngstown State Ohio Zip 44507

College name Kent State University

City Kent State Ohio Zip 44240

Major Public Relations Degree awarded B.A.

College name Walsh University

City N. Canton State Ohio Zip 44720

Major Administration Degree awarded M.A.

26. Computer experience. Does Proposer have any training or experience working with or using computers? (Incumbent deputy registrars may take credit for operating BMV computers. For nonprofit corporations, this question should be answered for computer systems operated or used in the nonprofit corporation's activities.)

No _____ Yes ✔

If "YES" please explain all computer experience in detail.

(1) BMV Deputy Registrar experience (VR's, DL's, REFEE's, BASS Operation, Manager Functions within BASS)

(2) College level computer courses

(3) Taxes preperation each year (personal and business)

(4) Quickbooks (business)

(5) Budgeting for business finances (Excel spreasheets)

(6) Gmail, Microsoft Outlook/Exchange

27. Please provide the requested information for three persons we can contact by telephone during daytime business hours and who will serve as a character reference for you. Do not list relatives, political contacts, or employees of the Department of Public Safety (including BMV). If we are unable to contact at least one person or that person is unable to serve as a character reference, you may be evaluated unfavorably. Nonprofit corporations should list references who are familiar with the nonprofit corporation's activities.

A. Name Marcia Hatcher Daytime telephone number ([redacted])

City [redacted] State Ohio Zip [redacted]

List any special instructions for contacting this person during business hours:

B. Name Emily Devey Daytime telephone number ([redacted])

City [redacted] State Ohio Zip [redacted]

List any special instructions for contacting this person during business hours:

C. Name Theresa Lesko Daytime telephone number ([redacted])

City [redacted] State Ohio Zip [redacted]

List any special instructions for contacting this person during business hours:

28. Employment, management, supervisory, and business experience. Each Proposer's experience is one of the most important factors to be considered in the award of deputy registrar contracts. For the purposes of this RFP, experience gained prior to the year 1990 will not be evaluated or considered. Please provide a professional resume, in chronological order (no earlier than 1990), the positions you have held. If the position you held in 1990 was one you started before 1990, you may list that position and the date you actually started on your submitted resume. If you did not hold any position in 1990, please begin with the first position you held after 1990. If applying as a NPC, please provide a description of the fundraising, program, and charitable functions of the nonprofit corporation.

3.2(B) MANAGEMENT AND/OR SUPERVISORY EXPERIENCE

Instructions. Please fill out one of these forms 3.2(B) for each separate management or supervisory job you have held. Do not use this form 3.2(B) for business ownership or regular employee positions. Use a separate form 3.2(B) for each management or supervisory position that you have held. ***Please make additional copies of this form as necessary.***

Proposer's name Kyle Jones Company name S.A.A.S

Company address 653 E. 109th St. City Cleveland

State Ohio Zip 44108 Telephone (216) 200-7869

Type of business (deputy registrar, retail grocery, etc.) Private Instituition

Management/supervisory duties Handle all aspects of business management/operations. This staffing, payroll, budgeting, scheduling, and completion of reports.

MANAGER OR SUPERVISOR - Job title: Head Administrator

1. Title of position Administrator Hours worked weekly? 50
2. Dates this position was held: From: month 12 year 2015 To: month Curr year Curr
3. Do/did you directly hire, evaluate, train, and discipline employees? No _____ Yes ✔
4. Do/did you directly manage/supervise employees on a daily basis? No _____ Yes ✔

   If you answered yes to question number 4, how many employees do/did you manage? 45
5. Have you ever developed a comprehensive business plan? No _____ Yes ✔

List at least one person, not a relative of yours, who can verify this experience. If we cannot contact at least one person to verify this experience, you will not receive any credit for it. (If you are a deputy registrar or deputy registrar employee, you may list BMV employees to verify that experience.)

Name	City	State	Zip	Daytime Phone
Marcia Hatcher	[redacted]	Ohio	44106	[redacted]
Theresa Lesko	[redacted]	Ohio	44509	[redacted]
				( )

3.2(B) MANAGEMENT AND/OR SUPERVISORY EXPERIENCE

Instructions. Please fill out one of these forms 3.2(B) for each separate management or supervisory job you have held. Do not use this form 3.2(B) for business ownership or regular employee positions. Use a separate form 3.2(B) for each management or supervisory position that you have held. ***Please make additional copies of this form as necessary.***

Proposer's name Kyle Jones Company name Eastwood Mall Lic. Bur.

Company address 5555 Youngstown-Warren Rd. City Niles

State Ohio Zip 44446 Telephone (330) 652-2760

Type of business (deputy registrar, retail grocery, etc.) Deputy Registrar

Management/supervisory duties Assign Tills, Print Reports, Sign Off and Verify All BMV Forms, Balance Tills, Deposits, Verify Agency Paperwork, etc.

MANAGER OR SUPERVISOR - Job title: Supervisor

1. Title of position Supervisor Hours worked weekly? 40
2. Dates this position was held: From: month 6 year 2011 To: month 7 year 2012
3. Do/did you directly hire, evaluate, train, and discipline employees? No ____ Yes ✔
4. Do/did you directly manage/supervise employees on a daily basis? No ____ Yes ✔

   If you answered yes to question number 4, how many employees do/did you manage? 5
5. Have you ever developed a comprehensive business plan? No ✔ Yes ____

List at least one person, not a relative of yours, who can verify this experience. If we cannot contact at least one person to verify this experience, you will not receive any credit for it. (If you are a deputy registrar or deputy registrar employee, you may list BMV employees to verify that experience.)

Name	City	State	Zip	Daytime Phone
Theresa Lesko	[redacted]	Ohio	44509	[redacted]
Jeanetta Lesko	[redacted]	Ohio	44509	[redacted]
				( )

3.2(B) MANAGEMENT AND/OR SUPERVISORY EXPERIENCE

Instructions. Please fill out one of these forms 3.2(B) for each separate management or supervisory job you have held. Do not use this form 3.2(B) for business ownership or regular employee positions. Use a separate form 3.2(B) for each management or supervisory position that you have held. ***Please make additional copies of this form as necessary.***

Proposer's name Kyle Jones Company name Eastwood Mall Lic. Bur.

Company address 5555 Youngstown-Warren Rd. City Niles

State Ohio Zip 44446 Telephone (330) 652-2760

Type of business (deputy registrar, retail grocery, etc.) Deputy Registrar

Management/supervisory duties Assign Tills, Print Reports, Sign Off and Verify All BMV Forms, Balance Tills, Deposits, Verify Agency Paperwork, etc.

MANAGER OR SUPERVISOR - Job title: Supervisor

1. Title of position Supervisor Hours worked weekly? 40
2. Dates this position was held: From: month 4 year 2014 To: month 11 year 2015
3. Do/did you directly hire, evaluate, train, and discipline employees? No ____ Yes ✔
4. Do/did you directly manage/supervise employees on a daily basis? No ____ Yes ✔

   If you answered yes to question number 4, how many employees do/did you manage? 5
5. Have you ever developed a comprehensive business plan? No ✔ Yes ____

List at least one person, not a relative of yours, who can verify this experience. If we cannot contact at least one person to verify this experience, you will not receive any credit for it. (If you are a deputy registrar or deputy registrar employee, you may list BMV employees to verify that experience.)

Name	City	State	Zip	Daytime Phone
Theresa Lesko	[redacted]	Ohio	44509	[redacted]
Jeanetta Lesko	[redacted]	Ohio	44509	[redacted]
				( )

3.2(C) EMPLOYEE EXPERIENCE

Instructions. Please fill out one of these forms 3.2(C) for each and every separate job you have held as an employee. Do not use this form 3.2(C) for business ownership or jobs in which you had management or supervisory duties. Use a separate form 3.2(C) for each non-management and/or non-supervisory job held. ***Please make additional copies of this form as necessary.***

Proposer's name Kyle Jones Company name Eastwood Mall Lic. Bur.

Company address 5555 Youngstown-Warren Rd. City Niles

State Ohio Zip 44446 Telephone (330) 652-2760

Type of business (deputy registrar, retail grocery, etc.) Deputy Registrar

EMPLOYEE - Job title: Clerk

Hours worked weekly 40 Job duties Assisted customers with all aspects of the agency and transactions. This includes licenses, VR's, CDL Test Receipts, Reinstatement Fees/Forms, Title Work, Notary Public, etc.

Dates of this employment: From: month 3 year 2011 To: month 6 year 2011

Describe how and to what extent **you provided high quality customer service** at this position:

As greeted customers as they entered the agency. A simple hello goes a long way with customers. Answered all questions and helped customers in any way that I could. Made sure I wished them a good day. Kindness matters always!

List at least one person, not a relative of yours, who can verify this experience. If we cannot contact at least one person to verify this experience, you will not receive any credit for it. (If you are a deputy registrar or deputy registrar employee, you may list BMV employees to verify that experience.)

Name	City	State	Zip	Daytime Phone
Theresa Lesko	[redacted]	Ohio	44509	[redacted]
Jeanetta Lesko	[redacted]	Ohio	44509	[redacted]
				( )

3.2(C) EMPLOYEE EXPERIENCE

Instructions. Please fill out one of these forms 3.2(C) for each and every separate job you have held as an employee. Do not use this form 3.2(C) for business ownership or jobs in which you had management or supervisory duties. Use a separate form 3.2(C) for each non-management and/or non-supervisory job held. ***Please make additional copies of this form as necessary***.

Proposer's name Kyle Jones Company name Westside Merchants

Company address 2950 Mahoning Ave. City Youngstown

State Ohio Zip 44509 Telephone (330) 799-9747

Type of business (deputy registrar, retail grocery, etc.) Deputy Registrar

EMPLOYEE - Job title: Clerk

Hours worked weekly 40 Job duties Assisted customers with all aspects of the agency and transactions. This includes licenses, VR's, CDL Test Receipts, Reinstatement Fees/Forms, Title Work, Notary Public, etc.

Dates of this employment: From: month 7 year 2012 To: month 8 year 2013

Describe how and to what extent **you provided high quality customer service** at this position:

As greeted customers as they entered the agency. A simple hello goes a long way with customers. Answered all questions and helped customers in any way that I could. Made sure I wished them a good day. Kindness matters always!

List at least one person, not a relative of yours, who can verify this experience. If we cannot contact at least one person to verify this experience, you will not receive any credit for it. (If you are a deputy registrar or deputy registrar employee, you may list BMV employees to verify that experience.)

Name	City	State	Zip	Daytime Phone
Theresa Lesko	[redacted]	Ohio	44509	[redacted]
Jeanetta Lesko	[redacted]	Ohio	44509	[redacted]
Debbie Vargo	[redacted]	Ohio	44224	[redacted]

3.2(C) EMPLOYEE EXPERIENCE

Instructions. Please fill out one of these forms 3.2(C) for each and every separate job you have held as an employee. Do not use this form 3.2(C) for business ownership or jobs in which you had management or supervisory duties. Use a separate form 3.2(C) for each non-management and/or non-supervisory job held. ***Please make additional copies of this form as necessary.***

Proposer's name Kyle Jones Company name Boardman Lic. Bur.

Company address 223 Boardman-Canfield Rd. City Boardman

State Ohio Zip 44512 Telephone (330) 758-1988

Type of business (deputy registrar, retail grocery, etc.) Deputy Registrar

EMPLOYEE - Job title: Clerk

Hours worked weekly 40 Job duties Assisted customers with all aspects of the agency and transactions. This includes licenses, VR's, CDL Test Receipts, Reinstatement Fees/Forms, Title Work, Notary Public, etc.

Dates of this employment: From: month 8 year 2013 To: month 4 year 2014

Describe how and to what extent **you provided high quality customer service** at this position:

As greeted customers as they entered the agency. A simple hello goes a long way with customers. Answered all questions and helped customers in any way that I could. Made sure I wished them a good day. Kindness matters always!

List at least one person, not a relative of yours, who can verify this experience. If we cannot contact at least one person to verify this experience, you will not receive any credit for it. (If you are a deputy registrar or deputy registrar employee, you may list BMV employees to verify that experience.)

Name	City	State	Zip	Daytime Phone
Theresa Lesko	[redacted]	Ohio	44509	[redacted]
Jeanetta Lesko	[redacted]	Ohio	44509	[redacted]
				( )

3.3 CUSTOMER SERVICE EXPERIENCE

Instructions. Please give us a list of ideas you have to improve customer service at your deputy registrar agency. You will only receive full credit if you demonstrate sufficient customer service awareness.

A. This is a list of ideas I have to improve customer service at my deputy registrar agency if I am awarded a contract (Please be specific) and/or this is an example of something I have done as part of my job or business to improve services for my customers (Please be specific):

I would implement a "Welcome Center" and have an agency staff member greet all customers. This proposed position would help sign customers in on the queue and verify the customer has the correct documents to complete the requested transaction. This would help create a welcoming atmosphere and alleviate customer frustration with the BMV. This would really put the customer first and foremost.

As a Deputy Registrar I would implement the following:

(1) Early Hours for Senior Citizens: This would include opening the lobby to high-risk and elderly customers (65 years and older) a half hour early. The agency would be open from 8-5, and by opening at 7:30 for these valuable customers would help ensure they are safe, in and out, and not have to wait in line.

(2) I would offer extra services to help customers complete more of their transactions in one-stop. These extra services include: title work, dog tags, webchecks, etc. This would create a customer focused agency that would allow the customer to do everything they needed to do under one roof.

An example of something I have do to improve services for my customers:

As a leader, I believe it is my job to make things as easy as possible for people. I have worked in the business world for many years and I have turned around failing businesses. One example would be expanding our current clientele base from 139 people to 260 people. By creating a sense of unity, showing that you are willing to work hard, and meet the challenges of the day, all things are possible to achieve. I know I can do the same for the BMV.

I have a proven track record of working hard and getting things done. I will do the same for the Ohio BMV if awarded a contract. I am excited about this opportunity and this round of the RFP.

3.4 START-UP COST FUNDS ON DEPOSIT
(Not required for County Auditors or Clerks of Court)

Proposer's Name: Kyle Jones

I certify that the following funds are now on deposit in a bank, savings and loan or credit union. (Brokerage accounts, mutual funds, stocks, lines of credit, credit cards, etc. are not acceptable.) The deposit amount must be equal to or exceed the amount listed as your total start-up costs on Form 4.4.

Account Owner's Name: Kyle Jones

(Account must be owned by the Proposer in the Proposer's individual or business name. No other person's name, except the Proposer's spouse, if any, may appear on the account.)

Bank Name: TCF National Bank

Bank Address: 4682 Belmont Ave Bank City: Youngstown

Bank State: Ohio Bank Zip: 44505 Bank Phone: (330) 314-1411

Account Number [redacted] Total Funds on Deposit: $ 55,255.35

(The total funds on deposit amount must be equal to or exceed the amount listed as your total start-up costs on Form 4.4.)

Paid $ 0.00
TCF National Bank
Liberty #2811
Youngstown, OH
291070001
Date 1/19/2021
Teller Initials JP

Bank or Teller's Official Stamp:

Teller's Signature: Date: 1/19/2021

(Not valid without official stamp of financial institution and signature of teller.)

3.5 POLITICAL CONTRIBUTIONS REPORT

Instructions

Instructions You must report on the following page whether you and your immediate family together gave more than $100.00 to any political party or to certain individual candidates during any one of the last three calendar years and so far this year.

"Immediate family" means you, a spouse residing with you, and any dependent children. You must add together all contributions you, your spouse, and your dependent children made to each separate party or each separate candidate during each calendar year.

"Political party" means each separate political party and includes any political action committee (PAC) and any "continuing association" which are connected to that political party. "Political party" includes all levels of that party, federal, state, county, and local.

"Candidate" includes both the candidate and any of that candidate's campaign committees. You must report only for candidates for the following offices: Ohio governor, attorney general, secretary of state, treasurer of state, auditor of state, state senator or state representative. You are not required to report any contributions to federal, county, local, or judicial candidates.

"More than $100.00" means any amount exceeding $100.00, starting with $100.01. A contribution of exactly $100.00 or less is acceptable. Contributions include the value of any "in-kind" contributions.

County Auditors and Clerks of Court are exempt from this requirement and need not file this Report of Political Contributions.

Nonprofit Corporations must submit one report for the nonprofit corporation itself and one report for the chief executive officer (C.E.O.) who has, or will have, primary responsibility for the nonprofit corporation's operation of the deputy registrar agency. There is only one copy of this report in this package. Nonprofit corporations must make a second copy and submit one copy for the nonprofit corporation itself and one for the C.E.O. who will be responsible for the operation of the deputy registrar agency.

Name: Kyle Jones

Title (if officer of nonprofit corporation): N/A

(A nonprofit corporation must submit two separate reports: one for the nonprofit corporation itself, and one for its chief executive officer)

Did you and your immediate family together give more than $100.00 to any of the following during any one of the years listed? You must place a check mark "✓" in the appropriate box, "yes" or "no" for each category and year separately.

RECIPIENT	JAN 1 - DEC 31 2018		JAN 1 - DEC 31 2019		JAN 1 - DEC 31 2020		2021 To Date	
	Yes	No	Yes	No	Yes	No	Yes	No
Democratic Party including PACs and Associations		✓		✓		✓		✓
Republican Party including PACs and Associations		✓		✓		✓		✓
Any other Party including PACs and Associations		✓		✓		✓		✓
Governor, Candidate and Committee		✓		✓		✓		✓
Attorney General, Candidate and Committee		✓		✓		✓		✓
Secretary of State, Candidate and Committee		✓		✓		✓		✓
Treasurer of State, Candidate and Committee		✓		✓		✓		✓
Auditor of State, Candidate and Committee		✓		✓		✓		✓
State Senator, Candidate and Committee		✓		✓		✓		✓
State Representative, Candidate and Committee		✓		✓		✓		✓

3.6 PERSONNEL POLICY

A comprehensive personnel policy must be readily available and presented upon request. Items needing covered within the agency's comprehensive personnel policy are listed below.

Do you agree to provide a comprehensive personnel policy, if requested, that covers the listed items?

No_____ Yes✔_____

COMPREHENSIVE PERSONNEL POLICY MUST INCLUDE PROVISIONS FOR:

HIRING EMPLOYEES WITH DEPUTY REGISTRAR AGENCY EXPERIENCE
EQUAL EMPLOYMENT OPPORTUNITY
EMPLOYEE TRAINING BY THE DEPUTY REGISTRAR
PARTICIPATION IN BMV PROVIDED TRAINING
DOCUMENTED PERIODIC EMPLOYEE PERFORMANCE EVALUATIONS (ANNUAL AT A MINIMUM)
LIST OF GROUNDS FOR DISCIPLINE OR DISMISSAL
PROGRESSIVE DISCIPLINARY ACTION
DRESS CODE WITH LISTS OF ACCEPTABLE AND UNACCEPTABLE ATTIRE
POLICY FOR MAINTAINING PROFESSIONAL APPEARANCE
FRINGE BENEFITS

3.7 SECURITY PLAN SUMMARY

If you are awarded a contract, you will be required to adopt a security plan to assure that agency employees, patrons, other citizens, equipment, and consigned inventory will be protected from harm (your plan should detail how you intend to address the items listed below).

If you are awarded a contract, do you agree to provide all of the following? Yes ✔ No_____

ELECTRONIC ALARM SYSTEM
ALARM SYSTEM MONITORED 24 HOURS, OFF-SITE
ALARM SYSTEM REPORTS OFF-SITE IF WIRES ARE CUT OR TAMPERED
ADEQUATE ALARM MONITORED PANIC/HOLD BUTTONS
MOTION DETECTORS CONNECTED TO ALARM SYSTEM
ALARM MONITORED DOOR CONTACT ON ALL EXTERIOR DOORS
ALARM MONITORED CONTACTS ON ALL EXTERIOR WINDOWS
VIDEO RECORDING CAMERA SURVEILLANCE SYSTEM
A SAFE OR SECURE LOCKING CABINET
A SECURED STORAGE ROOM WITH ALARM MONITORED CONTACTS ON DOOR(S) AND WINDOW(S)
A CROSS CUT SHREDDER
SECURELY LOCK ALL DOORS AND WINDOWS WHEN OUTSIDE BUSINESS HOURS
SMOKE, FIRED, AND CARBON MONOXIDE DETECTION DEVICES
INTERIOR/EXTERIOR MOTION ACTIVATED SECURITY LIGHTS

Note: For Deputy Provided Sites, the deputy registrar shall install and maintain an approved alarm system. At BMV Controlled Sites, either the BMV or the deputy registrar will install an approved alarm system, which will be maintained by the deputy registrar.

3.8 FACILITY MAINTENANCE PLAN SUMMARY

If you are awarded a contract you will be required to adopt a facility maintenance plan, including provisions for maintaining the deputy registrar agency premises. Your plan should detail how you intend to address the items listed below.

If you are awarded a contract, do you agree to be responsible for the following either on your own, through your lease or sublease, or by separate contract:

No _____ **Yes** ✔

OUTDOOR BUILDING MAINTENANCE
KEEP OUTDOOR AREA FREE OF TRASH AND DEBRIS
PROVISION TO ASSURE PROMP SNOW AND ICE REMOVAL
CLEANING INSIDE OF AGENCY INCLUDING EQUIPMENT
PROVISION FOR INSIDE/OUTSIDE MAINTENANCE
PROVISION FOR PROFESSIONAL CARPET/FLOOR CLEANING (MIN. OF ONCE A YEAR)
PROVISION FOR REPAINTING AND/OR COSMETIC UPDATES

3.9 INVOLVED AND INVESTED IN YOUR BUSINESS

Instructions: Answer all of the following questions to the best of your ability. Please be concise and attempt to limit each answer to seventy-five (75) words or less. Include attachment(s) if more space is needed to answer any of the questions.

1. How do you plan to manage, be responsible, and be accountable for this business at all times?

   As the Deputy Registrar, I plan to be on-site at the agency daily to oversee the daily operations of my business. I will be a dedicated and involved Deputy Registrar, who works the customer counter, and understands the ins and out of this business from top to bottom. I will ensure I have an experienced Office Manager and Assistant Office Manager to make sure that every procedure and policy is followed entirely, at all times.

2. How will you ensure that all laws, rules, guidelines and procedures are followed, at all times, specifically with regard to issuing and renewing driver's licenses, identification cards, and vehicle registrations?

   All aspects of the agency will follow the manuals and broadcasts, as directed by the District Office and the Ohio Bureau of Motor Vehicles. If questions arise and clarity is needed, a call to DTS or License Control will be made. All transactions will be double checked before the customer leaves the agency, to ensure the transcation was completed correctly before the leave. I will personally sign off on all BMV forms when I am in the office. All applications will be revieved by agency management at the end of each business day to ensure everything was completed correctly. I plan to hire and retain a staff who is extensively trained in all aspects of the agency. Our mission statement will be to serve the Ohio motoring public with respect and a smile!

3. What measures will you put in place to detect, deter, and prevent fraud?

   First and forement, there will be cameras in all areas of the agency to deter fraud and theft. I am trustworthy and pride myself in being fair, honest and hard-working. There will be a zero tolerance for fraudulent and unethical behavior in my agency. If a document is in question, I will make sure that we always follow fraudulent document procedures and contact the BMV investigator.

4. The Bureau of Motor Vehicles routinely issues new and/or revised policy and procedural changes through email broadcasts to the deputy registrars. How will you ensure that policies and procedures are communicated to the staff and followed on a daily basis?

   As the Deputy Registrar, I will be checking my email and the agency broadcast system multiple times a day. Any change in procedure will be immediately brought to the attention of my staff. All staff is required to read and sign all policy/procedural changes. These broadcasts will be kept in a binder, in order, and available for easy references, if needed.

5. How will you demonstrate good leadership to your employees?

I believe in leading by example and that good role modeling is key for any successful business owner/manager. This includes coming to work early, staying late, or coming in on a scheduled day off. This high standard and strong leadership example will set the tone for all agency staff, and shows that I am willing to do whatever I ask of them and more. With a knowledgeable, punctual, understanding, fair and consistent staff, all things are possible. High standards drive a thriving business!!

6. How will you maintain a high level of professionalism each day in this business?

Professionalism must always be present! All employees must hold themselves to the highest degree of professionalism at all times. Greeting each customer with a smile and proper salutations is a MUST in my agency. You can only make one first impression! By providing all agency patrons with quick, efficient and effective customer service, you are ensuring your patrons are well-taken care of. This is a business concept that keeps patrons coming back to our agency year after year.

7. How do you intend to recruit and retain high quality employees?

By offering a great fringe benefit package and competitive pay for agency staff, you are ensuring that you are retaining high quaility employees. All new hires will be properly trained to meet the standards of our agency. A preference will be given to candidates with prior agency experience. A happy, well-taken care of staff is a hard working staff!

8. How will you provide a safe, clean and friendly place to do business?

The agency will always be clean, comfortable and organized. My agency will have chairs for all agency patrons to utilize. I will provide magazines and newspapers for customers to read, if they wish. The agency will be cleaned daily and deep cleaned monthly. I want the customers to feel their value and know how much we appreciate them doing business with us.

9. How would you deal with an irate customer?

Kindness and empathy goes a long way when dealing with the general public. By listening and allowing the customer to express their frustrations makes all the difference. We have to lend an ear and proceed with a plan forward. This includes listening, offering a reasonable solution that is in accordance with the rules/regulations, and provide direction to the customer. The most important thing is to remain calm, respectful and polite. With kindness all things are possible!

10. What training or advice do you, or will you, give to your employees for dealing with irate customers?

I will always instruct my staff to follow my lead when handling an irate/angry customer. It will be an agency protocol and procedure for the clerk to get a member of the management staff to assist with the situation. Sometimes the customer just needs to hear the same thing twice to understand the procedures. My staff will always show kindness and empathy to others.

11. How will you meet the expectations of the Bureau of Motor Vehicles?

I have a proven track record of meeting and exceeding expectations, and I plan to do the same for the Bureau of Motor Vehicles. I will be a dedicated, hard-working Deputy Registrar. I will work the customer counter and be on the front lines with my staff. I will be on-site daily and ensure I have the best possible staff to deliver excellent customer service to our customers. I believe in order and effective time management. It is my belief that through excellent customer service, all things are possible. I know that I would run a top-notch agency and I know the customers would agree. Service with respect and a smile!

12. Why should the Bureau of Motor Vehicles consider you for a deputy registrar license agency contract?

I have worked in an agency as a clerk and a supervisor. I know the ins and outs of the business. I understand the protocols, procedures and expecations of a Deputy Registrar. My goal is provide the best customer service possible and improve the image of the BMV.

The main goal is to reduce wait times and keep people moving. By educating the general public and providing them with the resources to handle their business, this will certainly reduce wait times and keep customers in better spirits. The goal is service with a smile!

The Ohio Bureau of Motor Vehicles should consider me for a deputy registrar contract because I am hard-working, dedicated and a team player. I have a B.A. in Public Relations and a M.A. in Administration. I feel that I have the credentials, financial accountability and background to run a successful agency. I promise that my results will speak for themselves and I know that the BMV will be pleased with my agency.

3.10(A) AFFIDAVIT OF INDIVIDUAL

(Not to be used by County Auditors, Clerks of Courts or Nonprofit Corporations)

County of Trumbull :

State of Ohio :

I, Kyle Jones, being first duly sworn, depose and say that:

1) I am submitting my proposal for appointment as deputy registrar in my own individual capacity, and not as an agent, representative, partner, or business associate of any kind whatsoever of any other person or persons;

2) If appointed, I will serve as a deputy registrar in my own individual capacity, and will not act as an agent, representative, partner, or business associate of any kind whatsoever of any other person or persons;

3) If appointed as deputy registrar, I will not assign my deputy registrar contract, in whole or in part, nor any of my deputy registrar's responsibilities to any other person or persons without the advance written consent of the Registrar;

4) If appointed as a deputy registrar, I will fully comply with all requirements set forth by the Registrar. I will not serve as an office manager of any deputy registrar agency other than my own; nor will I permit any other deputy registrar, the spouse of any deputy registrar, or the parent, child, brother, or sister of any deputy registrar living in the same household as the deputy registrar to operate my deputy registrar agency, directly or indirectly. I understand that I may hire the spouse, parent, child, brother, or sister of any deputy registrar as an employee, provided that I maintain control of my deputy registrar agency;

5) To the best of my knowledge and belief, I am fully qualified to serve as a deputy registrar, and there is no provision of the Ohio Revised Code or the Ohio Administrative Code which would make me ineligible to serve as a deputy registrar; and,

6) I have caused to be prepared, have read, and take full responsibility for, all forms and documents submitted with this proposal. All information is true, accurate, and complete to the best of my knowledge and belief. This affidavit is submitted by me for the purpose of obtaining a deputy registrar contract.

Signature of proposer: [signature]

Printed/typed name of proposer: Kyle Jones

Sworn to and subscribed in my presence by the above named Kyle Jones

on this 25th day of January, 2021

Theresa Lesko

Notary Public

Printed name of Notary Public: Theresa Lesko

My commission expires: May 09, 2025

THERESA LESKO
Notary Public
State of Ohio
My Comm. Expires
May 9, 2025

Form 3.10(A), Affidavit of Individual (2021)

OPERATIONAL EVALUATION (2021)

Kyle Jones
50-A / 21020
Mahoning County, Youngstown
859 E Midlothian Blvd., Suite B

FORM	DESCRIPTION	OK	NO
4.0	**Operational Checklist** – Maximum = 6 Points (enter points recorded on bottom of Form 4.0)	6	
4.1	**Appointment of Agency Managers**		
	A. Deputy to Work at Least Twenty (20) Hours Per Week Proposed Work Hours Per Week 30	5	*
	B. Appointment of Manager and Assistant **OR** Acceptable Statement	3	0
4.2	**Experienced Employees Summary**		
	Gave Acceptable Statement **OR** Provided Names	2	0
4.3	**Staffing and Personnel Calculation**		
	A. Hours Recommended: 107 Proposed: 180	4	*
	B. Work Hours and Pay Calculated Correctly	2	0
	C. Meets Minimum Wage Requirement (2021 Ohio Minimum Wage Rate = $7.25 or $8.80 Per Hour)	1	*
4.4	**Start-Up Costs Calculation**		
	A. Adequate and Accurate Personnel Costs	3	0
	B. Adequate and Accurate Site Preparation Costs	2	0
	C. Adequate and Accurate Rental Payments	2	0
	D. Total Required: $11,510.00 On Deposit (Form 3.4): $55,255.35	5	*
4.5	**Deputy Registrar Contract**		
	A. Filled Out Completely and Properly	2	0
	B. Signed and Properly Notarized	3	0

OPERATIONAL EVALUATION POINTS (Max. 40 Points) 40

NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.

Comments:

Evaluators' signatures	Printed names	Date
(1) Robert A. Fragale	Robert A. Fragale	3/4/21
(2)		

4.0 OPERATIONAL CHECKLIST

Proposer's Full Legal Name Kyle Jones

Location Number 50-A

Proposer Number (*BMV use only*) 21020

INSTRUCTIONS: You must submit one original and one copy of this form and all documents listed on this form **FOR EACH SITE YOU ARE PROPOSING**. If you fail to submit a complete set of originals and a complete set of copies **FOR EACH SITE,** you will not be evaluated for those sites.

FORM	DESCRIPTION	X	BMV
4.0	Operational Checklist (this form)	✔	1
4.1	Appointment of Agency Managers	✔	1
4.2	Experienced Employees Summary	✔	1
4.3	Staffing and Personnel Costs Calculation	✔	1
4.4	Start-Up Costs Calculation Amount: $ 11,510.00	✔	1
4.5	Deputy Registrar Contract (2 pages only)	✔	1
			6

4.1 APPOINTMENT OF AGENCY MANAGERS

Proposer's name: Kyle Jones Location number: 50-A

(A) DEPUTY REGISTRAR: As deputy registrar, I agree to work in the agency at least 30 hours per week during the hours the agency is open to the public for business throughout the entire term of the contract. I understand that the minimum requirement for deputy registrars is twenty (20) hours per week during the hours the agency is open to the public for business. This twenty-hour requirement does not apply to County Auditors, Clerks of Courts, or nonprofit corporations.

(B) OFFICE MANAGER: I understand and agree that I must appoint either myself or another reliable person to serve as the office manager for the agency, and that the office manager must be scheduled to work at the agency at least thirty-six (36) hours per week during the hours the agency is open to the public for business. It is my intention to:

_____ Appoint myself as the office manager and work at least thirty-six hours per week during the hours the agency is open to the public for business.

✔ Appoint another reliable person to serve as the office manager to work at least thirty-six hours per week during the hours the agency is open to the public for business.

(C) ASSISTANT OFFICE MANAGER: I understand and agree that I must appoint a reliable person to be responsible for the management of the agency in the absence of myself and the agency office manager during the hours the agency is open to the public for business.

(D) OTHER EMPLOYEES: I agree to maintain an accurate and current roster of my office manager, assistant office manager, and all other employees and their work schedules, as well as my own work schedule, on file and available for inspection by BMV employees at all times. I also agree to notify the BMV in writing immediately of any changes in the appointment of the office manager or assistant office manager, and to keep the employee roster complete and current.

Deputy registrar (proposer) signature Date: 1/25/2021

4.2 EXPERIENCED EMPLOYEES SUMMARY

Proposer's name: Kyle Jones Location number: 50-A

(A) HIRING EXPERIENCED EMPLOYEES. I certify that if I am appointed as a deputy registrar under contract with the Registrar of Motor Vehicles, I will make every good faith effort to hire and retain qualified employees who have relevant experience working in a deputy registrar agency. I agree to make bona fide offers of employment at comparable wages and under comparable conditions to their most recent deputy registrar employment experience.

(B) CHECK WHICHEVER APPLIES:

☐ I HAVE NOT BEEN A DEPUTY REGISTRAR OR DEPUTY REGISTRAR EMPLOYEE. I have not yet identified any prospective employees who have relevant deputy registrar experience. However, if awarded a contract, I will make every reasonable effort to identify and hire, if possible, qualified employees who have relevant experience working in a deputy registrar agency. **Please do not contact any deputy registrar employees until after you have been awarded a contract.**

☑ I AM OR HAVE BEEN A DEPUTY REGISTRAR OR DEPUTY REGISTRAR EMPLOYEE. I have identified the following persons to whom I will make a bona fide offer of employment at comparable wages and under comparable conditions to their present employment. (A deputy registrar or a proposer who has deputy registrar employment experience may list himself or herself here):

Name of Experienced Employee	Length of Experience
Kyle Jones	5 years
Mindi Kaib	5 years
Cheryl Cook	5 years
Theresa Lesko	10 years
Jeanetta Lesko	12 years

(C) I understand that failure to hire properly qualified and experienced deputy registrar employees is grounds to withhold or terminate my deputy registrar contract.

Deputy registrar (proposer) signature Date: 1/25/2021

Form 4.2, Experienced Employees Summary (2021)

4.3 STAFFING AND PERSONNEL CALCULATION

Proposer's name: Kyle Jones Location number: 50-A

Instructions. Use this form to project the number of hours the deputy registrar, office manager, assistant office manager, and all other experienced (if known) and/or new hire employees will work, the projected hourly wages paid, and the weekly and monthly payroll costs.

The deputy registrar shall be regularly scheduled and on duty at the license agency at least twenty (20) hours per week, during regular business hours. This twenty-hour requirement does not apply to nonprofit corporations, county auditors, or clerks of court. The deputy registrar shall appoint a full-time office manager, who shall be either the deputy registrar or a full-time employee with responsibility for management of the agency. The office manager shall be regularly scheduled, and shall work at least thirty-six (36) hours per week during regular business hours. The deputy registrar shall also designate an assistant office manager who shall supervise the agency in the absence of the deputy registrar and the full-time office manager.

The projected total weekly work hours for the deputy registrar and all employees should equal or exceed the minimum staffing recommended for the Class Size Agency as prescribed in the Agency Specifications.

In accordance with the standards established by the Unites States Department of Labor, Wage and Hour Division; Ohio Constitution; and Ohio Department of Commerce; all license agency employees must be paid at least the current minimum wage rate of $7.25 per hour by businesses with gross receipts of less than $323,000 per year and $8.80 per hour by businesses with gross receipts of $323,000 or more per year.

The deputy registrar need not list any salary or wages for the deputy's own service as deputy registrar or as the office manager.

Caution. For deputy registrars who also serve as the office manager, be careful not to duplicate hours worked.

EMPLOYMENT POSITION	PROJECTED HOURS PER WEEK	PROJECTED HOURLY RATE	PROJECTED WEEKLY PAY	PROJECTED MONTHLY PAY (weekly x 4)
Deputy Registrar	**30.00**	**N/A**	**N/A**	**N/A**
Office Manager **(leave blank if the Deputy Registrar is also the Office Manager)**	**40.00**	**$ 12.00**	**$ 480.00**	**$ 1,920.00**
Assistant Office Manager	**40.00**	**$ 11.00**	**$ 440.00**	**$ 1,760.00**
Experienced Employees Total Number (combine Full-time & Part-time) = 3	**60.00**	**$ 10.00**	**$ 600.00**	**$ 2,400.00**
New Hire Employees Total Number (combine Full-time & Part-time) = 1	**10.00**	**$ 9.50**	**$ 95.00**	**$ 380.00**
TOTALS	**180.00**	**N/A**	**$ 1,615.00**	**$ 6,460.00**

4.4 START-UP COSTS CALCULATION

Proposer's name: Kyle Jones Location number: 50-A

The purpose of this form is to assure the BMV that you are financially able to cover the costs of beginning a deputy registrar business. We need to know that you have enough financial resources to cover your personnel, site preparation, and site rental costs.

1. PERSONNEL COSTS (FOUR WEEKS)

Use Form 4.3 to calculate four (4) weeks' personnel costs for this location.

$ 6,460.00

2. SITE PREPARATION COSTS (AMORTIZED)

A. **If this is a Deputy Provided Site**, calculate and enter the actual projected costs you will need to spend to prepare the building for use as a deputy registrar agency in each of the following categories:

1.	Building Modifications	$ 5,000
2.	Counter Costs	$ 5,000
3.	Other Costs	$ 5,000
4.	Total	$ 15,000

Total amortized over 60 month contract period (Divide line 4 by 60) = $ 250.00

B. **If this is a BMV Controlled Site**, enter the information contained in the Agency Specifications for this location. **Do not change the information from the Agency Specifications.**

$ N/A

3. AGENCY RENTAL PAYMENTS (3 MONTHS)

A. **If this is a Deputy Provided Site**, enter the actual amount you will pay to rent or lease this site.

B **If this is a BMV Controlled Site**, enter the estimated rent listed in the **Agency Specifications** for this site. **Do not change the amount listed.**

One month's rent: $ 1,600.00 x 3 = $ 4,800.00

TOTAL START-UP COSTS

[four weeks' personnel costs, plus one month's amortized site preparation costs (2.A total amount or 2.B BMV Controlled Site amount), plus three months' rent] $ 11,510.00

STATE OF OHIO

DEPARTMENT OF PUBLIC SAFETY

BUREAU OF MOTOR VEHICLES

DEPUTY REGISTRAR CONTRACT – 2021

This Agreement is made by and between the Registrar of Motor Vehicles, (Registrar, herein), located at 1970 West Broad Street, Columbus, Ohio 43223-1102 and Kyle Jones **, (deputy registrar, herein) whose home mailing address is** [redacted]

(City) [redacted] **, Ohio (Zip)** [redacted] **, to operate a deputy registrar agency, Location No.** 50-A **, to be located as follows: in the State of Ohio, County of** Mahoning

City/Village/Township (indicate which) Township **of** Boardman

Street address: 859 E. Midlothian Blvd Suite B

(City) Youngstown **, Ohio (Zip)** 44502

WHEREAS, the Registrar of Motor Vehicles, pursuant to section 4503.03, section 4507.01, and other applicable sections of the Ohio Revised Code, wishes to appoint and contract the above named person as deputy registrar for the above referenced location;

WHEREAS, the above named deputy registrar wishes to accept this appointment and contract as deputy registrar;

NOW, THEREFORE, IT IS AGREED AS FOLLOWS:

1. The Registrar hereby appoints the above named person as a deputy registrar subject to the 2021 Deputy Registrar Contract Terms and Conditions which are incorporated herein by reference;

2. The above named person hereby accepts appointment as a deputy registrar subject to the 2021 Deputy Registrar Contract Terms and Conditions incorporated herein by reference;

3. The term of this appointment and contract shall begin on the **27th** day of **June, 2021**, and shall end on the **27th** day of **June, 2026**, unless otherwise terminated as provided herein;

4. The deputy registrar is appointed and accepts appointment in the capacity of [state whether: "an individual," "County Auditor for (specify county)," "Clerk of Courts for (specify county)," or "a nonprofit corporation"]:

   an individual

5. The Deputy Registrar certifies that he or she has read, understands, and hereby agrees to all of the 2021 Deputy Registrar Contract Terms and Conditions incorporated herein.

Deputy Registrar signature — Date: 1/25/2021

STATE OF OHIO :

COUNTY OF Trumbull :

Before me, a notary public in and for said county and state, personally appeared the above named Kyle Jones, who acknowledged that he or she did sign the foregoing instrument and that the same is his or her free act and deed.

IN WITNESS WHEREOF I have hereunto set my hand and official seal, this 25 day of January, 2021.

NOTARY PUBLIC

THERESA LESKO
Notary Public
State of Ohio
My Comm. Expires
May 9, 2025

Printed name of Notary Public: Theresa Lesko

My commission Expires: May 09, 2025

STATE OF OHIO
DEPARTMENT OF PUBLIC SAFETY
BUREAU OF MOTOR VEHICLES

BY: _____
REGISTRAR OF MOTOR VEHICLES

Done at Columbus, Ohio, on

_____

SITE EVALUATION (2021)

Kyle Jones
50-A/ 21020
Mahoning, Youngstown
859 E Midlothian Blvd., Suite B

Evaluation Team Number: D1

Proposer's Name: Kyle Jones

Verify Proposed Address: 859 E. Midlothian Blvd. (Suite B)

Proposed County: Mahoning

Proposed City: Boardman Township Ohio Zip Code: 44502

SCORING SUMMARY

SITE DOCUMENT REVIEW, Page 2	(Max. 28%): 28%
SITE OBSERVATIONS, Page 3	(Max. 34.4%): 33.6%
SITE FLOOR SPACE, Page 5	(Max. 12.8%): 12.8%
COUNTERS, SIGNS & ADA, Page 6	(Max. 20.8%): 20.8%
ONE-STOP EVALUATION, Page 7	(Max. 4%): 4%
TOTAL EVALUATION SCORE	**(Max. 100%):** 99.2%

Comments:

Evaluators' signatures	Printed names	Date
(1) Nicole Brown	Nicole Brown	3-1-21
(2) Dino Alfano	DINO ALFANO	3-1-21

DOCUMENT REVIEW

FORM	DESCRIPTION	OK	NO
5.0	Deputy Provided Site Checklist **Submitted**	4%	0
5.1	Site Questionnaire **Submitted**	1.6%	0
5.2	ADA Checklist **Submitted**	1.6%	0
5.3	A. Lease Option **Submitted**	1.6%	0
	B. Filled Out, Including Complete Address **(EVALUATE)**	1.6%	0
	C. Signed and Notarized **(EVALUATE)**	1.6%	*
	D. Full Five (5) Years **AND** Valid **(EVALUATE)**	1.6%	*
5.4	Proximity Attachment **OR** Non-proximity Site **(Submitted or N/A)**	1.6%	0
Site Plan	A. Proposer **Submitted**	1.6%	0
	B. On 8½ x 11-Inch Paper **(EVALUATE)**	1.6%	0
	C. With Complete Dimensions **(EVALUATE)**	1.6%	0
Counter Plan	A. Proposer **Submitted**	1.6%	0
	B. On 8½ x 11-Inch Paper **(EVALUATE)**	1.6%	0
	C. With Complete Dimensions **(EVALUATE)**	1.6%	0
Map	A. Proposer **Submitted**	1.6%	0
	B. With Site Clearly Marked **(EVALUATE)**	1.6%	0

SITE EVALUATION SCORE, Page 2 (Max. 28%) 28%

NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.

Comments:

SITE EVALUATION – OUTSIDE & INSIDE OBSERVATIONS	OK	NO
1. Is access to site from major street/route?	1.6%	0
2. Is site easy to find **EITHER** without any special signs **OR** with special signs already in place or proposed?	4%	0
3. Is the site within the required county? (#6 and Form 5.3)	4%	*
4. Is site within the boundaries of the designated geographical area? (Note precise location on map)	4%	*
5. Is there adequate parking? BMV requirement 14 Claimed (#9) 55 Actual 50 How many businesses share the parking area? 3	4%	*
6. Is the nearest regular parking space within 200 feet of the site's building or mall's public entrance? Claimed (#11) 15 FEET Measured 20 FEET	1.6%	0
7. Is the nearest regular parking space within 100 feet of the Site's building or mall's public entrance? (Use above measurement)	1.6%	0
8. Are required number of parking spaces off-street (lot or garage)?	1.6%	0
9. Are required number of parking spaces paved?	1.6%	0
10. Are required number of parking spaces free?	1.6%	0
11. Are required number of spaces for exclusive use of the D/R agency?	0.8%	0
12. Is there direct main door access to the proposed agency without passing through any other business (except DX or CTO)?	2.4%	*
13. Adequate provisions for heat, ventilation, and air conditioning? (#16 and observation) Existing ✓ New proposed	1.6%	0
14. Does the proposed agency appear to be free of fire and safety hazards?	4%	0

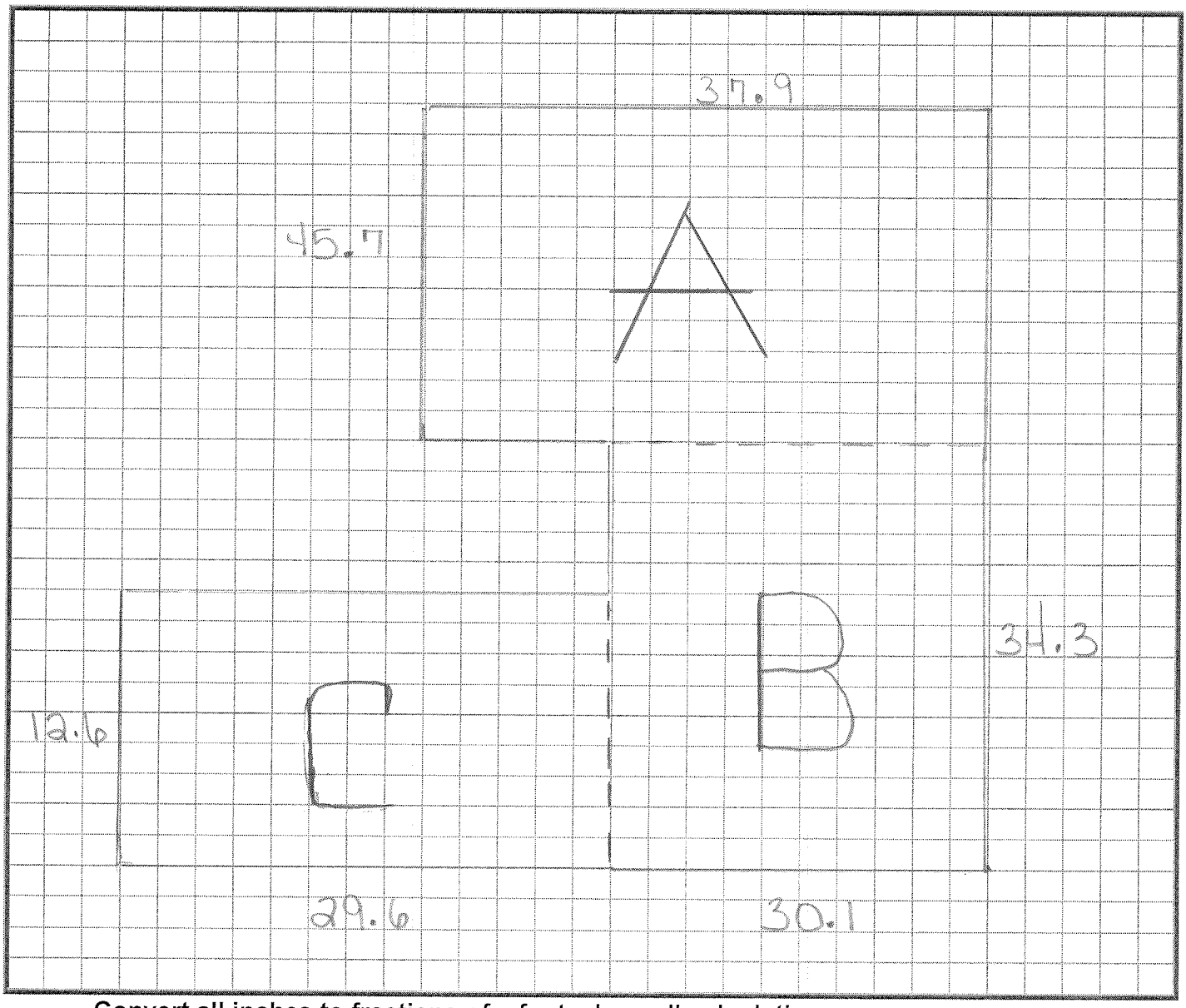
SITE EVALUATION SCORE, Page 3 (Max. 34.4%) 33.6%

NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.

Comments: #4 Site is located on the South Side of Midlothian Blvd.

MANDATORY REQUIREMENT FOR ALL SITES

(Divide into geometric sections as necessary; mark each section; include all dimensions for each geometric section)



Convert all inches to fractions of a foot, show all calculations.

A.	45.7 x 37.9	=	1,732
B.	30.1 x 34.3	=	1,032.4
C.	12.6 x 29.6	=	372.9
D.		=	
E.		=	
F.		=	

TOTAL AREA = 3,137.3

SITE EVALUATION – FLOOR SPACE

	OK	NO
15. Considering the actual site, floor plans submitted and site questionnaire, will there be specific and reasonable provision for each of the following:		
A. Customer area appears acceptable?	0.8%	0
Suggested 300 ft. Claimed (#19) 850 ft Percent 283%	0.8%	0
B. Employee service area appears acceptable?	0.8%	0
Suggested 300 ft Claimed (#20) 750 ft Percent 250%	0.8%	0
C. Employee private area appears acceptable?	0.8%	0
Suggested 95 ft Claimed (#21) 500 ft Percent 526%	0.8%	0
D. Storage area appears acceptable?	0.8%	0
Suggested 110 ft Claimed (#22) 500 ft Percent 454%	0.8%	0
E. Does the employee restroom appear to be acceptable?	2.4%	0
F. Is there any other area? [Indicate by checking (✓) appropriate box]		
Suggested **None** Claimed (#24) 515 ft	N/A	N/A

16. Considering actual site, site plan submitted and site questionnaire, will the proposed agency meet **total** square footage requirement? BMV requirement 820 Claimed (#25) 3265 Measured 3137.3	4%	*

Comments: _____

SITE EVALUATION SCORE, Page 5 (Max. 12.8%) 12.8%

NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.

SITE EVALUATION – COUNTERS, SIGNS & ADA	OK	NO
17. Considering any existing counters, site questionnaire, and the counter plans submitted, will the counters meet BMV specifications (grandfather existing)? (#26-38)	1.6%	0
18. Are there adequate provisions in the counter design to provide service to persons with disabilities, including those in wheelchairs? (#34-37) (no grandfather)	1.6%	0
19. Are kneehole openings at least 27 inches high, 30 inches wide and 19 inches deep? (#36) (no grandfather)	1.6%	0
20. Are there acceptable provisions for signs identifying the proposed agency? (#39-40)	1.6%	0
21. Considering the existing facility, the proposal, and the proposer's responses on Form 5.2 pages 1 through 7, is there or will there be substantial compliance with the Americans with Disabilities Act (ADA) in the specific areas listed below?		
A. Accessible entrance, page 1	1.6%	0
B. Ramps OR no ramps needed, page 2	1.6%	0
C. Parking and drop-off areas, page 3	1.6%	0
D. Is parking within 200 feet? Claimed, page 3 15 ft Measured 49 ft	1.6%	0
E. Is parking within 100 feet? Claimed, page 3 15 ft Measured 49 ft	1.6%	0
F. Entrance, pages 3 & 4	1.6%	0
G. Access to all deputy registrar services, page 5	1.6%	0
H. Rest room usage, page 6	1.6%	0
I. Rest room stalls (or single facility), page 7	0.8%	0
J. Rest room lavatories, page 7	0.8%	0

SITE EVALUATION SCORE, Page 6 (Max. 20.8%) 20.8%

NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.

Comments:

SITE EVALUATION – ONE-STOP SHOPPING

		OK	NO
22.	One-Stop Shopping Analysis: Determine from the Agency Specifications whether this location is DEPUTY PROVIDED SITE, PROXIMITY or DEPUTY PROVIDED SITE, WITHOUT ANY ONE-STOP SHOPPING CONSIDERATIONS, check below and **evaluate ONLY one (1) category**.		
_____	DEPUTY PROVIDED SITE, PROXIMITY Is proposed site within approximately one-half mile of a DX or CTO? Measure round trip by odometer, give credit for total of 12/10ths mile OR less. Enter round-trip mileage in tenths: _____	2.4%	0
	Proposed agency in the same building, an adjacent building, the same city block or the same shopping center as a DX OR CTO?	1.6%	0
✓	DEPUTY PROVIDED SITE, WITHOUT ANY ONE-STOP SHOPPING CONSIDERATIONS Award score of 4% if this category applies.	4%	N/A

SITE EVALUATION SCORE, Page 7 (Max. 4%) 4%

NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.

Comments: _____