

# PROFESSIONAL SERVICE CONTRACT TRANSMITTAL RECORD APPROVED

OCT 03 2014

Insurance Requirement

ACCOUNTS PAYABLE WILL HOLD UP ALL CONTRACT PAYMENTS UNTIL ALL INSURANCE CERTIFICATES/POLICIES REQUIRED UNDER THE CONTRACT HAVE BEEN RECEIVED. CONTRACTORS SHOULD BE MADE AWARE OF THIS REQUIREMENT.

CONTRACT PO NUMBER 2821496  
 STANDARD PO NUMBER  
 CHANGE ORDER # 4

TYPE OF CONTRACT: (Check One) <input type="checkbox"/> CONSTRUCTION/DEMOLITION <input type="checkbox"/> LEASE <input type="checkbox"/> DEED <input checked="" type="checkbox"/> PROFESSIONAL SERVICES	DEPARTMENT HEAD'S SIGNATURE 	DEPARTMENT INFORMATION TECHNOLOGY SERVICES DEPARTMENT
FUNDING SOURCE (Percent) FEDERAL    % STATE    % CITY 100% OTHER    %	DEPARTMENT CONTACT PERSON JANICE A. EVANS	PHONE NO. 313-224-2908
CONTRACTOR'S NAME: COMPUTECH CORPORATION		DATE PREPARED 07/01/2014
CONTRACTOR'S ADDRESS: 30700 TELEGRAPH ROAD, SUITE #4555, BINGHAM FARMS, MICHIGAN 48025	ENGINEER'S ESTIMATE <input type="checkbox"/> CONTRACT <input checked="" type="checkbox"/> CHANGE <input type="checkbox"/> TOTAL CONTRACT AMOUNT    \$7,223,000.00 TOTAL CPO AMOUNT            \$7,223,000.00 CHANGE AMOUNT                 \$0.00	
PHONE NO. 248-346-7580	<input checked="" type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> INDIVIDUAL	
FEDERAL EMPLOYER/SOCIAL SECURITY NUMBER: 38-3307011		MINORITY FIRM <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
PURPOSE OF CONTRACT: TO PROVIDE COMPUTER PROGRAMMING, CODING AND ANALYSIS.		
CHARGE ACCOUNT: VARIOUS - - - - -		

TIME & DATE IN	APPROVER MUST ALSO MAKE APPROPRIATE NOTES IN ORACLE PURCHASE ORDER	TIME & DATE IN
	<b>REQUESTING DEPARTMENT</b>   AUTHORIZED DEPARTMENT REPRESENTATIVE	
JUL 10 2014	<b>BUDGET</b> <input type="checkbox"/> RECOMMEND APPROVAL <input type="checkbox"/> RECOMMEND DENIAL  BUDGET DIRECTOR OR DEPUTY	JUL 23 2014  14 AUG -6 AM 11:59
	<b>GRANT MANAGEMENT SECTION</b> <input type="checkbox"/> RECOMMEND APPROVAL <input type="checkbox"/> RECOMMEND DENIAL  GRANT ACCOUNTANT	
JUL 29 2014	<b>FINANCE DEPARTMENT</b> <input checked="" type="checkbox"/> RECOMMEND APPROVAL <input type="checkbox"/> RECOMMEND DENIAL  FINANCE DIRECTOR OR DEPUTY	7/29/14
	<b>LAW DEPARTMENT</b> <input checked="" type="checkbox"/> RECOMMEND APPROVAL <input type="checkbox"/> RECOMMEND DENIAL  CORPORATION COUNSEL	8/6/14
	<b>PURCHASING DIVISION</b>   PURCHASING DIRECTOR	

RECEIVED  
 JUL 29 2014  
 CITY OF DETROIT  
 CONTRACTS SECTION  
 LAW DEPARTMENT

**Detroit City Council**  
**Legislative Policy Division**

TO: Purchasing Division Staff  
FROM: David Teeter  
DATE: September 24, 2014

RE: **PURCHASING ITEMS APPROVED BY THE CITY COUNCIL**

**There were no contracts approved on September 16, 2014, that were Reconsidered**

*The following contracts and purchase orders were reported to the City Council, by the Standing Committee, at the Regular Session of September 23, 2014 and **APPROVED.***

**Reported by the Budget, Finance and Audit Committee:**

No Contracts Reported and Approved

**Reported by the Internal Operations Committee:**

2867153	Genuine Parts Co. (NAPA)	+ \$2,600,000 to \$13,388,848	GENERAL SERVICE
	[Extension thru Feb. 28, 2015]	Submitted in the List and Referred Sept. 2, 2014.	
2896489	Jorgensen Ford [8-1-14 thru 7-31-17]	\$836,494.44	GENERAL SERVICE
		Submitted in the List and Referred Sept. 9, 2014.	
2897449	Gorno Ford [20 trucks w/snow blades]	\$893,100	GENERAL SERVICE
		Submitted in the List and Referred September 9, 2014.	
2821494,Ext. to 9-30-14	Futurenet Group	\$14,071,350 – no change	INFORM.TECH.SER.
		Submitted in the List and Referred September 9, 2014.	
2821496,Ext. to 9-30-14	Computech Group	\$7,223,000 – no change	INFORM.TECH.SER.
		Submitted in the List and Referred September 9, 2014.	
2821501,Ext. to 9-30-14	CW Professionals	\$8,200,000 – no change	INFORM.TECH.SER.
		Submitted in the List and Referred September 9, 2014.	
2821499,Ext. to 9-30-14	Data Consulting	\$11,386,000 – no change	INFORM.TECH.SER.
		Submitted in the List and Referred September 16, 2014.	
2821497,Ext. to 9-30-14	PIE Management	\$5,000,000 – no change	INFORM.TECH.SER.
		Submitted in the List and Referred September 16, 2014.	

Purchasing Division  
Contracts and Purchase Orders Received, Considered at Regular Session  
of September 23, 2014

Page 2

*The following contracts and purchase orders were reported to the City Council, by the Standing Committee, at the Regular Session of September 23, 2014 and **APPROVED.***

**Reported by the Neighborhood and Community Services Committee:**

No Contracts Reported and Approved

**Reported by the Planning and Economic Development Committee:**

2895160	Community & Home Supports	\$200,000	PLAN. & DEVELOPT.
Submitted in the List and Referred September 9, 2014; Approved with <b><u>WAIVER.</u></b>			
2882841	Living Arts	\$60,000	PLAN & DEVELOPT.
Submitted in the List and Referred September 16, 2014; Approved with <b><u>WAIVER.</u></b>			

**Reported by the Public Health and Safety Committee:**

2848560,Renewal	AON Risk Services	\$88,426	MUNICIPAL PARKING
Submitted in the List and Referred September 2, 2014.			
2891323	Parsons Brinckerhoff Michigan	\$2,158,222.34	PUBLIC WORKS
Submitted in the List and Referred Sept. 16, 2014; Moved to New Business; Approved with <b><u>WAIVER.</u></b>			

*The following contract was submitted to the City Council and referred to the Standing Committee; At a meeting of the Committee was **WITHDRAWN.***

**Referred to the Public Health and Safety Committee**

2889954	Michigan Police Equipment	\$358,900	POLICE
Submitted in the List and Referred September 9, 2014; <u>Withdrawn at meeting of Sept. 22, 2014.</u> Initially submitted in the List and Referred June 24, 2014; Approved by City Council July 15, 2014.			

Purchasing Division  
Contracts and Purchase Orders Received, Considered at Regular Session  
of September 23, 2014

Page 3

*The following contracts and purchase orders were reported to the City Council, at the Regular Session of September 2, 2014 by the Emergency Manager as **APPROVED**.*

No Contracts Reported separately by Emergency Manager as Approved

*The following contracts were **REFERRED** on September 23, 2014 to the indicated Standing Committee for consideration and report to the City Council.*

**Referred to Budget, Finance and Audit Committee**

2895777	Randy Lane	FINANCE
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**Referred to Internal Operations Committee**

2821499,Ext.	Data Consulting Group	INFORM.TECH.SERVICES
2821497,Ext.	PIE Management	INFORM.TECH.SERVICES
2819571,Ext.	Brilar	GENERAL SERVICES

*Correction to Funding source; Moved to New Business and approved.*

**Referred to Neighborhood and Community Services Committee**

No Contracts Referred

**Referred to Planning and Economic Development Committee**

2882841	Living Arts	PLAN. & DEVELOPMT.
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**Referred to Public Health and Safety Committee**

2891323	Parsons Brinckerhoff	PUBLIC WORKS
2809078,Increase	New Flyer Indus.	TRANSPORTATION
2896295	SEON Systems	TRANSPORTATION

Purchasing Division  
Contracts and Purchase Orders Received, Considered at Regular Session  
of September 16, 2014

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*The following items have been HELD for review, discussion or report to the Standing Committee.*

2895777	Randy Lane	\$170,000	FINANCE
Submitted in the List and Referred September 16, 2014;			

**Held in the Internal Operations Committee**

2897014,Emg.Prcmt.	J-Mac Tree and Debris	\$400,000	GENERAL SERVICE
Submitted in the List and Referred September 9, 2014; Union issues and concerns.			

2897312,Emg.Prcmt.	Tree Man Services	\$400,000	GENERAL SERVICE
Submitted in the List and Referred September 9, 2014; Union issues and concerns.			

2897313,Emg.Prcmt.	All Metro Tree Services	\$400,000	GENERAL SERVICE
Submitted in the List and Referred September 9, 2014; Union issues and concerns.			



CITY OF DETROIT  
FINANCE DEPARTMENT  
PURCHASING DIVISION

1008 COLEMAN A. YOUNG  
MUNICIPAL CENTER  
DETROIT, MICHIGAN 48226  
PHONE 313 • 224 • 4600  
FAX 313 • 628 • 1160

Date: August 11, 2014  
To: Janice A. Evans  
From: Zenola Holland  
Purchasing Division  
RE: **Contract Number #2821496 – Computech Corporation**

The Purchasing Division has received the contract indicated above. It is the department's responsibility to ensure that all documents (clearances, insurance, etc.) are provided to the Purchasing Division. However, the following documentation must be provided before this contract can be submitted to City Council:

- Signed City Council Review Checklist
- Bid Tabulations or Evaluation Score Sheet (**Must Have To Justify Competitive Bidding**)
- Revenue/Property Tax Clearance Expired 7-31-14
- Income Tax Clearance
- Human Rights Affidavit
- Insurance Certificate—Needs Coverage for Automobile and Worker's Compensation and Employer's Liability and the City of Detroit needs to be named as additional insured
- Hiring Policy and **Employment Application (without reference to questions regarding a felony)**
- Slavery Era Affidavit
- Other—**Returned to the Department—Contract Incomplete**

**\*IT IS THE PURCHASING DIVISION'S POLICY TO RETURN ALL CONTRACTS THAT ARE INCOMPLETE.\***

If you have any further questions, please do not hesitate to contact me. I can be reached at 224-9235. Thank you, in advance, for your cooperation.

cc: Boysie Jackson, Chief Procurement Officer  
File

**City Of Detroit  
Law Department  
-Contracts Section-**  
INTERDEPARTMENTAL MEMORANDUM

TO: Zenola Holland, Contracts Desk  
Purchasing Division, Finance Department

FROM: Thomas Cipollone  
Senior Assistant Corporation Counsel  
Direct Dial: (313) 237-3015

SUBJECT: EXPIRED DOCUMENTS - CONTRACT NUMBER: 2821496

Vendor Name: Computech Corporation

DATE: 8-5-14

The documents checked below have expired, or are missing. Before this contract is placed on City Council's agenda, the department originating the contract must ensure that the documents identified below are current or have been renewed, and have been provided to the Purchasing Division of the Finance Department. The department originating the contract has been notified on the date listed below.

Thank you for your cooperation in this request.

CLEARANCES

Property Tax (*expired*)       Income Tax  
 Human Rights       Other (Identify: \_\_\_\_\_)

INSURANCE

The coverage required by this contract per the certificate of insurance furnished with this contract is missing or has expired as follows:

Entire Certificate:       General Liability: \_\_\_\_\_  
Professional Liability: \_\_\_\_\_      Excess Liability: \_\_\_\_\_  
Automobile: \_\_\_\_\_      Workers Compensation: \_\_\_\_\_

Other (Identify) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The departmental requestor was notified by this writer on 8-5-14

cc: ITS Department - Attn: Janice Evans

CITY OF DETROIT  
FINANCE DEPARTMENT  
PURCHASING DIVISION  
AUG - 6 AM 11: 59

01/11/12

## City Council Contract Agenda Items Review Checklist

Reviewer: \_\_\_\_\_ Date Received: \_\_\_\_\_

Date: August 11, 2014 Department: Information Technology Services Division: Contracts & Administration

Dept Head/Contact Person: Charles Dodd Phone No.: 224-2900

Description: To provide professional resources. Contract No.: 2821496 PO Type: Prof Svc - CPO

Est. Value: \$7,223,000

Contract Term (if applicable): July 1, 2014 to September 30, 2014

Funding: City 100% State \_\_\_\_\_% Federal \_\_\_\_\_% Other: \_\_\_\_\_%

(Documentation must be furnished by the Dept. if anything other than City funding)

Recommended Supplier: Computech Corporation Required Date: July 1, 2014

1. Is the product or service ESSENTIAL to department operations?  Yes  No

If "Yes" please explain why: Resources for this contract is being utilized on a Citywide level for various projects essential to many department's functions.

Consequence of not buying: Projects and progress will cease. No technical support for agency system

2. Was the product or service competitively bid?  Yes  No  
(Request copies of bid tabulation/evaluation score sheets as needed)

If the answer to #2 is "NO" explain why there was no competition:  
\_\_\_\_\_

3. Was a Co-Operative Agreement Considered?  Yes  No Co-Operative Name: \_\_\_\_\_  
If answer to #3 is "No" explain why a Co-Op was not considered: \_\_\_\_\_

4. Were savings achieved?  
 Yes Amount \$ \_\_\_\_\_  No  
Were additional savings requested? (10%)  Yes  No

5. Does the supplier currently provide other goods and services to the City?  Yes  No  
If yes please list: \_\_\_\_\_

6. The business being awarded is Contract Extension

01/11/12

If #6 is a renewal provide justification for renewal: Continue support of projects in progress is still needed.

If #6 is a increase/decrease does this represent:

- Variance in unit price only (Current unit price \$      Suggest Unit Price \$      )  
 Change in amount/volume of the good or service to be used (no change in unit price)

7. Is this good/service used by other departments?  Yes  No

If "yes" can this req/par be combined other department requirements?  Yes  No

8. Is this a service that can be performed by City employees?  Yes  No

Is this a service that City employees can be trained to do?  Yes  No

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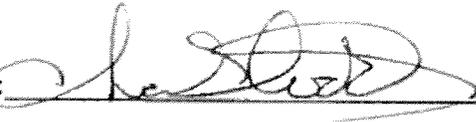
NOTES:

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**PLACE ON CITY COUNCIL AGENDA**

**REJECT AND NOTIFY DEPARTMENT DIRECTOR:**

SIGNED: \_\_\_\_\_



DATE: August 11, 2014

INFORMATION PROVIDED BY: Charles Dodd

TITLE: Director

PHONE NO. 224-2900

01A02 Request for Quotes  
 Preliminary Evaluation  
 Ranked per Ave. Hourly Rates

Supplier	Monthly Rate	Points	Evaluation Criteria: Phase One - Non-Economic Development										Phase Two	Total Points
			Total # of Employees	# Empty Detroit	Pts. Based #Detroit	# Empty Working in Detroit	# Empty Working in Del. Pts.	Del. Based Firm Points	Own/Rent Space	Prior City or Prof. Exp. Pts.	Headquarters in Detroit	Business Based		
Freeman Group, Inc.	58	30	45	25	6	45	10	10	10	10	3	15	0	79
Lehto Associates, Inc.	65	30	41	2	3	41	10	10	10	3	15	0	76	
Vision IT	75	30	3,500	5	3	76	10	10	10	5	15	0	78	
Sync Technologies, Inc.	73	21	38	6	3	36	10	10	10	4	15	0	76	
Corporation Corporation	46	30	236	5	3	8	10	10	10	3	15	0	67	
Marine Star & Allied	61	30	7	2	3	7	3	10	10	4	15	0	70	
P.J.E. Management, LLC	61	30	36	18	6	23	6	10	10	4	15	0	70	
Delta Consulting Group, Inc.	54	40	61	2	3	8	6	5	10	4	15	0	66	
Technical Technology, LLC	74	40	5	5	3	5	3	9	10	6	15	0	66	
MLC, Inc.	61	30	6	5	3	5	3	10	10	4	15	0	65	
Western Engineering Of Michigan, PLLC	76	33	18	2	3	6	3	10	10	3	15	0	72	
Computer Corporation	52	42	4,336	5	3	18	6	10	10	1	15	0	54	
Ember Group, Inc.	57	30	370	10	10	1,708	10	1	10	4	15	0	81	
Universal Systems Technologies, Inc.	74	30	113	1	6	5	6	0	5	4	0	0	51	
Safy	64	30	1,885	0	3	0	0	3	5	4	0	0	50	
Accell One	37	57	4	0	0	0	0	0	1	3	0	0	45	
ISC Global	Rejected - Failure to provide a financial statement. A statement was provided for previous bid.													
Access One	Rejected - Provide a range of rates.													
Western Engineering Of Michigan, PLLC	Rejected - No financial statement													
Frankend Technology, LLC	Rejected - No financial statement													



# REQUEST FOR INCOME TAX CLEARANCE

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

E-MAIL ADDRESS \_\_\_\_\_

CONTACT NAME \_\_\_\_\_

PHONE \_\_\_\_\_

FAX \_\_\_\_\_

Type of Clearance:

New

Renewal (Please submit 30 days prior to submitting bid or expiration date)

To:  
 A. City of Detroit  
 Income Tax Division  
 Coleman A. Young Municipal Center  
 2 Woodward Avenue, Ste. 512  
 Detroit, MI 48226

Phone: (313) 224-3328 or 224-3329  
 Fax: (313) 224-4588

For:  
 Individual or  
 Company Name COMPUTECH CORPORATION  
 Address 100 W. KIRBY ST, # 101

City DETROIT  
 State MI Zip Code 48202  
 Telephone 248-346-0809 Fax # 313-281-2211  
 E-mail Address RAMESH.TAVVA@COMPUTECHCORP.COM

B. Name of Chief Financial Officer/Authorized Contact Person  
 (include address if different from above)

Telephone # \_\_\_\_\_

Fax # \_\_\_\_\_

Employer Identification or Social Security Number

38-3307011

Spouse Social Security Number \_\_\_\_\_

Nature of Contract IT PROFESSIONAL SERVICES

BID CONTRACT AMOUNT (if known):

Labor: \$ \_\_\_\_\_

Material: \$ \_\_\_\_\_

Contract # (if known): \_\_\_\_\_

C. ALL QUESTIONS MUST BE ANSWERED TO EXPEDITE APPROVAL PROCESS. ANY QUESTION NOT ANSWERED MAY RESULT IN A DENIAL OF INCOME TAX CLEARANCE.

Check One:

Individual

Corporation

Partnership

Estate & Trust

### INDIVIDUALS ANSWER QUESTIONS 1,2,3,4.

- Have you filed joint returns with spouse during the last seven (7) years? (If yes, include spouse SSN above):  Yes  No
- Are you a student, and/or claimed as a dependent on someone else's tax return?  Yes  No
- Were you employed during the last seven (7) years?  Yes  No
- Were you a resident of Detroit during the last seven (7) years?  Yes  No

### CORPORATIONS AND PARTNERSHIPS ANSWER QUESTIONS 5,6,7.

- Is the company a new business in Detroit? If yes, attach Employer Registration (Form DSS 4):  Yes  No
- Will the company have employees working in Detroit?  Yes  No
- Will the company use sub-contractors or independent contractors in Detroit?  Yes  No

### D. FOR INCOME TAX USE ONLY

Has the contractor complied with the provisions of the City Income Tax Ordinance?

- Yes  No  
 Yes  No  
 Yes  No

Signature C. JONES  
INCOME TAX INVESTIGATOR  
 Signature S.R. JENNINGS  
SR INCOME TAX INVESTIGATOR

Date JAN 29 2013 Expires JAN 29 2014  
 Date FEB 24 2014 Expires FEB 24 2015

VISIT OUR WEBSITE FOR INFORMATION AND TAX FORMS AT: [www.detroitmi.gov](http://www.detroitmi.gov)

NOTE: An approved Income Tax Certificate may be used in multiple city wide departments that require a bid. Please e-mail your completed request form (preferably in pdf format) to: [IncomeTaxClearance@detroitmi.gov](mailto:IncomeTaxClearance@detroitmi.gov)

# PURCHASING DIVISION VENDOR CLEARANCE REQUEST

Submit to: Revenue Collections  
Purchasing Vendor  
1012 Coleman A. Young Municipal Center  
Detroit, MI 48226  
(313) 224 - 4087 (Telephone)  
(313) 224 - 4238 (Fax)

Nature of Contract PROFESSIONAL SERVICES CONTRACT  
Contract Amount \$ 3,775,500

Business Type:  Corp     Partnership     Sole Proprietorship     Personal Services

Business Name COMPUTECH CORPORATION

Business Address 100 W. KIRBY ST, #101, DETROIT, MI 48202

Ward/Item # \_\_\_\_\_

F.I.D. NO. 38-3307011

City Personal Property I.D. # 02990810-25

Owner(s) Name RAM KANCHARLA

Owner(s) SS# 336-02-8386

Contact Person RAMESH TAVVA

Phone Number 248-346-0809

Fax Number 248-594-4855

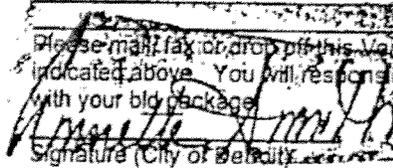
Owner(s) Home Address 2878 MEADOWOOD LN     Lease     Own  
BLOOMFIELD HILLS, MI 48302

**Please do not write below this line for department use only.**

<u>Real Property</u>	<u>Special Assessment</u>	<u>Personal Property</u>	<u>Other Receivable</u>
<input type="checkbox"/> Denied	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
<input checked="" type="checkbox"/> Approved			

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

Please mail/fax or drop off this Vendor Request Form to the Revenue Collection Unit at the address indicated above. You will be responsible for keeping the clearance and submitting a photocopy to Purchasing with your bid package.

  
Signature (City of Detroit)

AUG 20 2014  
Date

SEP 30 2014  
Expiration Date

**COVENANT OF EQUAL OPPORTUNITY**  
**(Application for Clearance – Terms Enforced After Contract is Awarded)**

I, being duly authorized representative of the COMPUTECH CORPORATION, (hereinafter "Contractor"), do hereby enter into a Covenant of Equal Opportunity (hereinafter "Covenant") with the City of Detroit, ("hereinafter" City); obligating the Contractor and all sub-contractors not to discriminate against any employee or applicant for employment, training, education, or apprenticeship connected directly or indirectly with the performance of the contract, with respect to his or her hire, promotion, job assignment, tenure, terms, conditions or privileges of employment because of race, color, religious beliefs, public benefit status, national origin, age, marital status, disability, sex, sexual orientation, or gender identity or expression.

I understand that it is my responsibility to ensure that all potential sub-contractors are reported to the City of Detroit Human Rights Department and have a current *Contract Specific* Clearance on file prior to working on any City of Detroit contract. I further understand that the City of Detroit reserves the rights to require additional information prior to, during, and at any time after the Clearance is issued.

Furthermore, I understand that this covenant is valid for the life of the contract and that a breach of this covenant shall be deemed a material breach of the contract and subject to damages in accordance with the City of Detroit Code, Ordinance No. 27-3-2, Section (e).

RFQ/PO No. \_\_\_\_\_

Printed Name of Contractor: COMPUTECH CORPORATION  
(Type or Print Legibly)

Contractor Address: 100 W. KIRBY ST, #101, MI, 48202  
(City) (State) (Zip)

Contractor Phone/E-mail: 248-346-0809 / RAMESH.TAVVA@COMPUTECHCORP.COM  
(Phone) (E-mail)

Printed Name & Title of Authorized Representative: RAMESH TAVVA, MANAGER OPERATIONS

Signature of Authorized Representative: *Ramesh Tavva*

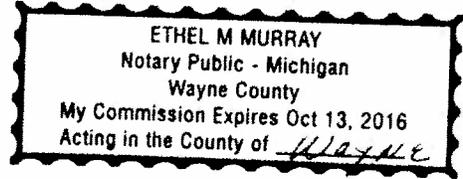
Date: 6/30/2014

\*\*\* This document MUST be notarized \*\*\*

Signature of Notary: *Ethel Murray*

Printed Name of Seal of Notary: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_



**For Office Use Only:**

Cov. Rec'd: 7/1/14 in \_\_\_\_\_ Department Name: Info. Tech. Svcs.

Accepted by: *[Signature]*  Rejected by: \_\_\_\_\_

Please email or fax Covenant and EOC to Director of Human Rights Department 1240 CAYMC at HumanRightsCL@detroitmi.gov or fax (313) 224-3434



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
8/18/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> CONRAD AGENCY 8518 CANTON CENTER CANTON, MI 48187	<b>CONTACT NAME:</b> CAROLYN STEPHENS <b>PHONE (A/C, No., Ext):</b> 734-416-8280 <b>E-MAIL ADDRESS:</b> conradin@concentric.net <b>FAX (A/C, No.):</b> 734-416-8287
	<b>INSURER(S) AFFORDING COVERAGE</b>
<b>INSURED</b> COMPUTECH CORP & CES USA INC 101 W KIRBY ST SUITE 101 DETROIT MI 48202	<b>INSURER A:</b> THE HARTFORD
	<b>INSURER B:</b>
	<b>INSURER C:</b>
	<b>INSURER D:</b>
	<b>INSURER E:</b>
	<b>INSURER F:</b>

**COVERAGES**                      **CERTIFICATE NUMBER:**                      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS

INSR LTR	TYPE OF INSURANCE	ADD'L SUBR INSR: WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
X	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	X	35UUNJE0081	9-5-13	9-5-14	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$200,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COM/OP AGG \$2,000,000 \$
X	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS <input checked="" type="checkbox"/>	X	35UUNJE0081	9-5-13	9-5-14	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
X	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		35RHUVY7345	9-5-13	9-5-14	EACH OCCURRENCE \$10,000,000 AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y N/A	35WEBM5875	9-5-13	9-5-14	<input checked="" type="checkbox"/> WC STATUTORY LIMITS   <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
A	3RD PARTY CRIME BOND		00TP0255865	2-24-14	2-14-15	\$5,000,000
A	EMPLOYMENT PRACTICES		00KB0237612-13	9-5-13	9-5-14	\$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
City of Detroit is listed as an additional insured on the Liability policies per written contract.

<b>CERTIFICATE HOLDER</b> City of Detroit 2 Woodward Ave Suite 1008 Detroit, MI 48226 Finance Dept- Purchasing Division	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
--	--



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
8/18/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Ralph C. Wilson Agency, Inc 26026 Telegraph Suite 100 Box 5069 Southfield MI 48034	<b>CONTACT NAME:</b> Donna Zielonka, CISR	
	<b>PHONE (A/C No. Ext):</b> (248) 355-1414	<b>FAX (A/C No.):</b> (248) 304-0877
<b>E-MAIL ADDRESS:</b> donnaz@rcwa.net		
<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
<b>INSURER A:</b> Lloyd's of London Underwriters		
<b>INSURER B:</b> Chubb Insurance Company		
<b>INSURER C:</b>		
<b>INSURER D:</b>		
<b>INSURER E:</b>		
<b>INSURER F:</b>		

**COVERAGES**                      **CERTIFICATE NUMBER:** 13/14                      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			ME0133467313	3/29/2013	9/5/2014	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$
	<input checked="" type="checkbox"/> Medical Professional Liability						PERSONAL & ADV INJURY \$
	GENL AGGREGATE LIMIT APPLIES PER						GENERAL AGGREGATE \$ 3,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COM/PROP AGG \$
							Deductible \$ 1,000
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> OCCUR					AGGREGATE \$
		<input type="checkbox"/> CLAIMS-MADE					\$
		DED	RETENTION \$				\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATU-TORY LIMITS
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		Y/N				OTH-ER
	If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				E L EACH ACCIDENT \$
							E L DISEASE - EA EMPLOYEE \$
							E L DISEASE - POLICY LIMIT \$
B	Professional Liability			36000733	9/5/2013	9/5/2014	\$5,000,000 Limit/\$5,000,000 Aggregate \$50,000 Deductible

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

<b>CERTIFICATE HOLDER</b>  City of Detroit Attn: Janice Evans Finance Accts. Payable, Rm. 642 CAYMC, 2 Woodward Avenue Detroit, MI 48226	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE  Steve Vannelli/SARAHM





Applicant:

Last Name	First Name	Middle Initial
-----------	------------	----------------

**Certain Candidate and Employment Terms:**

I certify that the information on *this* application and on my resume is true and complete to the best of my knowledge. If I am employed by Computech Corporation ("COMPUTECH") I understand that any false or misleading information I give in my application may result in discharge. I also give my permission to COMPUTECH and its agents to make any necessary inquiries on my personal or employment history and other related matters to make an employment decision. COMPUTECH recognizes my right to end my employment for any reason. I understand that COMPUTECH also has that right and may end my employment at will, with or without cause. I agree that during my employment with COMPUTECH I will not engage in a competing business. This agreement supersedes any prior oral or written agreement. Any subsequent agreement must be in writing and signed by COMPUTECH's Chairman, President, or Vice President/Operations. (Only COMPUTECH's Chairman may make an adjustment to the "employment at will" section.)

Further:

- CONFIDENTIAL INFORMATION AND MATERIALS.** I agree that all confidential information and materials, as defined below, are COMPUTECH's exclusive confidential property and trade secrets. I further agree that COMPUTECH will disclose confidential information and materials to me only because of my employment and to help me perform my job duties. "Confidential information and materials" is all information that belongs to or is used by COMPUTECH or COMPUTECH's customers relating to internal operations, procedures and policies, personnel information, customer lists and contracts, employee lists, technology and software information, programs, costs, marketing plans, computer programs, computer passwords, computer systems, inventions, and all trade secrets. I acknowledge that COMPUTECH gives me the right to use the confidential information and materials listed above to perform my job duties only while I am an employee at COMPUTECH. I will not, either during or after my employment with COMPUTECH, disclose any *confidential* information or materials to any person, company or organization for any reason unless expressly permitted by COMPUTECH. I further agree that I will not use confidential information or materials except for COMPUTECH business. I agree not to use my employment with COMPUTECH to establish personal business relationships or contacts with customers which may be used to solicit and contact future business contrary to the agreement upon the termination of my employment with COMPUTECH. Also, I agree that I will immediately return all COMPUTECH business property and confidential information and materials if my employment with COMPUTECH ends.
- EQUITABLE REMEDIES.** The services I perform and the confidential information COMPUTECH discloses to me are unique and special. If I break the agreements in Section 1 above, I will cause COMPUTECH injury and damage which will be difficult to quantify. Consequently, COMPUTECH and I agree that, if necessary, COMPUTECH may take legal action to prevent me from breaking my agreement and to ensure that Section 1 above is enforced.

I understand that by providing this Information, accepting employment (if offered a position), and starting employment, I demonstrate my acceptance of the terms of employment with COMPUTECH, including those items described in greater detail in COMPUTECH's Employee Handbook.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date



**Computech**  
Corporation

100 W Kirby St, Suite 101  
Detroit MI 48202  
(248) 594-6500 Fax: (248) 833-1145

**GENERAL INFORMATION**

Applicant Full Name: \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Business Phone: ( ) \_\_\_\_\_

Personal Email: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

May we contact you at work?  Yes  No

Current Salary (hourly): \_\_\_\_\_ Are you available to work overtime? \_\_\_\_\_

Years of experience: \_\_\_\_\_ Title \_\_\_\_\_

Does your job involve travel? \_\_\_\_\_ Areas and duration: \_\_\_\_\_

How far are you commuting? \_\_\_\_\_

Have you applied to or been employed by COMPUTECH or its affiliate?  Yes  No

If yes, when and where? \_\_\_\_\_

Upon an offer, can you provide proof of ability to work in the United States?  US Citizen  Permanent Resident  Work Permit



**Computech**  
Corporation

100 W Kirby St, Suite 101  
Detroit MI 48202  
(248) 594-6500 Fax: (248) 833-1145

**EDUCATION**

	HIGH SCHOOL	TRADE/TECHNICAL	COLLEGE/UNIVERSITY	GRADUATE/OTHER
School/Address				
Dates of Attendance	N/A	From: To:	From: To:	From: To:
Diploma/Degree				
Major/Minor				

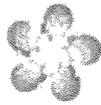
**EMPLOYMENT HISTORY FOR THE PAST SEVEN (7) YEARS:**

From: \_\_\_\_\_ to: \_\_\_\_\_ Most Recent Company: \_\_\_\_\_  
 Mgr/Supr: \_\_\_\_\_  
 Starting salary: \_\_\_\_\_ Ending salary: \_\_\_\_\_  
 Business phone: ( ) \_\_\_\_\_ Home phone: ( ) \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

From: \_\_\_\_\_ to: \_\_\_\_\_ Most Recent Company: \_\_\_\_\_  
 Mgr/Supr: \_\_\_\_\_  
 Starting salary: \_\_\_\_\_ Ending salary: \_\_\_\_\_  
 Business phone: ( ) \_\_\_\_\_ Home phone: ( ) \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_

From: \_\_\_\_\_ to: \_\_\_\_\_ Most Recent Company: \_\_\_\_\_  
 Mgr/Supr: \_\_\_\_\_  
 Starting salary: \_\_\_\_\_ Ending salary: \_\_\_\_\_  
 Business phone: ( ) \_\_\_\_\_ Home phone: ( ) \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_

From: \_\_\_\_\_ to: \_\_\_\_\_ Most Recent Company: \_\_\_\_\_  
 Mgr/Supr: \_\_\_\_\_  
 Starting salary: \_\_\_\_\_ Ending salary: \_\_\_\_\_  
 Business phone: ( ) \_\_\_\_\_ Home phone: ( ) \_\_\_\_\_



**Computech**  
Corporation

100 W Kirby St, Suite 101  
Detroit MI 48202  
(248) 594-6500 Fax: (248) 833-1145

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

From: \_\_\_\_\_ to: \_\_\_\_\_ Most Recent Company: \_\_\_\_\_

Mgr/Supr: \_\_\_\_\_

Starting salary: \_\_\_\_\_ Ending salary: \_\_\_\_\_

Business phone: ( ) \_\_\_\_\_ Home phone: ( ) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

From: \_\_\_\_\_ to: \_\_\_\_\_ Most Recent Company: \_\_\_\_\_

Mgr/Supr: \_\_\_\_\_

Starting salary: \_\_\_\_\_ Ending salary: \_\_\_\_\_

Business phone: ( ) \_\_\_\_\_ Home phone: ( ) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

*I authorize COMPUTECH to obtain information concerning me from former employers and any other persons I have given as references and I release all concerned from any liability in connection therewith. Signature:*

\_\_\_\_\_

**Peers as References:**

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

Years known: \_\_\_\_\_ Business phone: \_\_\_\_\_ Home

phone: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

\_\_\_\_\_ Zip: \_\_\_\_\_

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

Years known: \_\_\_\_\_ Business phone: \_\_\_\_\_ Home

phone: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

\_\_\_\_\_ Zip: \_\_\_\_\_

**CITY OF DETROIT**  
**SLAVERY ERA RECORDS AND INSURANCE DISCLOSURE AFFIDAVIT**

1. Name of Contractor: Computech Corporation
2. Address of Contractor: 100 W. Kirby St.  
Suite 101  
Detroit, MI 48202
3. Name of Predecessor Entities (if any): N/A
4. Prior Affidavit submission?  No  Yes, on: 05/19/2014  
(Date of prior submission)

If "No", complete Items 5 and 6.

If "Yes", list date of prior submission above, go to Item 6 and execute this Affidavit.

5.  Contractor was established in \_\_\_\_\_ (year) and did not exist during the slavery era in the United States, is not a successor in interest to any entity that existed during such time, and therefore has no relevant records to search, or any pertinent information to disclose.

Contractor has searched their records and those of any predecessor entity, and has found no records that they or any predecessor(s) made any investments in, or derived profits from the slave industry or from slave holder insurance policies.

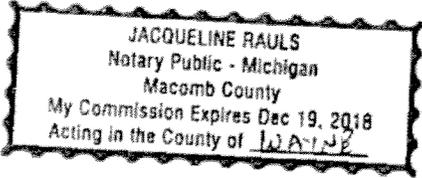
Contractor has found records that they or their predecessor(s) made investments in, or derived profits from, the slave industry or slave holder insurance policies. The nature of the investment, profits, or insurance policies, including the names of any slaves or slave holders, is disclosed in the attached document(s).

6. I declare that the representations made in this Affidavit are accurate to the best of my knowledge and are based upon a diligent search of records in the Contractor's possession or knowledge. All documentation attached to this Affidavit reflects full disclosure of all records that are required to be disclosed to the City of Detroit. I also acknowledge that any failure to conduct a diligent search, or to make a full and complete disclosure, shall render this contract voidable by the City of Detroit.

Ramesh Tavva (Printed Name) Manager Operations (Title)

[Signature] (Signature) 08/19/2014 (Date)

Subscribed and sworn to before me  
this 19th day of August 2014  
[Signature]  
Notary Public, Washtenaw County, Michigan  
My Commission expires: 12/19/2018



CITY OF DETROIT  
AMENDMENT AGREEMENT NO. 4  
TO  
CONTRACT NO. 2821496

**THIS AMENDMENT AGREEMENT NO. 4** is entered into by and between the City of Detroit, a Michigan municipal corporation, acting by and through its Information Technology Services Department ("City"), and CompuTech Corporation, a Michigan Corporation, with its principal place of business located at 100 West Kirby, Suite #101, Detroit, Michigan 48202 ("Contractor").

**WHEREAS**, the *City* has engaged the *Contractor* to provide certain services ("*Services*") to the *City*; and

**WHEREAS**, the *City* and the *Contractor* have entered into a *Contract* reflecting the terms and conditions governing the subject engagement; and

**WHEREAS**, Article 17 of the *Contract* permits the parties to amend the *Contract* by mutual agreement; and

**WHEREAS**, it is the mutual desire of the parties to enter into this *Amendment* to amend the *Contract* to extend the term of the *Contract* and to provide increased compensation to pay for *Services* performed pursuant to the extension of the *Contract*.

**NOW THEREFORE**, in consideration of the foregoing, and the benefits to accrue to the parties and to the public from this *Amendment*, the parties agree that this *Contract* is amended as follows:

**I. PURPOSE OF AMENDMENT 4**

**1.01** The purpose of this Amendment is to extend the contract period to September 30, 2014.

**IV. EFFECT OF AMENDED TERMS**  
**ON THE REMAINING PROVISIONS**  
**OF THE CONTRACT**

**4.01** With the exception of the provisions of the *Contract* specifically contained in this *Amendment*, all other terms, conditions and covenants contained in the *Contract* shall remain in full force and effect and as set forth in the *Contract*.

**V. PAYMENT AUTHORIZATION**

**5.01** The Finance Director of the *City* shall not authorize any payment pursuant to this Amendment until the Amendment has been approved by resolution of the *Detroit City Council*, all appropriate departmental approvals have been obtained and this *Amendment* has been executed by the Purchasing Director for the *City*.

\*\*\*\*\*

SIGNATURE PAGE

IN WITNESS WHEREOF, the City and the Contractor, by and through their duly authorized officers and representatives, have executed this Contract as of the dates of their respective signatures:

WITNESSES:

1. Kelly Weatherwax BY: \_\_\_\_\_  
(Signature)

Kelly Weatherwax  
(Print Name)

2. Albert Fields  
(Signature)

Albert Fields  
(Print Name)

CONTRACTOR:

BY: \_\_\_\_\_  
(Signature)

RAMESH GAVVA  
(Print Name)

ITS: \_\_\_\_\_  
(Title)

CITY OF DETROIT

INFORMATION TECHNOLOGY SERVICES DEPARTMENT

WITNESSES:

1. Larence Evans  
(Signature)

Larence Evans  
(Print Name)

2. Monique Ellis  
(Signature)

Monique Ellis  
(Print Name)

BY: \_\_\_\_\_  
(Signature)

Charles Dodd  
(Print Name)

ITS: \_\_\_\_\_  
(Title)

Approved by City Council on:

THIS CONTRACT WAS APPROVED BY LAW DEPARTMENT BY THE CITY COUNCIL ON PURSUANT TO §6-406 OF THE CHARTER OF THE CITY OF DETROIT

Bojice Jackson  
Purchasing Director

Date

\_\_\_\_\_  
Corporation Counsel

SEP 24 2014

8/6/14  
Date

THIS CONTRACT IS NOT VALID OR AUTHORIZED UNTIL APPROVED BY RESOLUTION OF THE CITY COUNCIL AND SIGNED BY THE PURCHASING DIRECTOR.

CITY ACKNOWLEDGMENT

STATE OF Michigan )  
 )SS.  
COUNTY OF Wayne )

The foregoing contract was acknowledged before me the 1 day of July 2014,  
by Charles Dodd

(name of person who signed the contract)

the Director

(title of person who signed the contract as it appears on the contract)

of Information Technology Services Department

(complete name of City department)

on behalf of the City.

Notary Public, \_\_\_\_\_ County,  
State of \_\_\_\_\_  
My commission \_\_\_\_\_  
expires: \_\_\_\_\_

*Sarah M. McCrary*  
SARAH M. MCCRARY  
Notary Public, State of Michigan  
County of Wayne  
My Commission Expires Jan. 12, 2018  
Acting in the County of Wayne

**CORPORATE ACKNOWLEDGMENT**

STATE OF MICHIGAN )

)SS.

COUNTY OF WAYNE )

The foregoing contract was acknowledged before me the 30<sup>th</sup> day of JUNE, 2014,

by RAMESH TAVVA  \_\_\_\_\_,

(name of person who signed the contract)

the MANAGER OPERATIONS \_\_\_\_\_,

(title of person who signed the contract as it appears on the contract)

of COMPUTECH CORPORATION \_\_\_\_\_,

(complete name of the corporation)

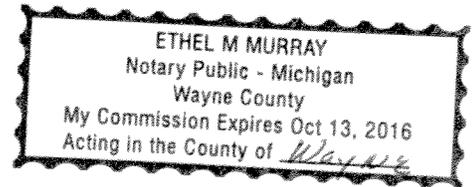
on behalf of the Corporation.



Notary Public, County of Wayne

State of Michigan

My commission expires: Oct 13, 2016



PLEASE NOTE THAT THE PERSON WHO SIGNS THE CONTRACT ON BEHALF OF YOUR ENTITY MUST BE ONE OF THE INDIVIDUALS LISTED BELOW AS A PERSON AUTHORIZED TO EXECUTE CONTRACTS IN THE NAME OF AND ON BEHALF OF THE ENTITY.

**RESOLUTION OF CORPORATE AUTHORITY**

, Corporate Secretary of

RAMESH TAVVA  
(name of corporate secretary)

COMPUTECH CORPORATION, a DELAWARE  
(complete name of corporation) (State of Incorporation)

corporation (the "Company"), **DO HEREBY CERTIFY** that the (non-profit or for profit) following is a true and correct excerpt from the minutes of the meeting of the Board of Directors duly called and held on

01/06/2014, and that the same is now in full force and effect:  
(date of meeting)

"**RESOLVED**, that the Chairman, the President, each Vice President, the Treasurer, and the Secretary and each of them, is authorized to execute and deliver, in the name of and on behalf of the Company and under its corporate seal or otherwise, any agreement or other instrument or document ("Contract") in connection with any matter or transaction that shall have been duly approved; and the execution and delivery of any Contract by any of the aforementioned officers shall be conclusive evidence of such approval."

FURTHER, I CERTIFY that

RAM KANCHARLA  
RAMESH TAVVA

is Chairman,  
is President,  
is (are) Vice President(s),  
is Treasurer,  
is Secretary,  
is Executive Director, and  
is MANAGER OPERATIONS

FURTHER, I CERTIFY that any of the aforementioned officers or employees of the Company are authorized to execute and commit the company to the conditions, obligations, stipulations and undertaking contained in the contract number **(2821496)** between the City and the above-referenced corporation and that all necessary corporate approvals have been obtained in relationship thereto.

IN WITNESS THEREOF, I have set my hand this 30<sup>th</sup> day of JUNE, 2014.



Corporation Secretary

CORPORATE SEAL

(if any)