



Legislation Text

File #: 23-0156, Version: 1

Department: Purchasing

Department Head/Elected Official: DeWight Dopslauf

Regular or Supplemental RCA: Regular RCA

Type of Request: Contract - Award

Project ID (if applicable): N/A

Vendor/Entity Legal Name (if applicable): Equalis Group, LLC

MWDBE Contracted Goal (if applicable): N/A

MWDBE Current Participation (if applicable): N/A

Justification for 0% MWDBE Participation Goal: N/A - Goal not applicable to request

Request Summary (Agenda Caption):

Request that the County Judge execute an interlocal agreement with Equalis Group, LLC for participation in the Cooperative Purchasing Program administered by Equalis Group, LLC and its affiliates and subsidiaries for Harris County at no cost to the county.

Background and Discussion:

Cooperative Purchasing Services for Utilization of Contracts Established by Equalis Group, LLC

Expected Impact: N/A

Alternative Options: N/A

Alignment with Goal(s):

- Justice and Safety
- Economic Opportunity
- Housing
- Public Health
- Transportation
- Flooding
- Environment
- Governance and Customer Service

Prior Court Action (if any): N/A

| Date | Agenda Item # | Action Taken |
|------|---------------|--------------|
|------|---------------|--------------|

| | | |
|--|--|--|
| | | |
|--|--|--|

Location:

Address (if applicable): 9111 Eastex (Annex 60)

Precinct(s): Precinct 2

| Fiscal and Personnel Summary | | | |
|--|-------|-------|------------|
| Service Name | | | |
| | FY 23 | FY 24 | Next 3 FYs |
| Incremental Expenditures (do NOT write values in thousands or millions) | | | |
| Labor Expenditures | \$ | \$ | \$ |
| Non-Labor Expenditures | \$ | \$ | \$ |
| Total Incremental Expenditures | \$ | \$ | \$ |
| Funding Sources (do NOT write values in thousands or millions) | | | |
| Existing Budget | | | |
| Choose an item. | \$ | \$ | \$ |
| Choose an item. | \$ | \$ | \$ |
| Choose an item. | \$ | \$ | \$ |
| Total Current Budget | \$ | \$ | \$ |
| Additional Budget Requested | | | |
| Choose an item. | \$ | \$ | \$ |
| Choose an item. | \$ | \$ | \$ |
| Choose an item. | \$ | \$ | \$ |
| Total Additional Budget Requested | \$ | \$ | \$ |
| Total Funding Sources | \$ | \$ | \$ |
| Personnel (Fill out section only if requesting new PCNs) | | | |
| Current Position Count for Service | - | - | - |
| Additional Positions Requested | - | - | - |
| Total Personnel | - | - | - |

Anticipated Court Date: 1/10/23

Anticipated Implementation Date (if different from Court date):

Emergency/Disaster Recovery Note: Not an emergency, disaster, or COVID-19 related item

Contact(s) name, title, department: Melissa McCord, Sr. Contracts Administrator/Supervisor, Purchasing

Attachments (if applicable): Letter, Agreement