

AFFIDAVIT

STATE OF Missouri)
) SS.
COUNTY OF Clay)

Metro Public Safety and Investigations of the city of Gladstone
County of Clay State of Missouri being duly sworn on her or his oath, deposes and says,

1. That I am the Director (Title of Affiant) of Metro Public Safety and Investigations (Name of Bidder) and have been authorized by said Bidder to make this Affidavit upon my best information and belief, after reasonable inquiry as to the representations herein.
2. No Officer, Agent or Employee of Jackson County, Missouri is financially interested directly or indirectly what Bidder is offering to sell to the County pursuant to this Invitation (though no representation is made regarding potential ownership of publicly traded stock of bidder).
3. If Bidder were awarded any contract, job, work or service for Jackson County, Missouri, no Officer, Agent or Employee of the County would be interested in or receive any benefit from the profit or emolument of such.
4. Either Bidder is duly listed and assessed on the tax rolls of Jackson County, Missouri and is not delinquent in the payment of any taxes due to the County or Bidder did not have on December 31, 2023, any property subject to taxation by the County and if bidder is duly listed and assessed on the tax rolls of Jackson County, Missouri, bidder agrees to permit an audit of its records, if requested by the Jackson County Director of Assessment, as they relate to the assessment of Business Personal Property.
5. Bidder has not participated in collusion or committed any act in restraint of trade, directly or indirectly, which bears upon anyone's response or lack of response to the Invitation.
6. Bidder certifies and warrants that Bidder or Bidder's firm/organization is not listed on the General Services Administration's Report of Debarred and/or Suspended Parties, or the State of Missouri and City of Kansas City, Missouri Debarment List.
7. Bidder certifies and affirms its enrollment and participation in a federal work authorization program with respect to the employees working in connection with the contracted services.
8. Bidder certifies and affirms that it does not knowingly employ any person who is an unauthorized alien in connection with the contracted services.

Metro Public Safety and Investigations LLC (Name of Bidder)

By: [Signature] (Signature of Affiant)

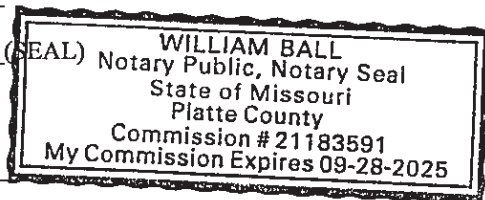
Director (Title of Affiant)

Subscribed and sworn to before me this 10 day of Aug, 2021

NOTARY PUBLIC in and for the County of Platte

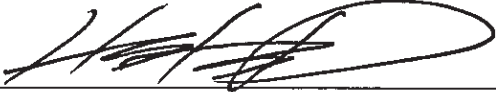
State of Missouri

My Commission Expires: 9/08/25



ACKNOWLEDGMENT OF RECEIPT OF ADDENDA

The undersigned acknowledges receipt of Addenda through and including numbers 24-057 and that this Bid is submitted in accordance with information, instructions, and stipulations set forth therein.



Signature of Respondent

8-12-24

Date

Metro Public Safety and Investigations LLC
Company Name

6060 N Oak Trafficway
Address

Gladstone, MO 64118
City, State, and Zip

8-12-24

Phone

EXHIBIT F

**BIDDER'S EXCEPTIONS
TO
SPECIFICATIONS
OF
JACKSON COUNTY, MISSOURI Invitation to Bid No. 24-057**

Respondent's attention is directed to Paragraph 4 of the General Conditions of this Invitation to Bid. **READ THIS PARAGRAPH CAREFULLY.**

The following exceptions to the Specifications of Invitation to Bid No.24-057are requested by the undersigned Respondent: (Use additional pages as necessary.)

REFERENCE PARA # & PAGE #	EXCEPTION REQUESTED
NA	NA

Name of Firm: Metro Public Safety and Investigations LLC

Signature of Bidder: 



OFFICE OF THE COUNTY AUDITOR
COMPLIANCE REVIEW OFFICE
 415 E 12TH STREET, 2ND FLOOR
 KANSAS CITY, MISSOURI 64106

(816) 881-3302
 FAX (816) 881-3340
 CRO@JACKSONGOV.ORG
 WWW.JACKSONGOV.ORG/AUDITOR

JACKSON COUNTY, MISSOURI
CONTRACTOR UTILIZATION PLAN

Bid/RFP/RFQ Number: 24-057
 Bid/RFP/RFQ Title: Security Officer Services
 Contracting Department: Various Departments
 Respondent: _____

I, Houston T. DeFoe, of lawful age and upon my oath state as follows:

- This Affidavit is made for the purpose of complying with the provisions of the MBE/WBE/VBE submittal requirements on the above Bid/RFP/RFQ and the MBE/WBE/VBE Program and is given on behalf of the Respondent listed above. It sets out the Respondent's plan to utilize MBE and/or WBE and/or VBE prime and subcontractors on the awarded contract.

The goals set by Jackson County, Missouri are:

9.5 % MBE _____ % WBE _____ % VBE

- Bidder stipulates that it will utilize a minimum of the following percentages of MBE/WBE/VBE participation in the above bid:

0 % MBE 0 % WBE 0 % VBE

- The following are the MBE/WBE/VBE Contractors to be utilized on the above-named solicitation. Respondent maintains that it either has a formal contract or a conditional contract contingent upon award.

Please note:

- If Bidder is a certified MBE, WBE, or VBE firm, it may list itself in the appropriate area below.
- No contractor may be listed under multiple categories below regardless of certifications.

INTERNAL USE ONLY	
CUP RECEIVED: _____	CUP APPROVED: _____
GFE RECEIVED: _____	GFE APPROVED: _____
CUP REVISED: _____	REVISION APPROVED: _____
APPROVED GOALS: _____ MBE _____ WBE _____ VBE	
RES/ORD: _____	AMT AWARDED: _____
NOTES: _____	

Jackson County, Missouri MBE/WBE/VBE Contract Form			
Contracting Department		Date	
Parks + Rec		7/11/2024	
Project Number		Project Name	
24-057		Security Officer	
Estimated Contract Value	Proposed Solicitation Date	Proposed Project Start Date	Estimated Contract End Date
\$60,000.00	7/12/2024	9/1/2024	8/31/2027

Estimated Contract Value			
Scopes of Work	Dollar Amount	# of MBE available	# of WBE available
Total Must Equal Est Contract \$	\$ -	*Add more lines if needed	

Goals: Compliance Review Office			
<input checked="" type="checkbox"/>	Goals for Project have been set at		
<input type="checkbox"/>	% MBE	9.5	0 %WBE
<input type="checkbox"/>	% VBE	0	
<input type="checkbox"/>	Goals for Project are WAIVED because contract is:		
<input type="checkbox"/>	With another governmental agency		
<input type="checkbox"/>	For Real Property		
<input type="checkbox"/>	An Emergency Contact		
<input type="checkbox"/>	For purposes of borrowing money, bonds or other notes		
<input type="checkbox"/>	Sole Source		
<input type="checkbox"/>	Insufficient in terms of MBE or WBE firms available		
Signed:	<i>Melinda Bolling</i>	Date:	7-11-24

CUP: Compliance Review Office			
To be completed after bidding, in conjunction with review of CUP submitted by contracting Department			
<input type="checkbox"/>	Proposed utilization matches goals set above		
<input type="checkbox"/>	Proposed utilization differs from goals. This modification is acceptable		
	MBE/WBE/VBE participation on this project will be:		
	% MBE		% WBE
	% VBE		
<input type="checkbox"/>	Proposed utilization differs from goals. Modification is NOT acceptable		
	Good faith effort documentation will be requested of contractor.		
Signed:		Date:	



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Add Additional Pages as Necessary

ACKNOWLEDGMENT

Respondent acknowledges that it is responsible for considering the effect that any change order and/or amendments changing the total contract amount may have on its ability to meet or exceed the subcontractor participation goals.

Good Faith Effort:

Respondent further acknowledges that it is responsible for submitting a **Good Faith Effort Form** if it will be unable to meet the participation goals. A **Good Faith Effort Form** documents the efforts a respondent puts forth to achieve the MBE and/or WBE and/or VBE goals on a project. **Simply stating that goals cannot be met is not considered sufficient.**

Contractor Modification Form:

If, at any point during the life of the awarded contract, the contractor needs to substitute an approved subcontractor a **Contractor Modification Form** must be submitted to the Compliance Review Office.

Any Good Faith Effort or Contractor Modification Form must be approved by the Compliance Review Office.

*****Contact the Compliance Review Office for assistance or to request forms.*****

I hereby certify that I am authorized to make this Affidavit on behalf of the Respondent named below and who shall abide by the terms set forth herein. I acknowledge that the assigned values determined by this CUP shall be enforceable under the contract terms and conditions.

Respondent Primary Contact: Houston T. DeFoe

Title: Director Email: houston@mpsiKC.com

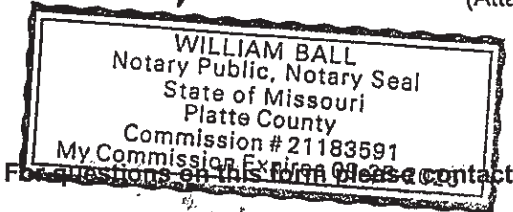
Date: 8-12-24 Phone: 816-809-9600

Subscribed and sworn to before me this 12th day of Aug, 2024

My Commission Expires 9/24/25

William Ball

Notary Public
(Attach corporate seal if applicable)



Compliance Review Office
816-881-3302
CRO@jacksongov.org