

BROKEN ARROW PUBLIC SCHOOLS

Educating Today Leading Tomorrow



Contract Committee Review Request  
MUST BE COMPLETED IN FULL

Date: 5/19/2022

Contract/Agreement Vendor: ASAP Systems BarCloud/David Thompson

Name of Vendor & Contact Person

d\_thompson@barcloud.com

Vendor Email Address

5 year software program for custodial and instructional supplies for ordering and inventory

Describe Contract (Technology, program, consultant-prof Development, etc.)

Please use Summary below to fully explain the contract purchase, any titles, and details for the Board of Education to review.

Plant Operations Department

Reason/Audience to benefit

June 7, 2022

BOE Date

\$ 29,928.00

Amount of agreement

Person Submitting Contract/Agreement for Review: Charley Abbott

PLEASE SEND THROUGH APPROPRIATE APPROVAL ROUTING BEFORE SENDING TO BOARD CLERK

Principal &/or Director or Administrator:

Does this Contract/Agreement utilize technology? YES/NO  
If yes, Technology Admin:

Leadership Team Member: Larry Shackelford

Funding Source: Bond Fund PO # 2022-39-20  
Fund/Project OCAS Coding

Consent

Action

5 year contract for software for custodial and instructional supplies. Will be used by sites for ordering supplies and for plant operations to keep up with inventory and reports.

Summary

This area must be complete with full explanation of contract

The Contract/Agreement should be received at least 2 weeks prior to a Board Meeting to ensure placement on the Agenda. The Contract Committee meets most Tuesdays at 8:00a.m. All Contracts/Agreements, regardless the amount, must be first approved by the Contract Committee and then presented to the Board of Education for approval and signature. The item will be placed on Electronic School Board for the board agenda by Janet Brown. By following this process, the liability of entering into an agreement is placed with the district rather than an individual.

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	<p><b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>TOUMA INC</b></p> <p><b>2</b> Business name/disregarded entity name, if different from above <b>ASAP SYSTEMS</b></p> <p><b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC    <input checked="" type="checkbox"/> C Corporation    <input type="checkbox"/> S Corporation    <input type="checkbox"/> Partnership    <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p><small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small></p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p><b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p>
	<p><b>5</b> Address (number, street, and apt. or suite no.) See instructions. <b>355 PIERCY ROAD</b></p> <p><b>6</b> City, state, and ZIP code <b>SAN JOSE, CA 95138</b></p> <p><b>7</b> List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p>

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Social security number**

			-			-				
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or

**Employer identification number**

3	2	-	0	0	5	1	0	0	6
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Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

**Sign Here**      Signature of U.S. person ▶      Date ▶ **9-9-2020**

**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

**Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*



Barcode Inventory Systems  
Affordable and Customized to Your Business!

Company: Broken Arrow Public Schools	Quote #: 220422DT1
Attn: Kristine Hembry	Date: 5/19/2022
Phone: 918-259-4562	Page: 1 of 2
Fax:	Salesperson: David Thompson
Email: <a href="mailto:khembry@baschools.org">khembry@baschools.org</a>	Phone: (408) 906-8701
	Fax: (408) 227-2721
	Email: <a href="mailto:dthompson@asapsystems.com">dthompson@asapsystems.com</a>

## ASAP Systems BarCloud Stock Professional Quote

Line Stock #	Description	Qty	Price	Extended	Notes
<b>Recurring Fees</b>					
<u>Software &amp; Licensing</u>					
1	BCS-B-A BarCloud Stock Professional Annual Subscription	3	\$ 1,740.00	\$ 5,220.00	Per concurrent user
2	BCAM-B-A Smart Device License (per device)	5	\$ 180.00	\$ 900.00	For iPad/iPhone/Android
3	B-MODSSC Stock Shopping Cart - First 20 Shoppers			No Cost	
5	SCADD20 Shopping Cart - Additional 20 Shoppers	5	\$ 120.00	\$ 600.00	120 Shoppers Total
<u>Support</u>					
5	BRNZASPT Bronze Annual Support	1	\$1,095.00	\$ 1,095.00	
				<b>Annual Fees:</b>	<b>\$ 7,815.00</b>

<b>One-Time Fees</b>					
<u>Professional Services</u>					
6	PAATRAN Online Training	3	\$ 199.00	\$ 597.00	3 Hours Total
7	PAATRAN Best Practice Training and Q&A			No Cost	30 Minutes Total
				<b>One-Time Fees:</b>	<b>\$ 597.00</b>

**Quote Summary**  
 First Year Subscription + One-Time Fees + Total Savings      **Quote Total: \$ 8,412.00 USD**

<u>Optional Incentives</u>			<u>Total Multi-Year Savings</u>	
Option 1	Subscribe for 2 years and get the 2nd year at a 20% discount*	Two Years Total:	\$ 14,883.00	<b>\$1,344.00</b>
Option 2	Subscribe for 3 years and get the 2nd year at a 25% discount, and the 3rd year at a 35% discount*	Three Years Total:	\$ 20,010.00	<b>\$4,032.00</b>
Option 3	Subscribe for 5 years and get the 2nd year at a 25% discount, the 3rd Year at a 35% discount, the 4th year at a 40% discount, and the 5th year at a 45% discount*	Five Years Total:	\$ 29,928.00	<b>\$9,744.00</b>
(Your Best Available Option)				
All Multi Years Incentives must be paid in full up front.				

I \_\_\_\_\_, hereby opt to purchase the checked options below and I authorize ASAP Systems to bill me for the above total. My signature therefore represents a formal purchase order from our company.

- One Year Subscription
- Two Year Subscription including the Optional Incentives
- Three Year Subscription including the Optional Incentives
- Five Year Subscription including the Optional Incentives

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

**Business Information (Please Fill Out Upon Sign Up)**

**Billing Address:**

**Shipping Address (If Applicable):**

Street: \_\_\_\_\_

Street: \_\_\_\_\_

City/Town: \_\_\_\_\_

City/Town: \_\_\_\_\_

State: \_\_\_\_\_

State: \_\_\_\_\_

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

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

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**This quote expires in 30 days. Hardware pricing is subject to change.**

**Price does not include sales tax, shipping, or handling if applicable.**

**Additional customization hourly charges may be applied to interface with non-standard ASAP Systems components such as scanners, printers, labels, etc. and applications such as enterprise software, databases, etc.**

**\*Training is scheduled in one hour increments. No less than 30 minutes are to be used at any given time.**

**\*\*Data Transfer is optional and is limited to the import of the common files.**

**It does not include the export from the customer's current system and cannot be requested during a regular training session.**

**Assistance and Implementation is scheduled according to customer needs and billing will be added upon completion.**

**Support Included in Your Subscription**

**\*\*\* Bronze Annual Support**

Wiki included

4 emails and/or live chats

2 telephone and remote support incidents for one year during business hours

Maximum 24 hour response time

Complimentary Support Tickets

**ASAP Systems**    [www.asapsystems.com](http://www.asapsystems.com)  
355 Piercy Rd    Phone (408) 227-2720  
San Jose, CA 95138    Fax (408) 227-2721

Thank you for this opportunity to quote:

*David Thompson*

David Thompson