



FRANKLIN COUNTY
PURCHASING DEPARTMENT
REQUEST FOR PROPOSAL (RFP) COVER PAGE

RFP NO: 201823

TITLE: Prosecution Services

Schedule & Deadlines:

October 24, 2018	Release Date
October 24, 31, November 7, 2018	Advertising Period
November 9, 2018, 8:00 AM	Deadline for Submitting Questions
November 13, 2018 9:00 AM	Deadline to post Addendum
November 16, 2018 at 10:00 AM	Deadline to Submit Proposal
TBD	Short list

RFP responses must be received no later than "Deadline to Submit Proposal"

November 16, 2018 at 10:00 AM

Kathy Hardeman, Purchasing Agent

Phone: 636-584-6274

Ann Struttman, Assistant Purchasing Agent

Email: purchasing@franklinmo.net

Vendors are encouraged to register their business with Franklin County and may do so by selecting the "Vendor Registry" link on the County Web Site home page www.franklinmo.org.

Submittal Instructions: Print this Packet in its entirety and complete all pages per instructions. Print the LABEL found in Attachment 1 of this packet and attach to the front of your envelope.

PROPOSAL SUBMISSION CHECKLIST

_____ I have reviewed the solicitation schedule and deadlines, located on the RFP cover page

_____ I have read ALL Terms and Conditions and Proposal documents closely

Located at <https://www.franklinmo.org>

THE ITEMS LISTED BELOW ARE THE REQUIRED DOCUMENTATION FOR SUBMITTING A PROPOSAL

USE THESE FORMS ONLY

_____ Solicitation Cover page

_____ I have one original and four copies that are labeled accordingly

_____ Contractual Terms and Conditions Acknowledgement (page 5)

_____ Affidavit for Work Authorization is completed and Notarized (page 6 & 7)

If you have already submitted E-Verify information through Vendor Registry, you do not have to resubmit with response. Just reference Vendor Registry.

_____ Current, signed W-9 is included in solicitation packet (page 8)

If you have already submitted W-9 information through Vendor Registry, you do not have to resubmit with response. Just reference Vendor Registry.

_____ Completed Affidavit of Paid Property Taxes and Notarized (page 9)

_____ Completed Vendor Information Form (page 10)

_____ Envelope is sealed and label attached (page 11)

RFP 2018-23 PROSECUTION SERVICES

The County of Franklin, Missouri invites interested and well-qualified individual attorneys and law firms to submit written proposals to provide prosecution services in the County Municipal Court.

SCOPE OF SERVICES:

The services that are the subject of this Request for Proposals (RFP) fall into the category of prosecution in County Municipal Court of civil and traffic infractions. Proposers may be individuals, or law firms. The contracted services are intended to begin on or before January 1, 2019.

The prosecutor is responsible for all aspects of prosecution in the County Municipal Court, including but not limited to the prosecution of trials, both jury and bench, pre-trial motions, and certain contested hearings, as described below:

1. Makes filing decisions on cases, with input from County Sheriff's Department;
2. Advises County Sheriff's Department on trial preparation and related matters;
3. Interviews witnesses and victims of crimes and conducts discovery;
4. Advises victims regarding their rights and responsibilities;
5. Represents the County at pretrial hearings, motions, bench and jury trials, sentencing, and review hearings and appeals; and
6. Makes appropriate sentencing recommendations and decisions to the court;
7. Prepares and presents legal memoranda, subpoenas, jury instructions, and other related materials.

Currently, the County Municipal Court is a part-time court that is in session on Thursdays at 4:00 p.m. Additional appearances may be necessary to handle other matters.

MINIMUM QUALIFICATIONS:

Any attorney proposed to provide prosecution services shall be licensed in the State of Missouri. Three or more years of experience, including significant trial experience, is preferred for any attorney proposed as the prosecutor. Experience in providing the type of prosecution services described above is highly desirable.

COMPENSATION:

The County and any attorney selected for these services will enter into a professional services agreement which will address compensation. Proposals must clearly set forth the fees or fee structure (e.g., hourly rate, monthly retainer, per-case fee) to be charged for the proposed services.

SELECTION PROCESS:

All proposals will be reviewed and screened by the Purchasing Department, County Counselor and County Commission. Proposals will be evaluated by considering the proposed prosecutor's quality of experience, the strength of the approach described in the proposal, and the cost to the County. Finalists will be invited for interviews, after which the County Commission will approve a professional services agreement.

INSTRUCTIONS TO REPLY TO THIS REQUEST FOR PROPOSALS:

To reply to this RFP, please submit a proposal of no more than five pages stating the information described in the "Requested Information" section below.

REQUESTED INFORMATION:

Proposals should include the following information. Proposers may submit additional information as deemed appropriate.

1. For individual proposers, employment history since 2015. For firm proposers, legal status of firm or predecessor firms since 2015, including specialization of individual, firm, or predecessor organization.
2. The proposer's professional qualifications for providing prosecution services, including for each attorney likely to provide services:
 - A. Law School attended (including year of graduation), year of admission to Missouri State Bar, and years of practice. Must be a member in good standing of the Missouri Bar Association. Provide the attorney's Missouri Bar number.
 - B. Years of municipal or other public sector law practice or attorney specializing in municipal or other public sector law practice in a law firm or as a sole practitioner, with emphasis on experience providing prosecution services.
 - i. Describe relevant areas of knowledge and experience in Missouri, including but not limited to law related to municipal court prosecutions.
 - ii. Describe experience with motions practice relevant to prosecution services;
 - iii. Describe jury and bench trial experience.
3. The proposer's understanding of the type and level of services needed;
4. The proposer's intended approach to providing the services (including the level of County's support anticipated);
5. A statement of the proposer's understanding of the role of the Prosecutor, and his/her relationship to the court, Sheriff's department, victims, witnesses and community;
6. The proposer's philosophy in prosecuting cases where the defendant is pro se;
7. Other types of clients represented by the proposer;
8. Affiliations or clients that could cause conflicts of interest regarding County matters, if any;
9. Any pending litigation or judgments rendered against the attorneys proposed to provide services that relate in any manner to the professional activities of the attorney and/or the firm, including any pending complaints filed with the Missouri State Bar Association;
10. The proposed compensation structure for the services; and
11. Contact information for three professional references.

The County reserves the right to reject all proposals, to request additional information concerning any proposal, to accept or negotiate modifications to any proposal, to interview any proposer, and to waive any irregularities in any proposal following the proposal submission deadline date, in order to serve the best interests of the County.

All inquiries regarding this Request for Proposal should be submitted in written form, no later than 8:00 A.M. November 9, 2018 and directed to the Franklin County Purchasing Department, 400 E Locust St. Rm 004, Union Mo 63084 or by email at purchasing@franklinmo.net. Any addendums will be posted to this RFP no later than 9:00 A.M November 13, 2018.

CONTRACTUAL TERMS AND CONDITIONS ACKNOWLEDGEMENT

The undersigned Vendor/Contractor has read, understood, and accepted the Terms and Conditions as published in the Vendor Information Packet on the Franklin County Official Website located at:

<https://www.franklinmo.org>

All terms and conditions as stated shall be adhered to by Vendor/Contractor upon acceptance of contract. Vendor/Contractor enters into this agreement voluntarily, with full knowledge of its effect.

Vendor/Contractor Signature

Date

Vendor/Contractor Name and Title

AFFIDAVIT OF WORK AUTHORIZATION

The grantee, sub grantee, contractor or subcontractor who meets the section 285.525, RSMo definition of a business entity must complete and return the following Affidavit of Work Authorization.

Comes now _____ (Name of Business Entity Authorized Representative)
as _____ (Position/Title)

first being duly sworn on my oath, affirm _____ (Business Entity Name) is enrolled and will continue to participate in the E-Verify Federal Work Authorization program with respect to employees hired after enrollment in the program who are proposed to work in connection with the services related to _____ (Bid/Grant/Sub grant/Contract/Subcontract) for the duration of the grant, sub grant, contractor, or subcontractor, if awarded in accordance with subsection 2 of section 285.530, RSMo. I also affirm that _____ (Business Entity Name)

does not and will not knowingly employ a person who is an unauthorized alien in connection with the contracted services related to _____ (Bid/Grant/Sub grant/Contract/Subcontract) for the duration of the grant, sub grant, contract, or subcontract, if awarded.

In Affirmation thereof, the facts stated above are true and correct. (The undersigned understands that false statements made in this filing are subject to the penalties provided under section 575.040, RSMo.)

Authorized Representative's Signature

Printed Name

Title

Date

Subscribed and sworn to before me this _____ of _____, I am

Day

Month, Year

Commissioned as a notary public within the County of _____, State of _____ and my commission expires on Date _____

Signature of Notary

Date

AFFIDAVIT OF WORK AUTHORIZATION

(Continued)

CURRENT BUSINESS ENTITY STATUS

I certify that _____ (Business Entity Name) **MEETS** the definition of a business entity as defined in section 285.525, RSMo pertaining to section 285.530, RSMo as stated above.

Authorized Business Entity
Representative's Name
(Please Print)

Authorized Business Entity
Representative's Signature

Business Entity Name

Date

As a business entity, the grantee, sub grantee, contractor, or subcontractor must perform/provide the following. The grantee, sub grantee, contractor, or subcontractor shall check each to verify completion/submission:

- o Enroll and participate in the E-Verify Federal Work Authorization Program (Website: <http://www.dhs.gov/e-verify>; Phone: 888-464-4218 Email: e-verify@dhs.gov) with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services required herein;

AND

- o Provide documentation affirming said company's/individual's enrollment and participation in the E-Verify Federal Work Authorization Program. Documentation shall include a page from the E-Verify Memorandum of Understanding (MOU) listing the grantee's, sub grantee's, contractor's, or subcontractor's name and the MOU signature page completed and signed, at minimum, by the grantee, sub grantee, contractor, or subcontractor and the Department of Homeland Security – Verification Division; (if the signature page of the MOU lists the grantee's, sub grantee's, contractor's, or subcontractor's name, then no additional pages of the MOU must be submitted).

Request for Taxpayer Identification Number and Certification

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

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

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 Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number								
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Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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 on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

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

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

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-INT (interest earned or paid)
- 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? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

AFFIDAVIT OF PAID PROPERTY TAXES

I certify that _____ (Business name) does not owe any unpaid personal or real estate taxes to Franklin County for either the current tax year or prior years.

Authorized Representative's Signature

Printed Name

Title

Date

Subscribed and sworn to before me this ____ of _____.
Day Month, Year

I am commissioned as a notary public within the County of _____, State of _____, and my commission expires on _____

Signature of Notary

Date

VENDOR "POC" Point of Contact
Following award of contract

Company Name _____

Mailing Address _____

Phone number _____

Contact Name _____

Contact Name Title _____

Email Address _____

ATTACHMENT 1

SEALED RFP LABEL

PLEASE ATTACH LABEL TO OUTSIDE OF RFP PACKAGE

SEALED RFP RESPONSE ENCLOSED

DELIVER TO:

Purchasing Department
400 East Locust St, Rm 004
Union, MO 63084

RFP # 201823 DATE: 11/16/2018

DESCRIPTION: PROSECUTION SERVICES

Vendor Name: _____

Vendor Address: _____