6

SUBJECT: PIGGYBACK CITY OF FT. LAUDERDALE CONTRACT NO. 12546-713 WITH BILL2PAY LLC FOR LOCKBOX SERVICES

BID #: PSC-0472-22 **OPEN DATE:** N/A

GENERAL GOVERNMENT AWARDS COMMITTEE

KIND AND BASIS OF CONTRACT: PIGGYBACK CONTRACT – DATE OF CONTRACT EXECUTION THROUGH FEBRUARY 28, 2025 WITH ONE (1) ONE (1) YEAR RENEWAL OPTION

AGENCY: DUVAL COUNTY TAX COLLECTOR

BASIS OF AWARD: PIGGYBACK CONTRACT

NUMBER OF BIDS INVITED: N/A **NUMBER RECEIVED:** N/A **OTHER:** N/A

SUMMARY OF BIDS AND RECOMMENDED ACTIONS:
Subject piggyback contract was awarded to Bill2Pay, LLC (contract #71996-22) on 9/1/22 in the not-to-exceed amount of $165,000.00.

Request approval to reassign the award from Bill2Pay, LLC to Catalis Payments, LLC and to ratify the assignment date back to January 1, 2023 due to a company name change. Services shall continue under the same terms and conditions through February 28, 2025 with one (1) one (1) year renewal option. Total not-to-exceed award amount will remain unchanged at $165,000.00.

This award will be funded from account 00193.730001.534100.000000.00000000.00000.0000000, executed by formal contract amendment #1 through the Office of General Counsel, and processed via Purchase Order(s).

ATTACHMENTS: Recommendation Memo, Supplier's Letter & W-9, Previous Award

ANALYST: _____
DAVID KLAGES

RESPECTFULLY SUBMITTED: _____
DUSTIN FREEMAN, CHIEF
PROCUREMENT DIVISION

CONCURRENCE BY: DEBRA DORAN, CHIEF FINANCIAL OFFICE, DUVAL COUNTY TAX COLLECTOR

(ALL AWARD ACTIONS SUBJECT TO LAWFULLY APPROPRIATED FUNDS)
ACTION OF GGAC COMMITTEE ON RECOMMENDATIONS ABOVE

MEMBERS APPROVING _____ MEMBERS DISAPPROVING _____ DATE: _____

_____ _____ OTHER: _____

_____ _____

_____ _____

ACTION OF AWARDING AUTHORITY DATE _____

APPROVED _____ DISAPPROVED _____

OTHER _____

SIGNATURE OF AUTHENTICATION _____

DUVAL COUNTY TAX COLLECTOR
www.coj.net/tc
taxcollector@coj.net

Jim Overton
TAX COLLECTOR

231 E. FORSYTH ST., SUITE 200
JACKSONVILLE, FLORIDA 32202-3356

TO: Dustin L Freeman, Chief of Procurement

FROM: Debra Doran, Chief Financial Officer, Duval County Tax Collector Debra Doran

SUBJECT: Agreement Amendment Request – POA-71996-22

DATE: October 5, 2023

On January 1, 2023, Bill2Pay, LLC changed their business name to Catalis Payments, LLC. The Duval County Tax Collector requests amending the agreement POA-71996-22 to reflect this name change.

Attached is a letter from the supplier confirming the name change, and Catalis Payments, LLC W9.

Thank you for considering this request.

CATALIS

3025 Windward Plaza, Suite 200, Alpharetta, GA 30005

August 30, 2023

David R. Klages
City of Jacksonville
Procurement Division
214 N. Hogan Street
Suite 800
Jacksonville, FL 32202

Name Change Request

David,

This letter serves to inform you to update our business name from Bill2Pay, LLC to Catalis Payments, LLC. The name change took effect on January 1, 2023.

If you have any questions, or need more information, please contact me at 678-214-6156 or at krange@catalisgov.com.

Thanks,

Kedrick Range
Director of Treasury

Form **W-9**
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ Go to *www.irs.gov/FormW9* for instructions and the latest information.

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

Print or type. See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Catalis Payments, LLC

2 Business name/disregarded entity name, if different from above

3 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.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☑ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ C

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.

☐ 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) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
3025 Windward Plaza, Suite 200

Requester's name and address (optional)

6 City, state, and ZIP code
Alpharetta, GA 30005

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 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.

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.

Social security number
☐☐☐ - ☐☐ - ☐☐☐☐

or

Employer identification number
2 6 - 1 2 3 3 0 9 7

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 for Part II, later.

Sign Here Signature of U.S. person ▶ Brian Downs Date ▶ 7/12/23

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*.

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, *later.*

SUBJECT: PIGGYBACK CITY OF FT. LAUDERDALE CONTRACT NO. 12546-713 WITH BILL2PAY LLC FOR LOCKBOX SERVICES

BID #: PSC-0472-22 **OPEN DATE:** N/A

GENERAL GOVERNMENT AWARDS COMMITTEE

KIND AND BASIS OF CONTRACT: PIGGYBACK CONTRACT – DATE OF CONTRACT EXECUTION THROUGH FEBRUARY 28, 2025 WITH ONE (1) ONE (1) YEAR RENEWAL OPTION

AGENCY: DUVAL COUNTY TAX COLLECTOR

BASIS OF AWARD: PIGGYBACK CONTRACT

NUMBER OF BIDS INVITED: N/A **NUMBER RECEIVED:** N/A **OTHER:** N/A

SUMMARY OF BIDS AND RECOMMENDED ACTIONS:
Request approval to piggyback off City of Ft. Lauderdale Contract No. 12546-713 with Bill2Pay LLC for Lockbox Services. Period of service will be from date of contract execution through February 28, 2025 with one (1) one (1) year renewal option. Initial estimated not-to-exceed expenditure amount is $165,000.00.

This award will be funded from account 00193.730001.534100.000000.00000000.00000.0000000, executed by formal contract agreement through the Office of General Counsel, and processed via Purchase Order(s).

ATTACHMENTS: Recommendation Memo, Supplier's Email, Risk Management Approval, Piggyback Contract

ANALYST: _____ DAVID KLAGES

RESPECTFULLY SUBMITTED: _____ GREGORY PEASE, CHIEF PROCUREMENT DIVISION

CONCURRENCE BY: DEBRA DORAN, CHIEF FINANCIAL OFFICE, DUVAL COUNTY TAX COLLECTOR

(ALL AWARD ACTIONS SUBJECT TO LAWFULLY APPROPRIATED FUNDS)
ACTION OF GGAC COMMITTEE ON RECOMMENDATIONS ABOVE

MEMBERS APPROVING 3 MEMBERS DISAPPROVING 0 DATE: 9/1/2022

Teresa R Eichner _____ OTHER: _____

_____ _____

_____ _____

ACTION OF AWARDING AUTHORITY DATE 9/1/2022

APPROVED ✓ DISAPPROVED _____

OTHER _____

SIGNATURE OF AUTHENTICATION _____ Brian Hughes
Chief Administrative Officer
~~For: Mayor Lenny Curry~~
Under Authority of:
Executive Order No: 2019-02