### PAYROLL COMPARISON - 2025

# Proposer Name: Denise Everetts

Evaluator Printed Name:_	Robert	A.	Fragale	
The state of the s			1	

PAYROLL from Operational Fo	rm 4.3 Sta	affing an	d Pers	onnel C	alculat	ion					
	Location Number(s)										
	29-B	Loc. 2	Loc. 3	Loc. 4	<u>Loc. 5</u>	Loc. 6					
Highest Rate	\$18	3 19									
Lowest Rate	\$12	\$ 13.75	***************************************								
Number of Hours Recommended	161	174									
Number of Hours Proposed	180	180									
Total Monthly Wages	\$9,362	608,00									

Comments:		
	-10	

# PERSONAL EVALUATION (2025)

Denise Everetts 29-B / 25106 Greene County, Beavercreek BMV Site

Proposed as 2 <sup>nd</sup> Location  Verify Proposer's Full Name: (#2)  Proposer's County of Residence (NPC Operation): (#4)  Verify Proposer's Driver's License Number: (#6)  Proposing as Minority: (#9) Yes No	
PERSONAL EVALUATION, Page 2 (Ma BUSINESS AND EMPLOYMENT EXPERIENCE, Page 3 (Ma PERSONAL EVALUATION, Page 5 (Ma PERSONAL EVALUATION, Page 6 (Ma PERSONAL EVALUATION, Page 7 (Ma	ax. 16 Points): 16 ax. 55 Points): 55 ax. 100 Points): 100 ax. 28 Points): 38 ax. 17 Points): 17 ax. 27 Points): 37 ax. 15 Points): 15
	ax. 258 Points): <u>258</u>
Evaluators' Signatures  (1) Wut a. Figle  Robert	Names Date  A. Fragok 2/26/25

	PERSONAL EVALUATION	ОК	NO
1.	Proposer does not and will not hold a PROHIBITED elective public office other than County Clerk of Courts or County Auditor? (#11 & 12)	6	*
2.	Proposer does not hold an overlapping deputy registrar contract? (#13)  If contract overlaps, what is the expiration date of the contract?	0	0
3.	Proposer is not a prohibited relative of a current deputy registrar? (#14, 15 & 16)	(5)	*
4.	Proposer is not a prohibited relative of an ODPS employee, or (if a relative) proposer has either been a deputy registrar continuously since January 1, 1992, or the ODPS employee became employed after the proposer was first appointed deputy registrar? (#17)	(5)	*
5.	Proposer is not a State of Ohio employee or will resign? (#19)	(5)	*
6.	Proposer is not an active insurance agent or is nonprofit? (#20)	(5)	*
7.	Proposer states no criminal conviction within the last 10 years? (#21)	(5)	*
8.	Proposer owes no local, state, or federal delinquent taxes, social security payments, workers' compensation premiums or mandatory contributions? (#22)	(5)	*
9.	Proposer agrees to maintain acceptable business liability insurance in accordance with Ohio Revised Code section 4503.03(C)? (#23)	5	*
10.	Proposer can meet bond requirements? (#24 and acceptable proof)	(5)	*
11.	Acceptable educational information OR nonprofit corporation? (#25)	(5)	0
12.	Proposer has computer training or experience? (#26)	(5)	0
	PERSONAL EVALUATION POINTS, Page 2 (Max. 55 Points)	59	_
NO.	TE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract con	tingency	1.
Com	nments:		
-			—

# BUSINESS AND EMPLOYMENT EXPERIENCE VERIFICATION Person called: \_\_\_\_\_ Verified at telephone ( East Dayton License Bureau Relationship: \_\_\_\_ Verified experience as: Deputy Registrar Agency Owner (50) \_\_\_\_\_\_ Other Business Owner (34) \_\_\_\_\_ Manager or Supervisor (25) \_\_\_\_\_ Deputy Registrar Employee (23) \_\_\_\_\_ Other Employee (20) \_\_\_\_\_ Hours per week: 30 Verified Hours 30 = Factor x Years 20 x Points 50 = 1,000 ...... Person called: \_\_\_\_\_ at telephone ( ) \_\_\_\_\_ Relationship: \_\_\_\_\_ Verified experience as: Deputy Registrar Agency Owner (50) \_\_\_\_\_ Other Business Owner (34) \_\_\_\_\_ Manager or Supervisor (25) \_\_\_\_\_ Deputy Registrar Employee (23) \_\_\_\_ Other Employee (20) \_\_\_\_\_ Hours per week: \_\_\_\_\_ From (date): \_\_\_\_\_\_ To (date): \_\_\_\_\_ Length: Verified Hours \_\_\_\_\_ = Factor \_\_\_\_ x Years \_\_\_ x Points = Person called: \_\_\_\_\_ at telephone ( ) \_\_\_\_\_ Company: Relationship: Verified experience as: Deputy Registrar Agency Owner (50) \_\_\_\_\_ Other Business Owner (34) \_\_\_\_\_ Manager or Supervisor (25) \_\_\_\_\_ Deputy Registrar Employee (23) \_\_\_\_\_ Other Employee (20) \_\_\_\_\_ Hours per week: \_\_\_\_\_\_\_ From (date); \_\_\_\_\_\_ To (date): \_\_\_\_\_ Length: \_\_\_\_\_ Verified Hours = Factor x Years x Points = =

#### **BUSINESS AND EMPLOYMENT EXPERIENCE CALCULATION**

13. DEPUTY REGISTRAR AGENCY OWNER Experience, Form 3.2

ITEM AGENCY/COMPANY	H	ours		FACTO	₹ <b>x</b> `	YEARS	x	POINTS		SCORE	VERIFIED
A. East Dayton Licenze Bureau	#	NA	=	1.0	Х	20	Χ	50	=	1,000	V
В.	11			1.0				50	=		
C.	#	NA	=	1.0	X		Χ	50	=		
		S	ubt	otal of	13	-A, 13	В	& 13-C	=	1,000	

14. OTHER BUSINESS OWNERSHIP Experience, Form 3.2

ITEM A	GENCY/COMPANY	HOU	RS = FAC	TOR X YEA	RS X F	POINTS	A _ (0)	SCORE	VERIFIED
Α.		#	=	X	Х	34	=		
B.		#	=	X	Х	34	=		
C.		#	=	X	X	34	=		
Music Ger			Subtota	I of 14-A,	14-B &	14-C		jellet kija i	

15. SUPERVISORY / MANAGEMENT (ANY BUSINESS - INCLUDING DR) Experience, Form 3.2

ITEM AGENCY/COMPANY	HOU	RS = FAC	TOR X YEA	RS X	POINTS	s =	SCORE	VERIFIED
A.	#	=	X	X	25	=		
В,	#	=	X	X	25	=		
C.	#		X	X	25	=		
	M 22 1 0	Subtota	l of 15-A,	15-B 8	15-C	=		

Total DR, Ownership and/or Management #13-15 (Max. 100 Points) = 100

TEM AGENCY	HOU	RS = FAC	TOR X YEA	RS X	POINTS		SCORE	VERIFIE
A.	#	=	X	Х	23	=		
B.	#	=	X	X	23	=		
C,	#	=	X	X	23	=		
D,	#	=	Χ	Х	23	=		
	Subt	otal of 16	-A, 16-B,	16-C 8	& 16-D	=	W 897 897	

Total DR Employment Experience #16 (Max. 90 Points) =

17.	OTHER	<b>EMPI</b>	OYMENT	Experience.	Form 3.2
1 1 1 1	~ III I	_ I V I I		LADOITOU.	1 01111 0.2

ITEM AGENCY/COMPANY	HOU	RS = FAC	TOR X YEA	RS X	POINTS	<b>S</b> =	SCORE	VERIFIED
A,	#	=	Χ	X	20	=		
B.	#	=	Χ	X	20	200		
C,	#	=	X	X	20	=		
D.	#	=	X	X	20			
	Subtotal of	Lines 17	-A, 17-B,	17-C 8	17-D	= 10		

Total Other Employment Experience #17 (Max. 80 Points) =

ENTER LARGEST OF TOTALS [13-15 (100 pts.), 16 (90 pts.), or 17 (80 pts.)] = 100

	PERSONAL EVALUATION	OK	NO
18.	Form 3.3 – Customer Service Experience		
	Did proposer provide acceptable list of ideas to improve customer service at a deputy registrar agency or provide an example of something done as part of a job or business to improve services for customers?	2	0
19.	Form 3.4 – Start-Up Cost Funds On Deposit (not required for Auditors or Clerks of Cou	irts)	
	A. Are funds in acceptable financial institution and verified with bank/teller stamp?	G	*
	B. Are funds in proposer's or proposer's business name or joint with spouse?	(5)	*
20.	Form 3.5 – Political Contributions Report (not required for Auditors or Clerks of Courts)		
	Did proposer mark "NO" for every category, every year? (For Nonprofit Corporations, evaluate both Corporation's and CEO's Form 3.5)	<b>(5)</b>	*
21.	Form 2.6 Personnel Policy Symmetry		
21.	Form 3.6 – Personnel Policy Summary  Does proposer agree to provide/maintain a written personnel policy covering the follow	ina	
	A. Hiring employees with deputy registrar agency experience?	Ting.	-
	B. Equal Employment Opportunity?		
	C. Employee training by the deputy registrar?		
	D. Participation in BMV provided training?	1	
	E. Evaluation of employee performance?	1	
	F. Grounds for discipline or dismissal/termination (list) which shall include drug and alcohol use?		
	G. Progressive disciplinary steps?	(11)	0
	H. Dress code with list of acceptable attire?		
	I. Dress code with list of unacceptable attire?	1	
	J. A policy for maintaining the professional appearance of all staff at all times?	1	
	K. Fringe benefits (beyond those required by law or contract)?		
	PERSONAL EVALUATION POINTS, Page 5 (Max. 28 Points)	20	8
NOT	TE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract con	ingency	
Com	nments:		

	PERSONAL EVALUATION	ОК	NO
22.	Form 3.7 – Security Plan Summary - Did proposer agree to provide:		
	A. An electronic alarm system? (Mandatory)		
	B. Alarm system monitored 24 hours, off-site? (Mandatory)		
	C. Alarm system reports off-site if wires cut or tampered with? (Mandatory)		
	D. Adequate alarm monitored panic/hold-up buttons? (Mandatory)		
	E. Motion detectors connected to alarm system? (Mandatory)		
	F. Alarm monitored contacts on all exterior doors? (Mandatory)		
	G. Alarm monitored contacts on all exterior windows? (Mandatory)		
	H. Video recording camera surveillance system? (Mandatory)		
	Safe or secured locking cabinet? (Mandatory)	63	*
	J. Secured storage room with alarm monitored contacts on door(s) and window(s), if applicable? (Mandatory)	(13)	
	<ul> <li>K. Cross cut shredder to be made available to destroy customer copy records? (Mandatory)</li> </ul>		
	L. All doors and all windows will be securely locked when license agency is closed? (Mandatory)		
	M. Smoke, fire, and carbon monoxide detection devices (Mandatory)?		
	N. Interior/Exterior motion activated security lights? (Suggested) – Check OK or NO	(ÓK)	NO
23.	Form 3.8 – Facility Maintenance Plan Summary - Did proposer agree to provide:		
	A. Indoor/Outdoor maintenance and cleaning?	(1)	0
	B. Prompt snow and ice removal?	(1)	0
	C. Carpet and/or floor cleaning (if appropriate)?	(1)	0
	D. Repainting?	(1)	0
	PERSONAL EVALUATION POINTS, Page 6 (Max. 17 Points) _	17	
тои	E: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract conti	ingency	
Com	ments:		
00111			-
			-
			- 1
			_
			_

	16	PERSONAL EVALUATION	ок	NO
24.	Fo	rm 3.9 – Involved and Invested in Your Business		
	1.	How do you plan to manage, be responsible, and be accountable for this business at all times?	0	0
	2.	How will you ensure that all laws, rules, guidelines and procedures are followed, at all times, specifically with regard to issuing and renewing driver licenses, identification cards, and vehicle registrations?	(1)	0
	3.	What measures will you put in place to detect, deter, and prevent fraud?	(1)	0
	4.	The Ohio Bureau of Motor Vehicles routinely issues new and/or revised policy and procedural changes through email broadcasts to the deputy registrars. How will you ensure that policies and procedures are communicated to the staff and followed on a daily basis?	0	0
	5.	How will you demonstrate good leadership to your employees?	(1)	0
	6.	How will you maintain a high level of professionalism each day in this business?	$\triangle$	0
	7.	How do you intend to recruit and retain high quality employees?	1	0
	8.	How will you provide a safe, clean, and friendly place to do business?	0	0
	9.	How would you deal with an irate customer?	0	0
	10.	What training or advice do you, or will you, give to your employees for dealing with irate customers?	(1)	0
	11.	How will you meet the expectations of the Ohio Bureau of Motor Vehicles?	(1)	0
	12.	Why should the Ohio Bureau of Motor Vehicles consider you for a deputy registrar license agency contract?	0	0
25.	For	m 3.10(A) (B) or (C) – Affidavit of Individual, Auditor/Clerk of Courts or Nonprofit Co	rpora	tion
	Α.	Did proposer submit proper affidavit without alteration and does it appear to be complete, accurate, and truthful?	3	*
	B.	Is it the affidavit duly signed and notarized?	0	*
26.	Lo	cal Law Enforcement Report / Articles of Incorporation (AOI)		
		No disqualifying convictions for individual / AOI for nonprofit corporation?	(3)	*
		No convictions (except minor traffic) / AOI for nonprofit corporation?	2	0
27.		CI / FBI Criminal Background (WebCheck) Report / AOI for Nonprofit Corporation disqualifying convictions for individual / AOI for nonprofit corporation?	(5)	*

PERSONAL EVALUATION  OK NO  Credit Report (issued in 2025) / Certificate of Good Standing for Nonprofit Corporation				
*Credit Reports are not required for County Auditors and County Clerks of Courts  A. Credit report submitted contains credit score?  B. No tax liens (state or federal)?  C. No judgments for the past 36 months?*  D. *No bankruptcy filed or trusteeship imposed for the past 36 months?  E. *No other negative items (charge-offs, collections, etc.) for the past 36 months?  F. *No negative items (pattern of delinquencies, etc.) for the past 60 months?  * Exclude minor medical judgments and disputed items with good cause explanation.  29. The overall quality of this proposal is deemed to be of satisfactory or higher overall quality? (Note any deficiencies in comments area below or on page 1)  PERSONAL EVALUATION POINTS, Page 8 (Max. 15 Points)  NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.		PERSONAL EVALUATION	OK	NO
B. No tax liens (state or federal)?  C. No judgments for the past 36 months?*  D. *No bankruptcy filed or trusteeship imposed for the past 36 months?  E. *No other negative items (charge-offs, collections, etc.) for the past 36 months?  F. *No negative items (pattern of delinquencies, etc.) for the past 60 months?  * Exclude minor medical judgments and disputed items with good cause explanation.  29. The overall quality of this proposal is deemed to be of satisfactory or higher overall quality? (Note any deficiencies in comments area below or on page 1)  PERSONAL EVALUATION POINTS, Page 8 (Max. 15 Points)  NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.	28.		1	
C. No judgments for the past 36 months?*  D. *No bankruptcy filed or trusteeship imposed for the past 36 months?  E. *No other negative items (charge-offs, collections, etc.) for the past 36 months?  F. *No negative items (pattern of delinquencies, etc.) for the past 60 months?  * Exclude minor medical judgments and disputed items with good cause explanation.  29. The overall quality of this proposal is deemed to be of satisfactory or higher overall quality? (Note any deficiencies in comments area below or on page 1)  PERSONAL EVALUATION POINTS, Page 8 (Max. 15 Points)  NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.		A. Credit report submitted contains credit score?	(2)	0
D. *No bankruptcy filed or trusteeship imposed for the past 36 months?  E. *No other negative items (charge-offs, collections, etc.) for the past 36 months?  F. *No negative items (pattern of delinquencies, etc.) for the past 60 months?  * Exclude minor medical judgments and disputed items with good cause explanation.  29. The overall quality of this proposal is deemed to be of satisfactory or higher overall quality? (Note any deficiencies in comments area below or on page 1)  PERSONAL EVALUATION POINTS, Page 8 (Max. 15 Points)  NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.		B. No tax liens (state or federal)?	3	0
E. *No other negative items (charge-offs, collections, etc.) for the past 36 months?  F. *No negative items (pattern of delinquencies, etc.) for the past 60 months?  * Exclude minor medical judgments and disputed items with good cause explanation.  29. The overall quality of this proposal is deemed to be of satisfactory or higher overall quality? (Note any deficiencies in comments area below or on page 1)  O  PERSONAL EVALUATION POINTS, Page 8 (Max. 15 Points)  NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.		C. No judgments for the past 36 months?*	(3)	0
F. *No negative items (pattern of delinquencies, etc.) for the past 60 months?  * Exclude minor medical judgments and disputed items with good cause explanation.  29. The overall quality of this proposal is deemed to be of satisfactory or higher overall quality? (Note any deficiencies in comments area below or on page 1)  O  PERSONAL EVALUATION POINTS, Page 8 (Max. 15 Points)  NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.		D. *No bankruptcy filed or trusteeship imposed for the past 36 months?	2	0
* Exclude minor medical judgments and disputed items with good cause explanation.  29. The overall quality of this proposal is deemed to be of satisfactory or higher overall quality? (Note any deficiencies in comments area below or on page 1)  PERSONAL EVALUATION POINTS, Page 8 (Max. 15 Points)  NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.		E. *No other negative items (charge-offs, collections, etc.) for the past 36 months?	(2)	0
29. The overall quality of this proposal is deemed to be of satisfactory or higher overall quality? (Note any deficiencies in comments area below or on page 1)  PERSONAL EVALUATION POINTS, Page 8 (Max. 15 Points)  NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.		F. *No negative items (pattern of delinquencies, etc.) for the past 60 months?	1	0
PERSONAL EVALUATION POINTS, Page 8 (Max. 15 Points)  NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.		* Exclude minor medical judgments and disputed items with good cause explanation.		
NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.	29.		2	0
			15	
Comments:	NOTE	E: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract cont	ngency	
	Camp	nonto		
	Comm	ments:		_
				-
				-
	-			_

# **OPERATIONAL EVALUATION (2025)**

Denise Everetts 29-B / 25106 Greene County, Beavercreek BMV Site

FORM	DESCRIPTION	ОК	NO			
4.0	Operational Checklist – Maximum = 6 Points (enter points recorded on bottom of Form 4.0)	6				
4.1	Appointment of Agency Managers	O				
	A. Deputy to Work at Least Twenty (20) Hours Per Week	^				
	Proposed Work Hours Per Week	(5)	*			
	B. Appointment of Manager and Assistant <b>OR</b> Acceptable Statement	3	0			
4.2	Experienced Employees Summary					
	Gave Acceptable Statement OR Provided Names	(2)	0			
4.3	Staffing and Personnel Calculation					
	A. Hours Recommended: 16 Proposed: 180	4	*			
	B. Work Hours and Pay Calculated Correctly	(2)	0			
	C. Meets Minimum Wage Requirement (2025 Ohio Minimum Wage Rate = \$7.25 or \$10.70 Per Hour)	1	*			
4.4	Start-Up Costs Calculation					
7. 7	A. Adequate and Accurate Personnel Costs	3	0			
	B. Adequate and Accurate Site Preparation Costs	2	0			
	C. Adequate and Accurate Rental Payments	(2)	0			
	D. Total Required: \$15,523.60 On Deposit (Form 3.4): \$50,864.91	<b>(5)</b>	*			
4.5	Deputy Registrar Contract					
	A. Filled Out Completely and Properly	2	0			
	B. Signed and Properly Notarized	(3)	0			
NOTE: Score	OPERATIONAL EVALUATION POINTS (Max. 40 Points) a Indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract	4C				
Comments						
Evalu	ators' signatures Printed names	Date				
	1116 1					
(1)	lut a. Fragale Robert A. Fragale	7196	192			
(2)						

#### 3.0 PERSONAL CHECKLIST

Proposer's Full Legal Name Denise Kay Everetts

Proposer Number (	(BMV use only)	
Troposer riamber	22.12 1 0000 0.209)	

INSTRUCTIONS: You must submit one original of this form and all documents listed on this form as appropriate based on your status as a proposer (individual, county auditor, clerk of courts or nonprofit corporation). Even if you are submitting more than one proposal, only one original of these forms are required. Please submit via email in accordance with the RFP instructions.

INDIVIDUAL	1	вму	COUNTY AUDITOR OR CLERK OF COURTS	1	вму	NONPROFIT CORPORATION	1	вму
Form 3.0 Personal Checklist (this form)	V		Form 3.0 Personal Checklist (this form)			Form 3.0 Personal Checklist (this form)		
Form 3.1 Personal Questionnaire	~		Form 3.1 Personal Questionnaire			Form 3.1 Personal Questionnaire		
Form 3.2 Business and Employment Experience	V		Forms 3.2 Business and Employment Experience			Forms 3.2 Business and Employment Experience		
Form 3.3 Customer Service Experience	~		Form 3.3 Customer Service Experience			Form 3.3 Customer Service Experience		
Form 3.4 Start-Up Cost Funds on Deposit	V		N/A	х	1	Form 3.4 Start-Up Cost Funds on Deposit		
Form 3.5 Political Contributions Report	V		N/A	х	1	Form 3.5 Political Contributions Report Nonprofit Corporation		
N/A	x	1	N/A	x	1	Form 3.5 Political Contributions Report Chief Executive Officer		
Form 3.6 Comprehensive Personnel Policy Agreement	V		Form 3.6 Comprehensive Personnel Policy Agreement			Form 3.6 Comprehensive Personnel Policy Agreement		
Form 3.7 Security Plan Agreement	V		Form 3.7 Security Plan Agreement			Form 3.7 Security Plan Agreement		
Form 3.8 Facility Maintenance Plan Agreement	~		Form 3.8 Facility Maintenance Plan Agreement			Form 3.8 Facility Maintenance Plan Agreement		
Form 3.9 Involved and Invested in Your Business	V		Form 3.9 Involved and Invested in Your Business			Form 3.9 Involved and Invested in Your Business		
Form 3.10(A) Affidavit of Individual	V		Form 3.10(B) Affidavit of Auditor or Clerk of Courts			Form 3.10(C) Affidavit of Nonprofit Corporation		
2025 Credit Report	~		N/A	х	1	2025 Certificate of Good Standing		
2025 Local Law Enforcement Report	~		2025 Local Law Enforcement Report			Articles of Incorporation		
2025 WebCheck Receipt	1		2025 WebCheck Receipt			N/A	X	1
Pre-approval Statement for \$25,000 Bond	V		Current Bond with BMV added as Additional Insured			Pre-approval Statement for \$25,000 Bond		
INDIVIDUAL			COUNTY AUDITOR OR CLERK OF COURTS			NONPROFIT CORPORATION		

# 3.1 PERSONAL QUESTIONNAIRE

1.	List all location numbers for which the applicant intends to submit a proposal (limit six locations). Check the box underneath if proposing the location as a second site in addition to a current agency:
	57-B 29-B
2.	Full legal name of proposer Denise K Everetts
3.	Proposer's street address
	City State Ohio Zip code 45430
4.	County of residence (nonprofit corporation county of operation) Greene
	Daytime telephone
6.	Proposer's driver's license number (nonprofit corporation N/A)
	Spouse's name (nonprofit corporation N/A)
	Spouse's home street address (nonprofit corp
	City State Ohio Zip code 45430
9.	Are you proposing as the owner of a minority business enterprise (MBE)? No Yes
	Proposer is (check one and follow instructions):
	An individual person. These forms are designed to be self-explanatory for Proposers proposing as individual persons. Answer all questions as they apply to you personally. If a question does not apply to you, enter "N/A" or "Not applicable;
	The Clerk of Courts of County;
	The County Auditor of County. Answer all questions as they apply to you and your position as Clerk of Courts or County Auditor. If a question does not apply to you or your position, enter "N/A" or "Not applicable;
	A nonprofit corporation (NPC). An officer or an authorized agent should answer all questions and sign all documents on behalf of the NPC. The answers must refer to the NPC itself and not to the individual officers, agents, or employees of the NPC, unless otherwise specified. Many questions are not applicable to nonprofit corporations. To assist your responses, we have marked those questions "NPC N/A" meaning we believe the marked question is not applicable to most nonprofit corporations. Please answer all other questions unless clearly inapplicable.

Form 3.1, Personal Questionnaire, Page 1 of 6 (2025)

11. A	<ul> <li>Are you currently serving in elective public office, other the Auditor, either by election or appointment (includes precinct content).</li> </ul>	nan Clerk o	f Courts or County
		Yes	No V
B.	If YES, in what elective office are you serving?		
C.	If YES, date that you plan to leave this office?		
12. A.	Are you currently running for any elective public office. (including precinct committee person)? (NPC N/A)		No_ •
B.	If YES, what office?		
13. A.	Are you currently a deputy registrar?		No
B.	If YES, on what date does your contract expire? June 28, 2025		
	If YES, have you served as a deputy registrar continuously since January 1, 1992?	No V	Yes
14. A.	Is your spouse currently a deputy registrar? (NPC N/A)		No_ 🗸
B.	If YES, on what date does your spouse's contract expire?		
For the	e following three questions, <b>extended family</b> includes your spoter, father-in-law, mother-in-law, brother-in-law, sister-in-law, son Docs any member of your extended family currently hold a d N/A)	use, parent, l -in-law, or d	brother, sister, son, aughter-in-law:
	N/A)		
			No
В.	If YES, list their name, relationship to you, whether you share	the same he	ousehold, and date
16. A.	submit a proposal in response to this RFP? (NPC N/A)	l family	

B. If YES, list their name, relationship to you, and whether you s	share the same	: household:
Name Relationship		Same Household
		Yes No
		Yes No
		res No
		es No
17. A. Is any member of your extended family employed by any sub- Public Safety? (NPC N/A)		Ohio Department o
B If VFS list their name relation 1		
B. If YES, list their name, relationship to you, and the date they b	ecame so emp	oloyed:
Name Relationship		<b>Employment Date</b>
		p of ment Date
18. A. Have you completed the Political Contributions Report, Form (NPC must submit one for NPC itself and one for its C.E.O.)  B. If "NO," are you applying as a Clerk of Courts or County Audit	No	Yes_
	tor? No	
19. A. Are you an employee of the State of Ohio? (NPC N/A)	Yes	No
B. If "YES," will you resign, if appointed?	No	Yes
20. Are you an insurance company agent, writing automobile insurance	e?	
(NPC N/A)	Yes	No_ 🗸
21. Has Proposer (including NPC and proposed office manager) been of a crime punishable by death or imprisonment in excess of involving dishonesty or false statement?	convicted with one year (fel	in the past ten years ony), or any crime
	Yes	No_ 🗸
22. As of the date of this certification does Proposer owe any compensation contributions, social security payments, or workers'	overdue ta	xes, unemployment
the State of Ohio or any political subdivision thereof, or to the fede or locality within the United States?	ral governme	at, of any other state

Form 3.1, Personal Questionnaire, Page 3 of 6 (2025)

23	Is Proposer willing and able, if apport policy of business liability property d hold the Department of Public Safety, and the Registrar of Motor Vehicles I Revised Code 4503.03(C)? (County Au	the Di	rector of Public Safety,	tisfactory t	o the Regi	strar and
	,		rion of Courts (VA)	No	Yes_	~
24	Is Proposer bondable as outlined in Ohi 4501:1-6-01(B)?	io Adm	ninistrative Code		Yes_	
25.	Please provide the following information provide educational information for the	on reg	arding your education. Jual who will manage th	If applying te license ag	g as a NPO gency busin	C, please ness.
	High school diploma?			No _	Yes	V
	High school name Paulding Ex	xem	pted Village	Schoo		
	<sub>City</sub> Paulding		Ohio		Zip 458	379
	College name					
	City				Zip	
	Major		Degree awarded			
	College name			-1.		
	City	State			Zip_	
	Мајот					
	Computer experience. Does Proposer computers? (Incumbent deputy registrations) nonprofit corporations, this question should be nonprofit corporation's activities.)	ars ma	v take credit for oner	ating BMV r systems o	computer perated or	s. For used in
				No	_ Yes_	V

7. Please provide the requested information for three persons we can contact by telephone during daytime business hours and who will serve as a character reference for you. Do not list relatives political contacts, or employees of the Department of Public Safety (including BMV). If we are unable to contact at least one person or that person is unable to serve as a character reference, you may be evaluated unfavorably. Nonprofit corporations should list references who are familiar with the nonprofit corporation's activities.	am very familiar with Mi	crosoft Word, Excel, Microsoft office, PowerPoint, Outlook, Onenote	
political contacts, or employees of the Department of Public Safety (including BMV). If we are unable to contact at least one person or that person is unable to serve as a character reference, you may be evaluated unfavorably. Nonprofit corporations should list references who are femiliar with	nave been using Bass f	or almost 20 years.	
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Form 3.1, Personal Questionnaire, Page 5 of 6 (2025)

# FORM 3.2(A) BUSINESS OWNERSHIP EXPERIENCE

Instructions. Please fill out one of these forms 3.2(A) for each business you have owned. Do not use this form 3.2(A) for management, supervisory, or employee experience. If you have owned more than one business, submit a separate for 3.2(A) for each business owned. Please make additional copies of this form as necessary.

ny name E. Dayton L City Dayton	
	252-6204
egistrar	
spetions, voter	registration,
r, etc.): sole propi	rietor
Hours worked we	eekly 30
	Yes 🗸
oort? No	Yes 🗸
oyees? No	Yes 🗸
No	Yes 🗸
yees do/did you man	nage?7
No	Yes 🗸
is experience. If we ny credit for it. (If ses to verify that exp	Work are a demant.
	Hours worked we 2004 To: month No

# 3.2(B) MANAGEMENT AND/OR SUPERVISORY EXPERIENCE

Instructions. Please fill out one of these forms 3.2(B) for each separate management or supervisory job you have held. Do not use this form 3.2(B) for business ownership or regular employee positions. Use a separate form 3.2(B) for each management or supervisory position that you have held. Please make additional copies of this form as necessary.

700 1 00	Company name Defiance License Bureau
	City Defiance
Obio	Telephone ( 419 ) 784-4400
Type of business (deputy registrar, retail grocery, etc.)	eputy registrar
Management/supervisory duties Open & close the age	ency, prepared and mad daily deposits,
supervised and trained employees. Reviewe	ed transactions and corretions.
MANAGER OR SUPERVISOR - Job title: Manager	
1. Title of position Assistant manager	Hours worked weekly? 32-36
2. Dates this position was held: From: month 5	
3. Do/did you directly hire, evaluate, train, and discipli	ine employees? No Yes
4. Do/did you directly manage/supervise employees on	n a daily basis? No Yes_
If you answered yes to question number 4, how man	ny employees do/did you manage? 2-3
5. Have you ever developed a comprehensive business	plan? No Yes _
List at least one person, not a relative of yours, who can v	verify this experience. If we cannot contact at
reast one person to verify this experience, you will not re	eceive any credit for it. (If you are a deputy

### 3.2(C) EMPLOYEE EXPERIENCE

Instructions. Please fill out one of these forms 3.2(C) for each and every separate job you have held as an employee. Do not use this form 3.2(C) for business ownership or jobs in which you had management or supervisory duties. Use a separate form 3.2(C) for each non-management and/or non-supervisory job held. Please make additional copies of this form as necessary.

Company address  Telephone ( 419 ) 784-4400  Type of business (deputy registrar, retail grocery, etc.) deputy registrar  EMPLOYEE - Job title: processor  Hours worked weekly 32-36 Job duties Processing of Ohio Drivers licenses, permits, and commercial drivers licenses. Ohio voter registrations. Processed vehicle registrations, conducted vision screening and I helped keep the agency clean & tidy.  Dates of this employment: From: month 5 year 1998 To: month 6 year 2000 Describe how and to what extent you provided high quality customer service at this position:
Type of business (deputy registrar, retail grocery, ctc.) deputy registrar  EMPLOYEE - Job title: processor  Hours worked weekly 32-36 Job duties Processing of Ohio Drivers licenses, permits, and commercial drivers licenses. Ohio voter registrations. Processed vehicle registrations, conducted vision screening and I helped keep the agency clean & tidy.  Dates of this employment: From: month 5 year 1998 To: month 6 year 200
EMPLOYEE - Job title: processor  Hours worked weekly 32-36 Job duties Processing of Ohio Drivers licenses, permits, and commercial drivers licenses. Ohio voter registrations. Processed vehicle registrations, conducted vision screening and I helped keep the agency clean & tidy.  Dates of this employment: From: month 5 year 1998 To: month 6 year 200
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vehicle registrations, conducted vision screening and I helped keep the agency clean & tidy.  Dates of this employment: From: month5year _1998To: month6year _200
Dates of this employment: From: month5year _1998To: month6year _200
Dates of this employment: From: month5year _1998To: month6year _200
Describe how and to what extent you provided high quality customer service at this position:
I love people, so it is easy to be friendly. I became as knowledgeable as possible to ensure
I was giving the customer proper procedures and answer any questions with accouracy. I
would go over any paperwork they had questions to, and at times, applied their registration sticker.
List at least one person, not a relative of yours, who can verify this experience. If we cannot contact least one person to verify this experience, you will not receive any credit for it. (If you are a depression or deputy as sixty as a deputy as sixty as deputy as sixty as a deputy as a

### 3.3 CUSTOMER SERVICE EXPERIENCE

Instructions. Please give us a list of ideas you have to improve customer service at your deputy registrar agency. You will only receive full credit if you demonstrate sufficient customer service awareness.

A. This is a list of ideas I have to improve customer service at my deputy registrar agency if I am awarded a contract (Please be specific) and/or this is an example of something I have done as part of my job or business to improve services for my customers (Please be specific):

I have trained my employees to be Happy, Helpful and Heartfelt! (3 H's)
I realized many years ago at my first BMV agency I worked for. It was not a friendly place in my opionion. I have always loved to laugh and have fun...And I let my customers know that. Soon I was known as the "the friendly one" and some customers would wait until I could wait on them.

I had a customer when I was a "BMV clerk" that had gotten a ticket for fictitious license plates. He was upset and confused. I asked him if I could take a look at his sticker on his license plate. He took me to his vehicle and I got the control number off the sticker (long time ago), and did some research. He had purchased two of the same models of cars at the same time, but had sold one of the vehicles. He had renewed the license plate to the vehicle he sold, instead of the one he kept. Wrong year and VIN. I got him straighted out and he became a friendly face in the line from there on out.

In todays time as a DR, I ensure my employees are giving great customer service, by being knowledgeable, friendly and smiling. I find if the staff is a happy staff, the customers are happy customers! Many times I am in my office, enjoying the sound in my lobby.

For the young kids, we have loads of stickers to give to them!

Form 3.3, Customer Service Experience (2025)

#### 3.5 POLITICAL CONTRIBUTIONS REPORT

#### Instructions

<u>Instructions</u> You must report on the following page whether you and your immediate family together gave more than \$100.00 to any political party or to certain individual candidates during any one of the last three calendar years and so far this year.

"Immediate family" means you, a spouse residing with you, and any dependent children. You must add together all contributions you, your spouse, and your dependent children made to each separate party or each separate candidate during each calendar year.

"Political party" means each separate political party and includes any political action committee (PAC) and any "continuing association" which are connected to that political party. "Political party" includes all levels of that party, federal, state, county, and local.

"Candidate" includes both the candidate and any of that candidate's campaign committees. You must report only for candidates for the following offices: Ohio governor, attorney general, secretary of state, treasurer of state, auditor of state, state senator or state representative. You are not required to report any contributions to federal, county, local, or judicial candidates.

"More than \$100.00" means any amount exceeding \$100.00, starting with \$100.01. A contribution of exactly \$100.00 or less is acceptable. Contributions include the value of any "in-kind" contributions.

County Auditors and Clerks of Court are exempt from this requirement and need not file this Report of Political Contributions.

Nonprofit Corporations must submit one report for the nonprofit corporation itself and one report for the chief executive officer (C.E.O.) who has, or will have, primary responsibility for the nonprofit corporation's operation of the deputy registrar agency. There is only one copy of this report in this package. Nonprofit corporations must make a second copy and submit one copy for the nonprofit corporation itself and one for the C.E.O. who will be responsible for the operation of the deputy registrar agency.

	Danie	1/	
Name:	Denise	Kay	<b>Everetts</b>

Title (if officer of nonprofit corporation):	
--	--

(A nonprofit corporation must submit two separate reports: one for the nonprofit corporation itself, and one for its chief executive officer)

Did you and your immediate family together give more than \$100.00 to any of the following during any one of the years listed? You must place a check mark "\sets" in the appropriate box, "yes" or "no" for each category and year separately.

RECIPIENT	JAN 1 - DEC 31 2022		JAN 1 - DEC 31 2023		JAN 1 - DEC 31 2024		2025 To Date	
	Yes	No	Yes	No	Yes	No	Yes	No
Democratic Party including PACs and Associations		V		~		V		V
Republican Party including PACs and Associations		V		1		V		V
Any other Party including PACs and Associations		4		~		V		~
Governor, Candidate and Committee		V		~		~		V
Attorney General, Candidate and Committee		V		~		~		~
Secretary of State, Candidate and Committee		V		1		1		~
Treasurer of State, Candidate and Committee		V		~		~		-
Auditor of State, Candidate and Committee		v		V		~		
State Senator, Candidate and Committee		1		V		V		V
State Representative, Candidate and Committee		V		~		~		V

Form 3.5, Political Contributions Report (2025)

### 3.6 PERSONNEL POLICY

A comprehensive personnel policy must be readily available and presented upon request. Items needing covered within the agency's comprehensive personnel policy are listed below.

Do you agree to provide a comprehensive personnel policy, if requested, that covers the listed items?

No	Yes

COMPREHENSIVE PERSONNEL POLICY MUST INCLUDE PROVISIONS FOR:

HIRING EMPLOYEES WITH DEPUTY REGISTRAR AGENCY EXPERIENCE
EQUAL EMPLOYMENT OPPORTUNITY
EMPLOYEE TRAINING BY THE DEPUTY REGISTRAR
PARTICIPATION IN BMV PROVIDED TRAINING
DOCUMENTED PERIODIC EMPLOYEE PERFORMANCE EVALUATIONS
(ANNUAL AT A MINIMUM)
LIST OF GROUNDS FOR DISCIPLINE OR DISMISSAL
PROGRESSIVE DISCIPLINARY ACTION
DRESS CODE WITH LISTS OF ACCEPTABLE AND UNACCEPTABLE ATTIRE
POLICY FOR MAINTAINING PROFESSIONAL APPEARANCE
FRINGE BENEFITS

### 3.7 SECURITY PLAN SUMMARY

If you are awarded a contract, you will be required to adopt a security plan to assure that agency employees, patrons, other citizens, equipment, and consigned inventory will be protected from harm (your plan should detail how you intend to address the items listed below).

If you are awarded a contract, do you agree to provide all of the following?



ELECTRONIC ALARM SYSTEM
ALARM SYSTEM MONITORED 24 HOURS, OFF-SITE
ALARM SYSTEM REPORTS OFF-SITE IF WIRES ARE CUT OR TAMPERED
ADEQUATE ALARM MONITORED PANIC/HOLD BUTTONS
MOTION DETECTORS CONNECTED TO ALARM SYSTEM
ALARM MONITORED DOOR CONTACT ON ALL EXTERIOR DOORS
ALARM MONITORED CONTACTS ON ALL EXTERIOR WINDOWS
VIDEO RECORDING CAMERA SURVEILLANCE SYSTEM
A SAFE OR SECURE LOCKING CABINET
A SECURED STORAGE ROOM WITH ALARM MONITORED CONTACTS ON DOOR(S) AND WINDOW(S)
A CROSS CUT SHREDDER
SECURELY LOCK ALL DOORS AND WINDOWS WHEN OUTSIDE BUSINESS HOURS
SMOKE, FIRED, AND CARBON MONOXIDE DETECTION DEVICES
INTERIOR/EXTERIOR MOTION ACTIVATED SECURITY LIGHTS

Note: For Deputy Provided Sites, the deputy registrar shall install and maintain an approved alarm system. At BMV Controlled Sites, either the BMV or the deputy registrar will install an approved alarm system, which will be maintained by the deputy registrar.

### 3.8 FACILITY MAINTENANCE PLAN SUMMARY

If you are awarded a contract you will be required to adopt a facility maintenance plan, including provisions for maintaining the deputy registrar agency premises. Your plan should detail how you intend to address the items listed below.

If you are awarded a contract, do you agree to be responsible for the following either on your own, through your lease or sublease, or by separate contract:

No Yes

OUTDOOR BUILDING MAINTENANCE
KEEP OUTDOOR AREA FREE OF TRASH AND DEBRIS
PROVISION TO ASSURE PROMP SNOW AND ICE REMOVAL
CLEANING INSIDE OF AGENCY INCLUDING EQUIPMENT
PROVISION FOR INSIDE/OUTSIDE MAINTENANCE
PROVISION FOR PROFESSIONAL CARPET/FLOOR CLEANING (MIN. OF ONCE A YEAR)
PROVISION FOR REPAINTING AND/OR COSMETIC UPDATES

### 3.9 INVOLVED AND INVESTED IN YOUR BUSINESS

**Instructions:** Answer all of the following questions to the best of your ability. Please be concise and attempt to limit each answer to seventy-five (75) words or less. Include attachment(s) if more space is needed to answer any of the questions.

1. How do you plan to manage, be responsible, and be accountable for this business at all times?

I will be responsible for all state monies, equipment and inventory by ensuring the facility is secure during non business hours. I have access to all cameras inside and outside of the facility on my phone. I can see and hear all operations inside of my agency.

I have several locking cabinets and drawers and all monies other than the cash drawers in use are secured in my private office and taken to the bank as soon as they open.

I also have a great staff!

2. How will you ensure that all laws, rules, guidelines and procedures are followed, at all times, specifically with regard to issuing and renewing driver's licenses, identification cards, and vehicle registrations?

My manager is my cycs and cars when I am not available. He takes his responsibilities very serious, and he knows the importance of correct procedures and accuracy. I personally review various applications that is processed for the customers for accuracy and procedures. I personally train other management to check applications properly. Even if I am not in the office, my staff knows that I will take a phone call from them if they have any questions about proper procedures. When I hire a new employees, I make it clear that if any laws are broken, law enforcement will be notified, if there are any BMV procedures not done correctly on purpose, they will be terminated and possibly investigated.

3. What measures will you put in place to detect, deter, and prevent fraud?

I currently have 8 cameras. I and my manager am able to hear most transactions well. My personal desk face all processors so I can see and hear all of their transactions. If something does not look or sound quite right, I use my monitor to zoom in and listen, or I walk behind my employees to check things out. In my absence, my manager does the same. At one time I assumed I had a thief stealing a bit from her till after she counted. I got it on camera, had law enforcement come in and we confronted her with the video and law enforcement removed her after I fired her.

4. The Bureau of Motor Vehicles routinely issues new and/or revised policy and procedural changes through email broadcasts to the deputy registrars. How will you ensure that policies and procedures are communicated to the staff and followed on a daily basis?

All broadcasts are required to be read by the employee and initialed by the employee.

I keep a book of brodcasts for quick referencing. In the event, they are absent when a broadcast comes through, I flag their time card with a "brodcast" flag, so they can sign it upon their return. I do the same thing with important emails. I put the broadcast away only after all are initialed and understood and ensure all broadcasts are accounted for numerically.

5.	How will y	ou demonstrate	good leadership to	your employees?
----	------------	----------------	--------------------	-----------------

I know my employees watch me and listen to me, so the way I treat my customers are what they are watching and learning from. I like to engage with many customers. I do not get loud or angry with any employees, I confront them when needed and I am an ear when they need one. Even though I am their employer, I prefer a friendly atmosphere in our small office. I never want my employees to fear me or dislike me. I interact with them and laugh with them. I go over procedures and problem areas. I treat them as I wish to be treated, with respect and calm.

### 6. How will you maintain a high level of professionalism each day in this business?

By having well trained and polite employees.

New staff members are trained for as long as they need training or until dismissed. If and when I see any issue with an employee and customer interaction, I will step in if needed for accuracy. In the event I find the processor was not professional in their actions, I would give them a verbal warning. If it happens again, they would receive a write up, and possible termination if it happened again.

#### 7. How do you intend to recruit and retain high quality employees?

I use the Indeed hiring app and help wanted signs in my DR. office. I personally interview all applicants. I am looking at their attire, attitude, cleanliness, resume and personality. I hire by process of elimination.

I look for friendly, well dressed, well spoken individuals.

#### 8. How will you provide a safe, clean and friendly place to do business?

During slow times we all clean. The floors are swept daily and the floors are mopped weekly. Counters are wiped down with clorox wipes or lysol wipes.

All rugs are professionally cleaned and replaced if they have rolls or wrinkles that may cause someone to stumble.

My staff is fun and friendly already as they know thats is how is should be.

#### 9. How would you deal with an irate customer?

If we cannot help the customer, they would be pulled aside and would speak with myself or managment to try and help the customer understand why we could not help them. We let them know that if we could we would help them, but we have to comply with the laws regarding the issuance of what the customers seeks. Most of the time they calm down. No one likes to be told no, and we understand that.

10. What training or advice do you, or will you, give to your employees for dealing with	irate customers?
Be kind and patient. If need be, come get me or the office manager. Normally we a anyhow and will walk into their work space and "find something to do" and listen in customer seems hard to handle we will step in and pull the customer aside and discu away from the processor. Normally its one of 2 things, they do not have what they r think we are the ones that suspended their license and they want details. So, by caln to the customer how things work by the law and BMV, they calm down and usually the processor.	ss the issue
11. How will you meet the expectations of the Bureau of Motor Vehicles?	
Strive to get excellent evaluations.  Do what is expected of me as a deputy registrar.  Be kind to staff and customers.  Get along with and respect field staff.  Obey all laws, rules and regulations.	
12. Why should the Bureau of Motor Vehicles consider you for a deputy registrar license	agency contract?
I have been a deputy registrar for almost 21 years and enjoy it.  I am honest and dedicated.  I pay attention to everything that goes on at my office.  I review applications, I interview and hire and train. I clean.  I enjoy my job!	

Form 3.9, Involved and Invested in Your Business, Page 3 of 3 (2025)

# 3.10(A) AFFIDAVIT OF INDIVIDUAL (Not to be used by County Auditors, Clerks of Counts or Nongrefit Co

County of Montgomery :	Courts of Nonprofit Corporations)
State of Ohio :  I, Denise K. Everetts, being fir	st duly sworn, depose and say that:
<ol> <li>I am submitting my proposal for appointment a capacity, and not as an agent, representative, pa whatsoever of any other person or persons;</li> </ol>	artner, or business associate of any kind
<ol> <li>If appointed, I will serve as a deputy registrar in m as an agent, representative, partner, or business ass person or persons;</li> </ol>	y own individual capacity, and will not act ociate of any kind whatsoever of any other
<ol> <li>If appointed as deputy registrar, I will not assign n part, nor any of my deputy registrar's responsibilit the advance written consent of the Registrar;</li> </ol>	ny deputy registrar contract, in whole or in ies to any other person or persons without
4) If appointed as a deputy registrar, I will fully con Registrar. I will not serve as an office manager of own; nor will I permit any other deputy registrar, parent, child, brother, or sister of any deputy registrar ago deputy registrar to operate my deputy registrar ago that I may hire the spouse, parent, child, brother, employee, provided that I maintain control of m	any deputy registrar agency other than my the spouse of any deputy registrar, or the trar living in the same household as the ency, directly or indirectly. I understand or sister of any deputy registrar as an
5) To the best of my knowledge and belief, I am ful and there is no provision of the Ohio Revised Coo would make me ineligible to serve as a deputy regi	de or the Ohio Administrative Code which
6) I have caused to be prepared, have read, and to documents submitted with this proposal. All info the best of my knowledge and belief. This affida obtaining a deputy registrar contract.	rmation is true, accurate, and complete to
	1
Signature of proposer:	urla)
Printed/typed name of proposer: Denise K. Ev	/eretts
Sworn to and subscribed in my presence by the above	named Depise K Everetts
on this 27+ day of day of	, 2025
Notary Public	HEATHER D BACO Notary Public
Printed name of Notary Public: He ATIHER	BANGE State of Ohio My Comm. Expire

My commission expires: 05-04-2027

#### 4.0 OPERATIONAL CHECKLIST

Proposer's Full Legal Name	DENISE KAY EVERETTS	
29-B Location Number		
Proposer Number ( <i>BMV use</i>	only)	

<u>INSTRUCTIONS</u>: You must submit one original of this form and all documents listed on this form **FOR EACH SITE YOU ARE PROPOSING**.

FORM	DESCRIPTION	X	BMV
4.0	Operational Checklist (this form)	~	
4.1	Appointment of Agency Managers	~	
4.2	Experienced Employees Summary	~	
4.3	Staffing and Personnel Costs Calculation	~	
4.4	Start-Up Costs Calculation Amount: \$		
4.5	Deputy Registrar Contract (2 pages only)	~	

## 4.1 APPOINTMENT OF AGENCY MANAGERS

Prop	DENISE K. EVERETTS	29-B Location number:	
(A)	DEPUTY REGISTRAR: As deputy registrar, I agree to wo hours per week during the hours the agency is open to the entire term of the contract. I understand that the minimum is twenty (20) hours per week during the hours the agency twenty-hour requirement does not apply to County Aud nonprofit corps., or deputy registrars operating multiple loc	public for business throughout the requirement for deputy registrar is open for business. This ditors/Clerks of Courts	rs
(B)	OFFICE MANAGER: I understand and agree that I must another reliable person to serve as the office manager for manager must be scheduled to work at the agency at least during the hours the agency is open to the public for busine.  Appoint myself as the office manager and work a during the hours the agency is open to the public for Appoint another reliable person to serve as the office six hours per week during the hours the agency is open.	the agency, and that the office thirty-six (36) hours per week ss. It is my intention to: at least thirty-six hours per wee business.	k
(C)	ASSISTANT OFFICE MANAGER: I understand and agreers person to be responsible for the management of the agency agency office manager during the hours the agency is open	in the absence of myself and the	e e
(D)	OTHER EMPLOYEES: I agree to maintain an accurate manager, assistant office manager, and all other employees as my own work schedule, on file and available for inspitimes. I also agree to notify the BMV in writing improprintment of the office manager or assistant office manager complete and current.	and their work schedules, as well ection by BMV employees at all nediately of any changes in the	ll ll e
Dep	uty registrar (proposer) signature	1/27/2025 Date:	

## 4.2 EXPERIENCED EMPLOYEES SUMMARY

Proposer's name:	Location number: 29-B
(A) HIRING EXPERIENCED EMPLOYEES. I certify that registrar under contract with the Registrar of Motor Vehicle effort to hire and retain qualified employees who have redeputy registrar agency. I agree to make bona fide offers wages and under comparable conditions to their most receive experience.	les, I will make every good faith elevant experience working in a s of employment at comparable
(B) CHECK WHICHEVER APPLIES:	
I HAVE NOT BEEN A DEPUTY REGISTRA  EMPLOYEE. I have not yet identified any pro- relevant deputy registrar experience. However, if every reasonable effort to identify and hire, if po- have relevant experience working in a deputy re contact any deputy registrar employees until a contract.  I AM OR HAVE BEEN A DEPUTY REGISTRA  EMPLOYEE. I have identified the following pers fide offer of employment at comparable wages an to their present employment. (A deputy registrar registrar employment experience may list himself	awarded a contract, I will make awarded a contract, I will make assible, qualified employees who registrar agency. Please do not after you have been awarded a AR OR DEPUTY REGISTRAR cons to whom I will make a bona and under comparable conditions or a proposer who has deputy
	ence.
(C) I understand that failure to hire properly qualified and employees is grounds to withhold or terminate my deputy re	d experienced deputy registrar egistrar contract.
Deputy registrar (proposer) signature	1/27/2025 Date:

Form 4.2, Experienced Employees Summary (2025)

### 4.3 STAFFING AND PERSONNEL CALCULATION

Proposer's name:	DENISE EVERETTS	Location number:	29-B

<u>Instructions</u>. Use this form to project the number of hours the deputy registrar, office manager, assistant office manager, and all other experienced (if known) and/or new hire employees will work, the projected hourly wages paid, and the weekly and monthly payroll costs.

The deputy registrar shall be regularly scheduled and on duty at the license agency at least twenty (20) hours per week, during regular business hours. This twenty-hour requirement does not apply to nonprofit corps., county auditors/clerks of court, or deputy registrars operating multiple locations (assessed as received). The deputy registrar shall appoint a full-time office manager, who shall be either the deputy registrar or a full-time employee with responsibility for management of the agency. The office manager shall be regularly scheduled, and shall work at least thirty-six (36) hours per week during regular business hours. The deputy registrar shall also designate an assistant office manager who shall supervise the agency in the absence of the deputy registrar and the full-time office manager.

The projected total weekly work hours for the deputy registrar and all employees should equal or exceed the minimum staffing recommended for the Class Size Agency as prescribed in the Agency Specifications.

In accordance with the standards established by the Unites States Department of Labor, Wage and Hour Division; Ohio Constitution; and Ohio Department of Commerce; all license agency employees must be paid at least the current minimum wage rate of \$7.25 per hour by businesses with gross receipts of less than \$394,000 per year and \$10.70 per hour by businesses with gross receipts of \$394,000 or more per year.

The deputy registrar need not list any salary or wages for the deputy's own service as deputy registrar or as the office manager.

Caution. For deputy registrars who also serve as the office manager, be careful not to duplicate hours worked.

EMPLOYMENT POSITION	PROJECTED HOURS PER WEEK	PROJECTED HOURLY RATE	PROJECTED WEEKLY PAY	PROJECTED MONTHLY PAY (weekly x 4)
Deputy Registrar	20.00	N/A	N/A	N/A
Office Manager (leave blank if the Deputy Registrar is also the Office Manager)	36.00	\$ 18.00	\$ 648.00	\$ 2,592.00
Assistant Office Manager	34.00	\$ 16.25	\$ 552.50	\$ 2,210.00
Experienced Employees Total Number (combine Full-time & Part-time) = 1	30.00	\$ 14.00	\$ 420.00	\$ 1,680.00
New Hire Employees Total Number (combine Full-time & Part-time) =2	60.00	\$ 12.00	\$ 720.00	\$ 2,880.00
TOTALS	180.00	N/A	\$ 2,340.50	\$ 9,362.00

Form 4.3, Staffing and Personnel Calculation (2025)

## 4.4 START-UP COSTS CALCULATION

Propos	ser's n	ame:	DENISE EVERETTS	Location number:	29-B		
costs (	of beg	ginning	is form is to assure the BMV g a deputy registrar business. s to cover your personnel, site	We need to know that you	have enough		
1.	PE	RSO	NNEL COSTS (FOUR V	VEEKS)			
	Use Form 4.3 to calculate four (4) weeks' personnel costs for this location.  \$9362.00						
2.	SIT	E PR	REPARATION COSTS	(AMORTIZED)			
	A.	A. If this is a Deputy Provided Site, calculate and enter the actual projected costs you will need to spend to prepare the building for use as a deputy registrar agency in each of the following categories:					
		1.	<b>Building Modifications</b>	\$			
		2.	Counter Costs	\$			
		3.	Other Costs	\$			
		4.	Total	\$			
			amortized over 60 month co	ntract period = \$	-		
	B. If this is a BMV Controlled Site, enter the information contained in the Agency Specifications for this location. Do not change the information from the Agency Specifications.						
3.	AG	ENC	Y RENTAL PAYMENT	'S (3 MONTHS)			
	A. If this is a Deputy Provided Site, enter the actual amount you will pay t rent or lease this site.						
	В	Agen	is is a BMV Controlled Sincy Specifications for this site month's rent:  \$ \begin{align*} 2053	te, enter the estimated rent Do not change the amount .56 x 3 = \$ 6160	at listed.		
TOTA	[four	week prepar	T-UP COSTS s' personnel costs, plus one mation costs (2.A total amount) Site amount), plus three months.	nonth's amortized			

#### STATE OF OHIO

#### DEPARTMENT OF PUBLIC SAFETY

#### **BUREAU OF MOTOR VEHICLES**

#### **DEPUTY REGISTRAR CONTRACT - 2025**

inis Agreement	is made by and i	between the Re	gistrar of M	lotor Vehicles, (Registrar,
herein), located Denise K. Everett	at 1970 West	Broad Street,		Ohio 43223-1102 and y registrar, herein) whose
home mailing add	dress is			, and the second second
(City)		, Ohio (Zip	) 45430	, to operate a deputy
registrar agency,	Location No. 29-E	3	, to be	located as follows: in the
State of Ohio, Co	unty of Greene			
City/Village/Tow	nship (indicate whi	ich) City	of	Beavercreek
Street address:	1221 Meadow Bridg	ge Dr. Suite B		
(City) Beavercre	eek	, Ohio	(Zip) 45434	

WHEREAS, the Registrar of Motor Vehicles, pursuant to section 4503.03, section 4507.01, and other applicable sections of the Ohio Revised Code, wishes to appoint and contract the above named person as deputy registrar for the above referenced location;

WHEREAS, the above named deputy registrar wishes to accept this appointment and contract as deputy registrar;

#### NOW, THEREFORE, IT IS AGREED AS FOLLOWS:

- The Registrar hereby appoints the above named person as a deputy registrar subject to the 2025 Deputy Registrar Contract Terms and Conditions which are incorporated herein by reference;
- The above named person hereby accepts appointment as a deputy registrar subject to the 2025 Deputy Registrar Contract Terms and Conditions incorporated herein by reference;
- 3. The term of this appointment and contract shall begin on the 29th day of June, 2025, and shall end on the 29th day of June, 2030, unless otherwise terminated as provided herein;

#### Form 4.5, Deputy Registrar Contract (2025)

	The deputy registrar is appointed and accepts appointment in the capacity of [state when "an individual," "County Auditor for (specify county)," "Clerk of Courts for (specify county)," or "a nonprofit corporation"]:  an individual	ther: cify
5 Dep	The Deputy Registrar certifies that he or she has read, understands, and hereby agree to all of the 2025/Deputy Registrar Contract Terms and Conditions incorporated herein uty Registrar signature  1/29/2025  Date	s
	UNTY OF Montomery	
nam	Denise Kay Everetts  , who acknowledged that he or she did the foregoing instrument and that the same is his or her free act and deed.	
of J	WITNESS WHEREOF I have hereunto set my hand and official seal, this day	
Print	ited name of Notary Public: HEATHER DBACK	
STA DEP	ATE OF OHIO PARTMENT OF PUBLIC SAFETY REAU OF MOTOR VEHICLES  HEATHER D BACK Notary Public State of Ohio My Comm. Expires May 4, 2027	
BY:	REGISTRAR OF MOTOR VEHICLES	
	Done at Columbus, Ohio, on	