PAYROLL COMPARISON - 2025

Proposer Name: Raechal Towner

Evaluator Printed Name: Miles Grilliot

				lumber(s)		THE REAL PROPERTY.
	<u>Loc. 1</u> 04-B	Loc. 2	Loc. 3	<u>Loc. 4</u>	Loc. 5	Loc. 6
Highest Rate	\$15/h					
Lowest Rate	1814/h					
Number of Hours Recommended	134					
Number of Hours Proposed	166					
Total Monthly Wages	\$7,960		***************************************	***************************************		**********
Comments:						
×						

PERSONAL EVALUATION (2025)

Raechal Towner 04-B / 25056 Ashtabula County, Ashtabula 858 Lake Ave

Evaluation Toom Number:		
Evaluation Team Number:		
Location(s) Proposed: (#1)		x
Proposed as 2 nd Location		
Verify Proposer's Full Name: (#2) Racchal Molgan	Towner	
Proposer's County of Residence (NPC Operation	 	
Verify Proposer's Driver's License Number: (#6		
Proposing as Minority: (#9) Yes No X		
Proposing as: (#10) Individual Clerk of Courts Co	o. Auditor Nonprofit Corp.	
SCORING SUMMAR	RY	
FORM 3.0, PERSONAL CHECKLIST	(Max. 16 Points)	
PERSONAL EVALUATION, Page 2	(Max. 55 Points): 55	
BUSINESS AND EMPLOYMENT EXPERIENCE, Page 3	(Max. 100 Points): Loo	
PERSONAL EVALUATION, Page 5	(Max. 28 Points): 28	
PERSONAL EVALUATION, Page 6	(Max. 17 Points):	
PERSONAL EVALUATION, Page 7	(Max. 27 Points): 27	
PERSONAL EVALUATION, Page 8	(Max. 15 Points):	
TOTAL POINTS	(Max. 258 Points): 25	6
Comments:		
Evaluators' Signatures Evaluators' F	Printed Names Date	2
(1) Miles Miles	Griller or.	24.45
(2)		
\-\frac{1}{2}		

	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)	(5)	*
2.	Proposer does not hold an overlapping deputy registrar contract? (#13) If contract overlaps, what is the expiration date of the contract?	Ø	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)	<u></u>	*
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)	B	*
7.	Proposer states no criminal conviction within the last 10 years? (#21)	6	*
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)	6,	*
11.	Acceptable educational information OR nonprofit corporation? (#25)	6)	0
12.	Proposer has computer training or experience? (#26)	9	0
	PERSONAL EVALUATION POINTS, Page 2 (Max. 55 Points).	55	_
NO	TE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract con	tingency	I¥IT
Com	nments:		
-			_
53			_

 Manager or Supervisor (25) _______ Deputy Registrar Employee (23) _______ Other Employee (20) _______

 Hours per week: ________ To (date): _______ x Years ______ x Points ______ = _______

 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)

From (date); ______ To (date): _____ Length; _____

Verified Hours _____ = Factor ____ x Years ___ x Points __ =

Hours per week:

BUSINESS AND EMPLOYMENT EXPERIENCE CALCULATION

ITEM AGENCY/COMPANY	H	ours		FACTO	RXY	/EAR	S X F	POINTS	s = .	SCORE	VERIFIED
A. Deputy Registral	#	NA	=	1.0	Х	2	X	50	=	250	~
B _*	#	NA	=	1.0	Χ		Х	50	=		
C.	#	NA	=	1.0	X		X	50	=		
		S	ubt	otal of	13-	A, 13	8-B &	13-C	= 1		

14. OTHER BUSINESS OWNERSHIP Experience, Form 3.2

ITEM AGENCY/COMPANY	HOU	RS = FAC	TOR X YEA	ARS X F	POINTS	; =	SCORE	VERIFIED
A.	#	100	Χ	X	34	=		
В,	#		Х	Х	34	=		
C,	#	=	X	X	34	=		
		Subtota	l of 14-A,	14-B 8	14-C			

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

ITEM AGENCY/COMPANY	HOU	RS = FAC	TOR X YEA	RS X I	POINTS	3 = 3	SCORE	VERIFIED
A.	#	=	Х	X	25	=		
B.	#	=	X	X	25	=		
C.	#	=	X	X	25	=		
	Chica Milita	Subtota	I of 15-A,	15-B 8	15-C	=		

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

16. DEPUTY REGISTRAR EMPLOYMENT (NON-MANAGEMENT) Experience, Form 3.2

ITEM AGENCY	HOU	RS = FAC	TOR X YEA	ARS X I	POINTS	s =	SCORE	VERIFIED
A.	#	=	X	Х	23	=		
B,	#	=	X	Х	23	=		
C.	#	=	X	X	23	=		
D.	#	=	Х	X	23	=		
	Subt	otal of 16	S-A, 16-B,	16-C 8	16-D	=		

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

17. OTHER EMPLOYMENT Experience, Form 3.2

ITEM AGENCY/COMPANY	HOUR	S = FAC	TOR X YEA	RS X	POINTS	; =	SCORE	VERIFIED
A.	#	=	X	×	20	=		
B.	#	=	Х	X	20	=		
C.	#	=	Х	X	20	=		
D.	#	=	Х	X	20	=		
Su	btotal of L	ines 17	-A, 17-B,	17-C 8	17-D	=		

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

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



f N	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?	CÎ	*
	B. Are funds in proposer's or proposer's business name or joint with spouse?	(2)	*
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)	79	*
21.	Form 3.6 – Personnel Policy Summary		
21.	Does proposer agree to provide/maintain a written personnel policy covering the follow	vina:	
	A. Hiring employees with deputy registrar agency experience?	li ig.	
	B. Equal Employment Opportunity?	1	
	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?	17	0
	H. Dress code with list of acceptable attire?		
	Dress code with list of unacceptable attire?		
	J. A policy for maintaining the professional appearance of all staff at all times?		
	K. Fringe benefits (beyond those required by law or contract)?		
	PERSONAL EVALUATION POINTS, Page 5 (Max. 28 Points)	28	
NOT	E: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract cont	ingency	•
Com	ments:		

1	PERSONAL EVALUATION	ОК	NO
22.	. Form 3.7 – Security Plan Summary - Did proposer agree to provide:		
	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)	760	
	 J. Secured storage room with alarm monitored contacts on door(s) and window applicable? (Mandatory) 	w(s), if	
	 Cross cut shredder to be made available to destroy customer copy records' (Mandatory) 	?	
	 All doors and all windows will be securely locked when license agency is cle (Mandatory) 	osed?	
	M. Smoke, fire, and carbon monoxide detection devices (Mandatory)?		
	N. Interior/Exterior motion activated security lights? (Suggested) – Check OK of	or NO OK	ON
23.	Form 3.8 – Facility Maintenance Plan Summary - Did proposer agree to provide	:	
	A. Indoor/Outdoor maintenance and cleaning?	0	0
	B. Prompt snow and ice removal?	0	0
	C. Carpet and/or floor cleaning (if appropriate)?	a ^s	0
	D. Repainting?	0	0
NOT	PERSONAL EVALUATION POINTS, Page 6 (Max. 17 Point TE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to cont		Z
Com	nments:		_

24. Form 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? 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? 3. What measures will you put in place to detect, deter, and prevent fraud? 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? 5. How will you demonstrate good leadership to your employees? 6. How will you maintain a high level of professionalism each day in this business? 7. How do you intend to recruit and retain high quality employees? 8. How will you provide a safe, clean, and friendly place to do business? 9. How would you deal with an irate customer? 10. What training or advice do you, or will you, give to your employees for dealing with irate customers? 11. How will you meet the expectations of the Ohio Bureau of Motor Vehicles? 12. Why should the Ohio Bureau of Motor Vehicles consider you for a deputy registrar license agency contract? 25. Form 3.10(A) (B) or (C) – Affidavit of Individual, Auditor/Clerk of Courts or Nonprofit Corporation A. Did proposer submit proper affidavit without alteration and does it appear to be complete, accurate, and truthful? B. Is it the affidavit duly signed and notarized? 26. Local Law Enforcement Report / Articles of Incorporation (AOI) A. No disqualifying convictions for individual / AOI for nonprofit corporation? B. No convictions (except minor traffic) / AOI for nonprofit corporation? 27. BCI / FBI Criminal Background (WebCheck) Report / AOI for Nonprofit Corporation?	h-li		PERSONAL EVALUATION	ОК	NO
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12. Why should the Ohio Bureau of Motor Vehicles consider you for a deputy registrar license agency contract? 25. Form 3.10(A) (B) or (C) – Affidavit of Individual, Auditor/Clerk of Courts or Nonprofit Corporation A. Did proposer submit proper affidavit without alteration and does it appear to be complete, accurate, and truthful? B. Is it the affidavit duly signed and notarized? 26. Local Law Enforcement Report / Articles of Incorporation (AOI) A. No disqualifying convictions for individual / AOI for nonprofit corporation? B. No convictions (except minor traffic) / AOI for nonprofit corporation? 27. BCI / FBI Criminal Background (WebCheck) Report / AOI for Nonprofit Corporation		10.		J	0
Solution Solution		11.	How will you meet the expectations of the Ohio Bureau of Motor Vehicles?	d	0
A. Did proposer submit proper affidavit without alteration and does it appear to be complete, accurate, and truthful? B. Is it the affidavit duly signed and notarized? * Local Law Enforcement Report / Articles of Incorporation (AOI) A. No disqualifying convictions for individual / AOI for nonprofit corporation? B. No convictions (except minor traffic) / AOI for nonprofit corporation? D. BCI / FBI Criminal Background (WebCheck) Report / AOI for Nonprofit Corporation		12.		ð	0
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A. No disqualifying convictions for individual / AOI for nonprofit corporation? B. No convictions (except minor traffic) / AOI for nonprofit corporation? 27. BCI / FBI Criminal Background (WebCheck) Report / AOI for Nonprofit Corporation				(2)	*
A. No disqualifying convictions for individual / AOI for nonprofit corporation? B. No convictions (except minor traffic) / AOI for nonprofit corporation? 27. BCI / FBI Criminal Background (WebCheck) Report / AOI for Nonprofit Corporation	26.	Lo	cal Law Enforcement Report / Articles of Incorporation (AOI)		
B. No convictions (except minor traffic) / AOI for nonprofit corporation? 27. BCI / FBI Criminal Background (WebCheck) Report / AOI for Nonprofit Corporation				3	*
		В.	No convictions (except minor traffic) / AOI for nonprofit corporation?		0
No disqualifying convictions for individual / AOI for nonprofit corporation? (5) *	27.			7	

PERSONAL EVALUATION POINTS, Page 7 (Max. 27 Points)

	PERSONAL EVALUATION	ОК	NO
28.	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	1	
	A. Credit report submitted contains credit score?	(2)	0
	B. No tax liens (state or federal)?	3	0
	C. No judgments for the past 36 months?*	3	0
	D. *No bankruptcy filed or trusteeship imposed for the past 36 months?	02	0
	E. *No other negative items (charge-offs, collections, etc.) for the past 36 months?	2	0
	F. *No negative items (pattern of delinquencies, etc.) for the past 60 months?	0	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)	3	0
	PERSONAL EVALUATION POINTS, Page 8 (Max. 15 Points)	13	

NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.

Comments: T+eM	in Collections	Within	lost 3	36	months.
<u></u>					
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OPERATIONAL EVALUATION (2025)

Raechal Towner 04-B / 25056 Ashtabula County, Ashtabula 858 Lake Ave

FORM	DESCRIPTION	ОК	NO				
4.0	Operational Checklist – Maximum = 6 Points (enter points recorded on bottom of Form 4.0)						
4.1	Appointment of Agency Managers						
	A. Deputy to Work at Least Twenty (20) Hours Per Week	(5)	*				
	Proposed Work Hours Per Week	6	*				
	B. Appointment of Manager and Assistant OR Acceptable Statement						
4.2	4.2 Experienced Employees Summary						
	Gave Acceptable Statement OR Provided Names	(2)	0				
4.3	Staffing and Personnel Calculation						
	A. Hours Recommended: 134 Proposed: 166	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)	, a				
4.4	Start-Up Costs Calculation						
	A. Adequate and Accurate Personnel Costs						
	B. Adequate and Accurate Site Preparation Costs						
	C. Adequate and Accurate Rental Payments						
	D. Total Required: \$ District On Deposit (Form 3.4): \$ 5,800 T						
4.5	Deputy Registrar Contract						
A. Filled Out Completely and Properly							
B. Signed and Properly Notarized							
NOTE: Score	OPERATIONAL EVALUATION POINTS (Max. 40 Points) e Indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract	Continger	ncy.				
Comments							
-							
(1) Evaluation	Miles J. Ghill	<u>Date</u> 2.23	25.25				
(2)							

3.0 PERSONAL CHECKLIST

Proposer's Full Legal Name Raechal Morgan Towner

Proposer Number (BMV use only)	
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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	√	вму	COUNTY AUDITOR OR CLERK OF COURTS	√	вму	NONPROFIT CORPORATION	√	вму
Form 3.0 Personal Checklist (this form)	✓		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	✓		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	✓		N/A	х	1	Form 3.4 Start-Up Cost Funds on Deposit		
Form 3.5 Political Contributions Report	✓		N/A	х	1	Form 3.5 Political Contributions Report Nonprofit Corporation		
N/A	x	1	N/A	х	1	Form 3.5 Political Contributions Report Chief Executive Officer		
Form 3.6 Comprehensive Personnel Policy Agreement	✓		Form 3.6 Comprehensive Personnel Policy Agreement			Form 3.6 Comprehensive Personnel Policy Agreement		
Form 3.7 Security Plan Agreement	✓		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	✓		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	✓		Form 3.10(B) Affidavit of Auditor or Clerk of Courts			Form 3.10(C) Affidavit of Nonprofit Corporation		
2025 Credit Report	✓		N/A	X	1	2025 Certificate of Good Standing		
2025 Local Law Enforcement Report	✓		2025 Local Law Enforcement Report			Articles of Incorporation		
2025 WebCheck Receipt	✓		2025 WebCheck Receipt			N/A	X	1
Pre-approval Statement for \$25,000 Bond	✓		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:
	04-B
2.	Full legal name of proposer Raechal Morgan Towner
	NI/A
7.	Spouse's name (nonprofit corporation N/A) N/A
8.	Spouse's home street address (nonprofit corporation N/A) N/A
	City State Zip code
9.	Are you proposing as the owner of a minority business enterprise (MBE)? No Yes
10	. 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.	Are you currently serving in elective public office, other to Auditor, either by election or appointment (includes precinct co		•
		Yes	No √
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)	Yes	No
B.	If YES, what office?		
13. A.	Are you currently a deputy registrar?	Yes _ 🗸	No
B.	If YES, on what date does your contract expire? 6/28/2025		
C.	If YES, have you served as a deputy registrar continuously since January 1, 1992?	No	
14. A.	Is your spouse currently a deputy registrar? (NPC N/A)	Yes	No
B.	If YES, on what date does your spouse's contract expire?		
	e following three questions, extended family includes your speer, father-in-law, mother-in-law, brother-in-law, sister-in-law, so		
15. A.	Does any member of your extended family currently hold a	deputy registr	ar contract? (NPC
	N/A)	Yes	No
В.	If YES, list their name, relationship to you, whether you shat their contract expires here:	re the same ho	ousehold, and date
N	ame Relationship Same	Household	Contract Expires
	Yes	No	
		No	
_			
16. A.	To the best of your knowledge, will any member of your extend submit a proposal in response to this RFP? (NPC N/A)	led family	
		Yes	No

Form 3.1, Personal Questionnaire, Page 2 of 6 (2025)

B. If YES, list their name, relationship to you, ar	nd whether you share the san	ne household:
Name	elationship	Same Household
		Yes No
17. A. Is any member of your extended family empl Public Safety? (NPC N/A)		
	Yes _	No ✓
B. If YES, list their name, relationship to you, an	nd the date they became so en	mployed:
Name	Relationship	Employment Date
	•	
10 A II 14-14h - D-1'4'1 C4-'h-4'-		
 A. Have you completed the Political Contribution (NPC must submit one for NPC itself and one 		Yes_ ✓
B. If "NO," are you applying as a Clerk of Cour	ts or County Auditor? No	Yes
	_	
19. A. Are you an employee of the State of Ohio? (N	(PC N/A) Yes _	No ✓
B. If "YES," will you resign, if appointed?	No _	Yes
20. Are you an insurance company agent, writing aut	omobile insurance?	
(NPC N/A)	Yes _	No
21. Has Proposer (including NPC and proposed offic		
of a crime punishable by death or imprisonment		_
involving dishonesty or false statement?	_	
	Yes _	No
22. As of the date of this certification does Procompensation contributions, social security payn the State of Ohio or any political subdivision them.	nents, or workers' compensat	tion premiums either to
or locality within the United States?	••	/
	Vac	No.

atisfactory the Bure	to the Registrate of Motor Ve	rar and chicles,
No	Yes	✓
No	Yes	✓
	_	-
No	Yes	✓
	Zip 440	04
ity	-	
	Zip 440	04
V/A	1	
е		
	Zip 440	04
V/A	-	
erating B ter systen	MV computers as operated or the second secon	s. For used in
	No If apply the license No No If apply the license No Ity Ity	Zip 440 N/A e Zip 440

f "YES" please explain all computer experience in detail.						
have extensive computer experience both in business and personal. I have accounting/financial experience in						
Microsoft Money and POS operationg systems. I have extensive word processing use with Microsft Works,						
Microsoft Office, Microsoft Excel, Microsoft Word, and Adobe. Email and messaging experience with Gmail, Outlook,						
FaceTime and iMessage, Skype, and Microsoft Teams. I also have quite extensive tax preparation experience with						
programs such as Drake, Fusion Tax, Phoenix, TaxACT and TurboTax. My most relevant computer experience is						
operating BASS system and the experience and knowledge I have gained working as a clerk in the agency over the						
years and hope to continue gainining experince if granted another contract.						
27. 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.						
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						
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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*.

Proposer's name Raechal M Towner Company name Ashtabula License Burea Company address 858 Lake Avenue City Ashtabula State Ohio Zip 44004 Telephone (440) 964-7665 Type of business (deputy registrar, retail grocery, etc.) Deputy Registrar Company's products and/or services Issuing state identification cards, TIPICS and drivers licenses, vehicle registrations, temporary testing, voter registrations, hunting/fishing and dog licenses, notary services.	cle
Type of business (deputy registrar, retail grocery, etc.) Deputy Registrar Company's products and/or services Issuing state identification cards, TIPICS and drivers licenses, vehice registrations, temporary testing, voter registrations, hunting/fishing and dog licenses, notary services.	
Type of business (deputy registrar, retail grocery, etc.) Deputy Registrar Company's products and/or services Issuing state identification cards, TIPICS and drivers licenses, vehice registrations, temporary testing, voter registrations, hunting/fishing and dog licenses, notary services.	
registrations, temporary testing, voter registrations, hunting/fishing and dog licenses, notary services	
المراجع	
BUSINESS OWNER - Form of ownership (sole proprietor, partner, etc.): Sole proprietor	
1. Federal Tax ID Number:	
2. Percentage of business you owned:	6
3. Dates you operated this business: From: month 6 year 2020 To: month current year	
4. Is/was this business profitable? No Yes	\checkmark
5. Is/was this business your primary source of income and support? No Yes	✓
6. Do/did you directly hire, evaluate, train, and discipline employees? No Yes	✓
7. Do/did you directly manage employees on a daily basis? No Yes	✓
If you answered yes to question number 6, how many employees do/did you manage? 6	-8
8. Have you ever developed a comprehensive business plan? No Yes	
List at least one person, not a relative of yours, who can verify this experience. If we cannot con least one person to verify this experience, you will not receive any credit for it. (If you are a registrar or deputy registrar employee, you may list BMV employees to verify that experience.)	
Name City State Zin Davtime Pho	ne

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*.

Proposer's name Raechal M	Town	er	Company n	ame Asht	abula License Bureau	
Company address 858 Lake Avenue City Ashtabula						
State Ohio			_ Telephone (440) _	964-7665	
Type of business (deputy registr	ar, retai	l grocery, etc.)	deputy regi	strar		
Management/supervisory duties expediting customers, payr						
MANAGER OR SUPERVISOR	R - Job ti	_{itle:} Assistar	nt Manager			
1. Title of position Assista	ant Ma	anager		Hours wo	orked weekly? 36	
2. Dates this position was he	eld: Froi	n: month7	'year2017	7_To: mon	th 6 year 2020	
3. Do/did you directly hire, e	evaluate	, train, and dis	cipline employe	es? No	✓ Yes	
4. Do/did you directly mana	ge/super	vise employee	es on a daily bas	is? No	Yes _ ✓	
If you answered yes to qu	estion n	umber 4, how	many employee	es do/did y	ou manage? 3	
5. Have you ever developed	a comp	rehensive busi	ness plan?	No _	√ Yes	
List at least one person, not a re- least one person to verify this e registrar or deputy registrar emp	experien	ice, you will r	not receive any	credit for	it. (If you are a deputy	
Name C	ity		State	Zip	Daytime Phone	

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.

Proposer's name Raechal M Towner	Company name Liberty Tax Service			
Company address 1724 E Prospect Ave	Ashtabula			
State Ohio Zip 44004	Telephone (440) 992-6000			
Type of business (deputy registrar, retail grocery,	etc.) Tax preparation services			
	aployees, office inventory, tax preparation, sorting			
and filing customer files, staff scheduling, con	npleting online trainings, money handling			
MANAGER OR SUPERVISOR - Job title: Mana	ager			
1. Title of position Office Manager	Hours worked weekly?40			
2. Dates this position was held: From: month	1 year 2019 To: month 5 year 2020			
3. Do/did you directly hire, evaluate, train, and	discipline employees? No Yes			
4. Do/did you directly manage/supervise emplo	oyees on a daily basis? No Yes			
If you answered yes to question number 4, h	ow many employees do/did you manage?			
5. Have you ever developed a comprehensive b	ousiness plan? No Yes			
List at least one person, not a relative of yours, wheast one person to verify this experience, you wiregistrar or deputy registrar employee, you may list	no can verify this experience. If we cannot contact at ll not receive any credit for it. (If you are a deputy that experience.)			
Name City	State Zin Davtime Phone			

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*.

Proposer's name Raechal M Towner	Company name Family Video			
Company address 1818 W Prospect Rd	City Ashtabula			
State Ohio Zip 44004	Telephone ()N/A			
Type of business (deputy registrar, retail grocery, etc.)	entertainment/ retail			
EMPLOYEE - Job title: Cashier				
Hours worked weekly 30 Job duties _	organizing and stocking movie shelves, completing daily			
reports and inventory, scheduling employees, making bank	deposits, money handling and use of the POS system,			
direct customer relations, daily cleaning				
Dates of this employment: From: month yea	ar <u>2016</u> To: month <u>07</u> year <u>2018</u>			
Describe how and to what extent you provided high q	quality customer service at this position:			
I always provided excellent customer service at the	his position by learning the customers names			
and creating relationships with the customers. Mo	ost of my shifts I spent in the store alone so I			
did my best to remain diligent and on task with my	duties while being friendly and approachable.			
List at least one person, not a relative of yours, who c least one person to verify this experience, you will n registrar or deputy registrar employee, you may list BM	not receive any credit for it. (If you are a deputy			
Name City	State Zip Daytime Phone			

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*.

Proposer's name Raechal	M Towner	Company name Buf	Company name Buffalo Wild Wings			
Company address 1550 E		Bowli	ng Green			
State Ohio	Zip43402	2 Telephone (419) _	353-2999			
	gistrar, retail grocery,	etc.) restaurant/sports b	ar			
EMPLOYEE - Job title: Se	erver/Cashier					
Hours worked weekly		waiting on tables, takin	ig orders, use of POS			
		, basic cleaning duties, mul	titasking and time			
management, expediting	orders in the kitche	n, remaining calm under int	tense pressure			
		year 2012 To: month				
		nigh quality customer services that I received from the tables t				
quality customer service was the	only option. I tried my bes	t to be as approachable and easy to	talk to as I could while			
always keeping a smile on my fac	ce as to never let the custo	omer see me overwhelmed in such a	ı fast paced environment.			
least one person to verify t	his experience, you	who can verify this experience will not receive any credit for list BMV employees to verify State Zip	r 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*.

Proposer's name Raechal M Towner	Company name BGSU- Athletics			
Company address 1610 Stadium Drive	City Bowling Green			
State Ohio Zip 43402	Telephone (419) 372-2531			
Type of business (deputy registrar, retail grocery, et	c.) Video/photography			
EMPLOYEE - Job title: Coaches Video Assis	stant			
Hours worked weekly 20-30 Job dutie	My main job duty was to handle the camera and video			
equipment and to videotape the BGSU football team from	n the sideline or endzone for all team summer camps,			
practices, and games. The job also required that I travele	ed with the team to away games sometimes by airplane.			
Dates of this employment: From: month	year 2010 To: month 12 year 2013			
Describe how and to what extent you provided high	quality customer service at this position:			
The position required that I handle myself in a very profes	ssional manner around the stadium as I worked very			
closely with the coaching and team staff. I did so by main	ntaining a nice and clean physical appearance and			
making myself approachable and available for other tasks	s around the office and stadium when needed.			
least one person to verify this experience, you will registrar or deputy registrar employee, you may list I				
Name City	State Zip Daytime Phone			
	-			

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):

If I am awarded the contract, I will ensure that my employees and myself read thoroughly through the manual once a year in addition to keeping up to date with manual updates as they are submitted by the BMV as they become available. I will also ensure that all of the Broadcasts are initialed by each employee, as required, but also vastly comprehended by each employee. I believe that my employees being knowledgable and confident in their duties will ensure that our customers leave the agency well-informed and pleased with their experience. I will encourage my employees to view the BMV from the other side of the counter in the customers shoes to help fill the void with what we know and what they understand about BMV operations and to do so with a smile. My agency is and will remain a friendly and approachable business and I pride myself and my employees for being known as such to locals in the area. I have seen an influx of customers coming to my agency for knowledge testing at our kiosk after I recently had a sit down meeting with some high school representatives who would be able to assist teens at our local high school prepare for and obtain their TIPIC. I will continue outreach as our testing kisok is a relatively new addition to my agency so customers know they can now come to my office as opposed to the nearest exam station about 15 miles away, which benefits myself and more importantly the customers.

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.

<u>County Auditors and Clerks of Court are exempt</u> 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.

Name:		
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 " \checkmark " 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		✓		✓		✓		✓
Republican Party including PACs and Associations		✓		√		✓		~
Any other Party including PACs and Associations		✓		✓		✓		✓
Governor, Candidate and Committee		√		✓		✓		✓
Attorney General, Candidate and Committee		✓		✓		V		V
Secretary of State, Candidate and Committee		✓		~		✓		✓
Treasurer of State, Candidate and Committee		~		✓		V		✓
Auditor of State, Candidate and Committee		✓		/		/		✓
State Senator, Candidate and Committee		~		√		✓		√
State Representative, Candidate and Committee		✓		✓		~		✓

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	Y

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 plan to continue to run the agency as it is being ran always striving for improvement. My employees and myself work well as a team and we all hold each other accountable and keep each other honest as we all care about the quality and well-being of the agency, How my business is ran is a reflection on me and I would love nothing more than to continue to operate a successful business for years to come. I plan to continue to be very organized and involved with the daily operations of my agency. Being a working deputy, I see and hear all that occurs within my agency.

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?

I will ensure that in working side by side with my employees they are always giving correct information and answering all questions with proper knowledge, patience and kindness, especially with how frustrating of a process some services can be for the customer. I will always make myself available to answer any and all questions and concerns with clarity for both my employees and the customers. Most of my employees are veteran at this point so I am extremely confident in their knowledge and ability to uphold all procedures properly. Everyone works as a team and are encouraged to ask for second opinions when necessary ensuring the job is done right the first time.

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

Myself and all of my employees are well informed with fraud prevention as it pertains to our job duties as we are required to complete fraudulent document trainings so we are aware of what indicators to look closely for. As the Deputy Registrar, I will make sure to always keep fraudulent document detection tools on hand, such as counterfeit money pens and blacklights. If a document is ever in question after getting a second opinion and being shown to the deputy or manager then the investigator will be notified.

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 important and must be read and initialed by each employee. In addition, myself or my assistant manager will make it a point to discuss any revisements with my staff to make sure that everyone is on the same page and understands all policies and procedures. If there is ever a question as to how to implement these changes, I fully plan on utilizing all resources available to me such as contacting the BMV help desk, or our agency's Field Representative to gain the clarification that I need to be able to properly inform and train my employees.

5	How will y	you demonstrate	good leadership	n to s	vour emn	Jovees?
J.	TIOW WIII	you demonstrate	good icadersiii	D IO	your chip	noyees.

I bring a positive attitude and approachable demeanor to the atmosphere wherever I go. I am committed to anything that I do, especially my business, and I want my employees to know that I am always there for them. I would not even be in the position that I am in now if it weren't for my current and past employees of the agency where I have gained all of my experience. I encourage my employees to be friendly, diligent, and to have pride in their work. I do this by also displying these mannerisms and treating everyone with the same level of respect that I would like in return.

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

I will maintain a high level of professionalism each day in this business by expecting from my employees to carry themselves and act professional at all times. There will be no negatively talking about the customers amongst employees behind the counter, no crude comments, no impatience nor unkindness. Everyone, of course myself included, is to adhere to all policies as outlined in my personnell policy at all times such as appearance, dependability, workmanship and job knowledge.

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

I currently have an amazing staff that I hope remain employed at my agency for many more years to come. Most of my staff members have many years of license agency experience under their belts. I hope to retain these employees by always treating them fairly and expressing my appreciation to them often. When it came time and should it come time again to hire new employees, I will go through a selective interviewing process to determine the most competent and qualified candidates. Prospective employees must be willing to learn and have a desire to serve the public with excellent customer service.

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

I will continue to provide a great place to do business by keeping my agency staffed with employees that are friendly with good attitudes and are excited to help each and every person that enters our doors. I demonstrate a very caring and helpgul demeanor myself for our customers so that they feel comfortable and important at my agency and hopefully return. I will ensure daily housekeeping is being done and neccessary cosmetic updates are being made as well as decorating the office for each holiday. I have access 24/7 to our security cameras, there are panic buttons in the office in areas accessible to employees, and the local authorities are highly accessible in the case of an emergency.

9. How would you deal with an irate customer?

No one is always right, no matter the situation. However, in times of conflict, I feel it is of utmost importance to always maintain proffessionalism. Most of the time I am able to do this by staying true to my empathetic nature. I listen to the customers needs and concerns all while maintaining eye contact. I would ensure the customer that I would handle the situation, offer solutions, and apologize.

10. What t	training or advice do you, or will you, give to your employees for dealing with irate customers?
custom workin person	est advice that I can give to my employees in the matter of having to deal with an irate ner, is that diffusing a difficult or escalating situation is a big skill to hone in on when ng with the public. I would advise my employees that the customers' issue is not to be taken nally, to have them try and remove their emotions from the situation, and have them ask the ner right away if they would like to speak with a manager who can assist with coming to a on.
11. How w	vill you meet the expectations of the Bureau of Motor Vehicles?
Deputy commu follow refer to	continue to meet the expectations of the Bureau of Motor Vehicles by being a committed by Registrar, by being committed to my business, my employees, my customers, to the unity, and to the state of Ohio. I will retain outstanding employees who make it their duty to all rules set forth by the BMV and stay up to date on any and all changes implemented. I will be all resources available to me often and ask for and listen to advice from my field entatives.
12. Why sl	hould the Bureau of Motor Vehicles consider you for a deputy registrar license agency contract
contract young of experience of experience of me.	ureau of Motor Vehicles should consider me for another deputy registrar license agency ct due to the fact that I am already so committed to the agency that I am bidding on. At my age of 33 I have a total of over 18 years of customer service experience, and almost 8 years erience working in a deputy registrar agency, most of which were in a managerial or Deputy rar position. I am genuinely committed to the bettering of the community and helping all of stomers to the best of my ability. I plan to continue to provide fast, professional, friendly and edgable service to all of my customers and ensure that my staff does the same. I believe that cional customer service has been and will be the key to the success of my agency. I will use to strive to be the best that I can be to uphold the standards that are set forth and expected I want to make everyone, especially myslef, proud. I believe that I can exceed even my own stations, I just need the opportunity to be granted to me so that I can make my great state proud too.

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 Courts or Nonprofit Corporations)

County of Ashtabula:
State of Ohio :
I, Raechal M Towner, being first duly sworn, depose and say that:
 I am submitting my proposal for appointment as deputy registrar in my own individual capacity, and not as an agent, representative, partner, or business associate of any kind whatsoever of any other person or persons;
 If appointed, I will serve as a deputy registrar in my own individual capacity, and will not act as an agent, representative, partner, or business associate of any kind whatsoever of any other person or persons;
 If appointed as deputy registrar, I will not assign my deputy registrar contract, in whole or in part, nor any of my deputy registrar's responsibilities to any other person or persons without the advance written consent of the Registrar;
4) If appointed as a deputy registrar, I will fully comply with all requirements set forth by the Registrar. I will not serve as an office manager of any deputy registrar agency other than my own; nor will I permit any other deputy registrar, the spouse of any deputy registrar, or the parent, child, brother, or sister of any deputy registrar living in the same household as the deputy registrar to operate my deputy registrar agency, directly or indirectly. I understand that I may hire the spouse, parent, child, brother, or sister of any deputy registrar as an employee, provided that I maintain control of my deputy registrar agency;
5) To the best of my knowledge and belief, I am fully qualified to serve as a deputy registrar, and there is no provision of the Ohio Revised Code or the Ohio Administrative Code which would make me ineligible to serve as a deputy registrar; and,
6) I have caused to be prepared, have read, and take full responsibility for, all forms and documents submitted with this proposal. All information is true, accurate, and complete to the best of my knowledge and belief. This affidavit is submitted by me for the purpose of obtaining a deputy registrar contract.
Signature of proposer: MWAAA MTAA
Printed/typed name of proposer: Raechal M Towner
Sworn to and subscribed in my presence by the above named Raechal MTOwner
on this 03 day of February, 2025
Notary Public
OI1 . O O . 10 MALA MO
Printed name of Notary Public: Chapter and Alexander State of Orange State of

Form 3.10(A), Affidavit of Individual (2025)

4.0 OPERATIONAL CHECKLIST

D PRIT IN	Raechal M Towner	
0426 Location Number		
Proposer Number (BMV use o	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: \$\frac{10,180.00}{\}	✓	
4.5	Deputy Registrar Contract (2 pages only)	✓	

4.1 APPOINTMENT OF AGENCY MANAGERS

Proposer's name:	Location number: 0426
(A) <u>DEPUTY REGISTRAR</u> : As deputy registrar, I agree to whours per week during the hours the agency is open to the entire term of the contract. I understand that the minimus is twenty (20) hours per week during the hours the agence twenty-hour requirement does not apply to County A nonprofit corps., or deputy registrars operating multiple leads	ne public for business throughout the um requirement for deputy registrars by is open for business. This auditors/Clerks of Courts,
(B) OFFICE MANAGER: I understand and agree that I must another reliable person to serve as the office manager if manager must be scheduled to work at the agency at leaduring the hours the agency is open to the public for busing the hours the agency is open to the public if during the hours the agency is open to the public if Appoint another reliable person to serve as the office six hours per week during the hours the agency is	for the agency, and that the office ast thirty-six (36) hours per week mess. It is my intention to: k at least thirty-six hours per week for business.
(C) ASSISTANT OFFICE MANAGER: I understand and a person to be responsible for the management of the agency office manager during the hours the agency is open.	agree that I must appoint a reliable acy in the absence of myself and the
(D) OTHER EMPLOYEES: I agree to maintain an accurate manager, assistant office manager, and all other employed as my own work schedule, on file and available for instimes. I also agree to notify the BMV in writing in appointment of the office manager or assistant office moster complete and current.	es and their work schedules, as well spection by BMV employees at all nmediately of any changes in the
Deputy registrar (proposer) signature	Date: 1/27/2025

4.2 EXPERIENCED EMPLOYEES SUMMARY

Raechal M Towner 0426 Proposer's name: Location number:				
(A) HIRING EXPERIENCED EMPLOYEES. I certify that if I am appointed as a deput registrar under contract with the Registrar of Motor Vehicles, I will make every good fa effort to hire and retain qualified employees who have relevant experience working in deputy registrar agency. I agree to make bona fide offers of employment at comparate wages and under comparable conditions to their most recent deputy registrar employment experience.	ith n a ble			
(B) CHECK WHICHEVER APPLIES:				
I HAVE NOT BEEN A DEPUTY REGISTRAR OR DEPUTY REGISTRAR EMPLOYEE. I have not yet identified any prospective employees who have relevant deputy registrar experience. However, if awarded a contract, I will make every reasonable effort to identify and hire, if possible, qualified employees who have relevant experience working in a deputy registrar agency. Please do not contact any deputy registrar employees until after you have been awarded a contract. I AM OR HAVE BEEN A DEPUTY REGISTRAR OR DEPUTY REGISTRAR EMPLOYEE. I have identified the following persons to whom I will make a bona fide offer of employment at comparable wages and under comparable conditions to their present employment. (A deputy registrar or a proposer who has deputy registrar employment experience may list himself or herself here):				
Name of Experienced Employee Length of Experience	e			
Roxanne Tantari 14 years				
Chrystal Ayala 9 years				
Raechal Towner 8 years				
Laurie Stuper 20 years				
Holly Jenkins 6 years				
(C) I understand that failure to hire properly qualified and experienced deputy registrar employees is grounds to withhold or terminate my deputy registrar contract.				
Deputy registrar (proposer) signature Date: 1/27/25	_			

Form 4.2, Experienced Employees Summary (2025)

4.3 STAFFING AND PERSONNEL CALCULATION

Proposer's name:	Raechal M Towner	Location number:	0426
_			

<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	\$ 15.00	\$ 54.00	\$ 2,160.00
Assistant Office Manager	20.00	\$ 14.00	\$ 280.00	\$ 1,120.00
Experienced Employees Total Number (combine Full-time & Part-time) =3	90.00	\$ 13.00	\$ 1,170.00	\$ 4,680.00
New Hire Employees Total Number (combine Full-time & Part-time) =				
TOTALS	166.00	N/A	\$ 1,504.00	\$ 7,960.00

4.4 START-UP COSTS CALCULATION

Propo	ser's na	ıme:	Raechal M Towner	Location r	number:	0426
costs	of begi	inning	is form is to assure the BM g a deputy registrar busines to cover your personnel, si	s. We need to know t	that you l	nave enough
1.	. PERSONNEL COSTS (FOUR WEEKS)					
	Use I	Form	4.3 to calculate four (4) wee	eks' personnel costs for	7960.0	
2.	SIT	E PR	REPARATION COSTS	S (AMORTIZED)		
		costs	is is a Deputy Provided S you will need to spend t trar agency in each of the fo	to prepare the building		
		1.	Building Modifications	\$ <u></u>	_	
		2.	Counter Costs	§ <u>0</u>	_	
		3.	Other Costs	\$ <u>0</u>	_	
		4.	Total	§ 0	_	
			l amortized over 60 month ide line 4 by 60)	contract period = S	0	
	В.	Agen	is is a BMV Controlled Sacy Specifications of the Agency Specifications	location. Do not chars.		
3.	AGI	ENC	Y RENTAL PAYMEN	NTS (3 MONTHS)		
			is is a Deputy Provided S or lease this site.	ite, enter the actual an	nount you	ı will pay to
	В		is is a BMV Controlled acy Specifications for this s	-		
		One	month's rent: \$\frac{740}{}	$\sum_{x \in S} x = S$	2220.0	00
ТОТ	[four site]	week prepar	RT-UP COSTS as' personnel costs, plus one ration costs (2.A total am Site amount), plus three mo	ount or 2.B BMV	10,180	0.00

STATE OF OHIO

DEPARTMENT OF PUBLIC SAFETY BUREAU OF MOTOR VEHICLES

DEPUTY REGISTRAR CONTRACT - 2025

This Agreement is made by and between the Registrar of Motor Vehicles, (Registrar, herein), located at 1970 West Broad Street, Columbus, Ohio 43223-1102 and Raechal Morgan Towner , (deputy registrar, herein) whose

registrar agency, Location No. 04-B State of Ohio, County of Ashtabula	, to be located as follows: in the
City/Village/Township (indicate which) City	of Ashtabula
Street address: 858 Lake Avenue (City) Ashtabula	Ohio (Zip) 44004

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;
- 2. 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)

4. The deputy registrar is appointed and accepts appointment in the capacity of [state whether "an individual," "County Auditor for (specify county)," "Clerk of Courts for (specify county)," or "a nonprofit corporation"]: an individual
5. The Deputy Registrar certifies that he or she has read, understands, and hereby agrees to all of the 2025 Deputy Registrar Contract Terms and Conditions incorporated herein. March
STATE OF OHIO :
COUNTY OF Ashtabula:
Before me, a notary public in and for said county and state, personally appeared the above named <u>Nachhal M Towned</u> , who acknowledged that he or she did sign the foregoing instrument and that the same is his or her free act and deed.
IN WITNESS WHEREOF I have hereunto set my hand and official seal, this 63 day of February, 2025. NOTARY PUBLIC Printed name of Notary Public: Chapter Color of Sept. 12, 2026
Printed name of Notary Public: Chaptal Qual Printed name of Notary Public: Chaptal Qual Printed name of Notary Public: Print
STATE OF OHIO DEPARTMENT OF PUBLIC SAFETY BUREAU OF MOTOR VEHICLES
BY: REGISTRAR OF MOTOR VEHICLES
Done at Columbus, Ohio, on

5.0 DEPUTY PROVIDED SITE CHECKLIST

Proposer's Full Legal Name
Location Number 0426
Proposed Site Address 858 Lake Avenue
Proposer's Telephone Number (number where BMV staff can reach you)
Proposal Number (BMV use only)

<u>INSTRUCTIONS:</u> You must submit one original of this form and all documents listed on this form **FOR EACH LOCATION YOU ARE PROPOSING**. If you fail to submit a complete set of originals **FOR EACH LOCATION**, you will not be evaluated for those locations.

<u>ATTENTION:</u> Proposers applying for contracts at existing license agency locations designated as Deputy Provided Sites are not required to complete and submit all Section 5 forms if the site was approved under a previous RFP and if there have been no changes to the site since the last contract was approved and signed. Under this license agency site provision, form 5.0, page one (1) of form 5.1, and form 5.3 must be completed and submitted with all other required forms and documents.

FORM	DESCRIPTION	\checkmark	BMV
5.0	Deputy Provided Site Checklist (this form)	√	
5.1	Site Questionnaire (page 1 only if proposing existing license agency site)	✓	
5.2	ADA Checklist (leave blank if proposing existing license agency site)		
5.3	Lease Option (required for all proposers, which includes incumbent deputy registrars) – filled out, including complete address	✓	
	- signed and notarized		
5.4	Proximity Attachment [for "Proximity" sites only] (leave blank if proposing existing license agency site)		
Proposer provided	Site Plan (leave blank if proposing existing license agency site)		
	 with 8½ x 11-inch formatting (SUBMITTED ELECTRONICALLY) with complete dimensions 		
Proposer provided	Counter Plan (leave blank if proposing existing license agency site) - with 8½ x 11-inch formatting (SUBMITTED ELECTRONICALLY) - with complete dimensions		
Proposer provided	Map (leave blank if proposing existing license agency site)		
	with site clearly marked		

Form 5.0, Deputy Provided Site Checklist (2025)

5.1 SITE QUESTIONNAIRE

1.	Location Number for which you are proposing (from Agency Specifications): 858									
	Street address of site Lake Avenue									
	Cit	Ashtabula	, Ohio, Zip Code	440	04					
2.	Is t	Is the site you are proposing currently in operation as a deputy registrar agency?								
			No	Yes_	√					
3.		Do you intend to perform construction or remodeling to prepare this site for operation under a new								
	deputy registrar contract?		No	Yes_	✓					
4.		Are you applying for a contract at an existing license agency site that								
	was	s approved under a previous contract?	No	Yes_	\checkmark					
5.	A.	If you answered "No" to question number 4, skip to question number 7, and complete the information required for this form (5.1) and the remainder of Section 5 forms 5.2 through 5.4.								
	В.	If you answered "Yes" to question number 4, have there been any changes to the site (interior and/or exterior to include parking areas, path of travel, and accessibility to individuals								
		with disabilities, and signage)?	No	Yes_	✓					
6.	A.	a. If you answered "No" to question number 5, please print and submit this along with form 5.3 for compliance with Section Five (5) requirements for this RFP and include it with the remainder of your required proposal documents.								
	В.	If you answered "Yes" to question number 5, list the site changes in the space below and be specific with the description(s) of any changes that have been made. Include additional supporting documentation and attachments if needed, then stop here. Print and submit this page along with any other documentation and attachments for compliance with Section 5 requirements for this RFP and include it with all other required proposal documents.								
	The signage was updated to the new BMV logo in May of 2022. Both the sign about the office door and the signs by the road in the plaza display were replaced. Regular cosmetic updates as well such as painting the interior of the office walls, carpet are lobby floors professionally cleaned twice a year, and the plexiglass shields at each terminal that were installed in 2020 remain up.									

5.3 LEASE OPTION

1.	I (we)(owners' complete names)
	or and the second data consideration, receipt of which is necessary acknowledged, this OP ITON
	TO LEASE the following described property located in the State of Ohio, County of
	Ash ta ba la , (state whether city, village or township)
	City of Ashtabula and commonly known as:
	(property's address) 858 Lally AVE
	Suite City Ashtabula , Ohio, Zip 44000
	to (proposer's name) Raechal M. Towner

for the operation of a deputy registrar agency under contract with the Ohio Bureau of Motor Vehicles, and for no other purpose.

- 2. THE TERM OF THE LEASE, if executed, shall begin no later than the $\underline{29}^{\underline{\text{th}}}$ day of $\underline{\text{June}}$, $\underline{2025}$ and shall not terminate before the $\underline{29}^{\underline{\text{th}}}$ of $\underline{\text{June}}$, $\underline{2030}$.
- 3. THE TERM OF THIS LEASE OPTION shall begin on the date of its execution (signing) below and shall be held open until the $31^{\underline{st}}$ day of \underline{May} , $\underline{2025}$.

4. THE PARTIES AGREE AS FOLLOWS:

- A. The owners may, in their sole discretion, grant a similar lease option to operate a deputy registrar agency for the stated period of time to more than one proposer, provided that the premises are not subject to an existing lease for any portion of the term of lease as specified in paragraph 2, above.
- B. If the owners have granted or hereafter grant an option to the same described real estate to another person or entity for the operation of a deputy registrar agency it is understood and agreed by owners and proposer that only the option granted to the person or entity awarded a contract by the Ohio Bureau of Motor Vehicles shall be entitled to exercise the relevant option.

Form 5.3, Lease Option, Page 1 of 2 (2025)

C. Except as provided in paragraphs 4(A) and (B), above, the owners shall not grant an optio lease, or rental agreement to any other person during the term of this lease option specified paragraph 3, above.
D. The lease under this option shall be on any terms as owners and optionee agree contemporaneously with the granting of this option, provided that no such term shall be inconsistent with this lease option. Said terms, if any, are incorporated herein.
Owner(s)' signature(s): John Kauth
Owner(s)' printed name(s): John R. KAwecki
STATE OF Ohio:
COUNTY OF Mahoning:

The foregoing instrument was ackr February, 20	nowledged before mo 025, by the owners, _	on this _	E. Kai	day of
Notary Public	- MARIAL S	Nin.		
Printed name of Notary Public:			D CAROSELLA	
My commission expires on		In and for My Com	ary Public The State of Ohio mission Expires 727, 2029	
I hereby accept this option.	THE OF ON	iiii		

2/5/25

Date

Optionee signature, Deputy Registrar Proposer

Form 5.3, Lease Option, Page 2 of 2 (2025)