

Project Number(s)

Encumbrance Document ID			
Trans	Dept	Unit	Identification Number
CT	DOT	0287	INTF00X02016J0090042

681

7/26/2018

Funding Source

Capital Tolls Capital Tolls General Federal Grant
 Operating Tolls Operating Expendable Trust

Approp No	Obj	Unit	Activity	Program	Phase	N/P	Amount Allocated
60440001	U10	IR01	009N	C000000	000		\$0.00
60440001	U10	R401	009N	C000000	000		\$60,900.00
							\$60,900.00

Obligation By Fiscal Year for Multi-Year Contracts

	60440001	Total
2020	\$30,450.00	\$30,450.00
2021	\$30,450.00	\$30,450.00
MMARS Total	\$60,900.00	\$60,900.00

Reason for Request: **Year 2&3 Maint for 10 Capture Workstations for Danvers**

Contract #: **90042**

Cost Reduction %:

Vendor ID & Adress Code: **VC6000183131 AD001**

Current Year Savings:


Vendor Name: **MORPHOTRUST USA, LLC**

Contract Location:

Contract Description: **Morpho Trust Drivers License Production**

Report Notes:

Recommended by:

 7/26/18
(Signature / Date)

Approved by:

 7/31/18
(Signature / Date)

Completed by the Budget Office:

Expense Budget Entered By:

(Signature / Date)

Approved by:

(Signature / Date)

Completed by the FAPRO (Applies to Capital only):

Approved by:

(Signature / Date)



Document Name: MORPHO TRUST DRIVERS LICENSE PRODUCTION [2052446]

Document Description: Year 2&3 Maint for 10 Capture Workstations for Danvers

Document ID: INTF00X02016J0090042

Code	Dept	Unit	Document Identifier	Action	Code	Department	Identification Number	Vendor Line
CT	DOT	0287	INTF00X02016J0090042	Mod	MA			

Header / Vendor Information

Budget FY:	2019	Document Total:	
Fiscal Year:	2019	Vendor Name:	MORPHOTRUST USA, LLC
Period:	1	Vendor Address:	6840 CAROTHERS PKWY STE 650
Board Award:	0090042	Vendor/Customer No.:	VC6000183131
Requester ID:	dotadi	Address Code:	AD001
Report Note:		City:	FRANKLIN
		State:	TN

Line #1 - Commodity Information

Commodity Code	List Price	Description	Contract Amount	Commodity Ref Line
821300000000				10
Line Type	Service	Unit Price		
Quantity		Service From	08/20/2015	
Unit of Measure		Service To	10/23/2021	
		Incl/Dec Amount	\$60,900.00	

Line #36 - Accounting Information

Event Type	Budget FY	2020	Unit	IR01	Major Program	Location
PR08						
Line Amount	\$0.00		Fiscal Year	2019	Object	U10
Dept	DOT		Period	1	Appropriation	60440001
Line Description			Dept Object		Program Period	
					Function	

TO THE COMPTROLLER OF THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify under the penalties of perjury that all laws of the Commonwealth governing disbursements of public funds and the regulations thereon have been complied with and observed.

Print Name: John Clark Signed: [Signature] Title: WA Phone: 916 Date: 9/26/18
 Print Name: William Ter Signed: [Signature] Title: WA Phone: 882 Date: 9/26/18
 Authorized Signatory

FOR FISCAL USE ONLY

Entered By: _____ Date: _____ Verified By: _____ Date: _____
 (Initial)

Document Name: MORPHO TRUST DRIVERS LICENSE PRODUCTION

[2052446]

Document Description: Year 2&3 Maint for 10 Capture Workstations for Danvers

Document ID

Code	Dept	Unit	Document Identifier	Action
CT	DOT	0287	INTF00X02016J0090042	Mod

Line #41 - Accounting Information

Event Type	PR08	Budget FY	2020	Unit	R401	Major Program		Location	
Line Amount	1 \$30,450.00	Fiscal Year	2019	Object	U10	Program	C000000	Phase	000
Dept	DOT	Period	1	Appropriation	60440001	Program Period		Activity	009N
Line Description	Capture WS(10) Maint Year 2 of 3 for Danvers								
	Quote#FQ20180604MA04								

Line #42 - Accounting Information

Event Type	PR08	Budget FY	2021	Unit	R401	Major Program		Location	
Line Amount	1 \$30,450.00	Fiscal Year	2019	Object	U10	Program	C000000	Phase	000
Dept	DOT	Period	1	Appropriation	60440001	Program Period		Activity	009N
Line Description	Capture WS(10) Maint Year 2 of 3 for Danvers								
	Quote#FQ20180604MA04								

TO THE COMPTROLLER OF THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify under the penalties of perjury that all laws of the Commonwealth governing disbursements of public funds and the regulations thereof have been complied with and observed.

Print Name: _____ Signed: _____ Title: _____ Phone: _____ Date: _____
 Prepared by: _____
 Print Name: _____ Signed: _____ Title: _____ Controller _____ Phone: _____ Date: _____
 Authorized Signatory _____

FOR FISCAL USE ONLY			
Entered By:	Date:	Verified By:	Date:
(Initial)		(Initial)	



IT PURCHASE REQUEST FORM

Requestor: Sarah Zaphius
David Bedard / Mark Newton
(list only other person(s) to inform status of request via email)

Phone/Location: 857.368.9458 / Suite 6620

File Number: 12644
Initials and Date: 8/7/2018
Contract/Project Info #: 90092

Category (from drop down list)	DESCRIPTION OF SPEND	Coverage / Service dates (licenses, annual maint support, SOW)	Make / Model	Quantity	Unit Cost (in dollars)	Total Cost (in dollars)	In Fiscal Budget	In Forecast	Innotes Project/ Number	Project Name	Funding Source/Unit
Hardware	Capture Workstation			10	\$14,836.00	\$148,360.00				NEW RMV Danvers Service Center	RMV
Hardware	Signature Capture Device			4	\$642.00	\$2,568.00					CAPTR
Hardware	Wall-Mounted, cloth backdrop			1	\$100.00	\$100.00					
Hardware	Freestanding, double-sided backdrop			2	\$2,000.00	\$4,000.00					
Prof Svcs	Idemia: Program Management			9	\$185.00	\$1,665.00					
Prof Svcs	Idemia: Integration Engineer			15	\$125.00	\$1,875.00					
Prof Svcs	Idemia: Installation			31	\$125.00	\$3,875.00					
Maint Svcs	Year 1 - Capture Workstation			10	\$0.00	\$0.00					
Maint Svcs	Year 2 - Capture Workstation			10	\$3,005.00	\$30,050.00					
Maint Svcs	Year 3 - Capture Workstation			10	\$3,005.00	\$30,050.00					
Maint Svcs	Year 1 - Signature Capture Device			4	\$0.00	\$0.00					
Maint Svcs	Year 2 - Signature Capture Device			4	\$100.00	\$400.00					
Maint Svcs	Year 3 - Signature Capture Device			4	\$100.00	\$400.00					
					Hardware	\$155,028.00					
					Software						
					Contractor	\$7,415.00					
					Prof Svcs	\$60,900.00					
					Maint Svcs						
					Other						
					Total IT Request	\$223,343.00					

- Request is not processed if missing information and without proper authorization below

U07 Equipment	\$155,028.00
U03 Software licenses, annual fees	
U05 Hourly paid staff augmentation	\$7,415.00
U11 Services paid on a per deliverable/task order basis	\$60,900.00
U10 Equipment integration & service and annual maintenance support	
Other:	
Total IT Request	\$223,343.00

BUSINESS JUSTIFICATION

The RMV will be opening a NEW Service Center in Danvers, MA. Herewith are the details from Idemia from Quote No. FQ20180604MA04 Revision 1

The quote depicts the necessary D/I/D hardware, software, professional services and maintenance services requested by the RMV from Idemia through MassDOT IT.

The quote depicts the necessary D/I/D hardware, software, professional services and maintenance services requested by the RMV from Idemia through MassDOT IT.

Other: NOT IT REQUEST

AUTHORIZED APPROVERS FOR IT REQUEST FORM

Requestor

Sarah Zaphius

Date: 7/19/2018

Business Approver/Manager/Dept Head

David Bedard

Date: 7/19/2018

IT Director

John Primavera

Date: 7/19/2018

Deputy CIO/ Deputy CTO

John Primavera

Date: 7/19/2018

IT Finance

[Signature]

Date: 7/27/18

Chief Information Officer

[Signature]

Date: 7/27/18

Bedard, David (DOT)

From: Zaphiris, Sarah (DOT) <sarah.zaphiris@state.ma.us>
Sent: Friday, July 13, 2018 1:57 PM
To: 'Corson, John'
Cc: Kunen, David; Norrish, Bill (DOT); Bedard, David (DOT)
Subject: RE: Danvers Quote
Attachments: Signed quote for Danvers 071318.pdf

Signed quote attached. There didn't seem to be a place to sign so I just signed and dated the bottom. Please let me know if there's a different document to sign.

Bill and Dave – can you review to make sure this is correct?

Sarah

From: Corson, John [mailto:John.Corson@us.idemia.com]
Sent: Friday, June 29, 2018 10:53 AM
To: Zaphiris, Sarah (DOT)
Cc: Kunen, David; Norrish, Bill (DOT)
Subject: RE: Danvers Quote

Good Morning Sarah,

David and I went over the Danvers quote this morning and we noticed that I had made an error in the calculation formula in excel. I am truly sorry for that mistake...

Please see the revised quote and let me know if you have any additional questions.

Thank you

John CORSON
Client Executive | Sales
Identity and Security, N.A.

P. (518) 283-5911
M. (518) 956-0347
E. john.corson@us.IDEMIA.com

298 Concord Rd.
Billerica, MA 01821



Join us on    

www.idemia.com

OT-MORPHO is now IDEMIA

From: Corson, John
Sent: Wednesday, June 20, 2018 10:16 AM
To: 'Zaphiris, Sarah (DOT)'
Cc: Kunen, David
Subject: RE: Danvers Quote

Good Morning Sarah,

Client Executive | Sales
Identity and Security, N.A.



P. (518) 283-5911
M. (518) 956-0347
E. john.corson@us.IDEMIA.com

216 Concord Hill
Danvers, MA 01921

Join us on    

www.idemia.com

OT-MORPHO is now IDEMIA

From: Zaphiris, Sarah (DOT) [<mailto:sarah.zaphiris@state.ma.us>]

Sent: Monday, June 18, 2018 5:20 PM

To: Corson, John

Subject: FW: Danvers Quote

John,

Did the price of workstations go up? This quote has a unit price of \$16,804 but my recollection is we paid closer to \$12k in the past. Am I misremembering?

Sarah

From: Norrish, Bill (DOT)

Sent: Wednesday, June 13, 2018 11:02 AM

To: Zaphiris, Sarah (DOT)

Cc: Tibma, Mary (DOT); Bedard, David (DOT); Yee, Bill (DOT)

Subject: FW: Danvers Quote

Sarah

Attached is Idemia's is proposal for the new Danvers Service Center. I recommend we submit and approve PO given the long lead time (12 weeks) on equipment. The latest information I have is that Danvers will be opening in September.

Let me know if there are any questions.

Bill

From: Corson, John [<mailto:John.Corson@us.idemia.com>]

Sent: Tuesday, June 12, 2018 2:49 PM

To: Norrish, Bill (DOT) <Bill.Norrish@MassMail.State.MA.US>

Cc: Bedard, David (DOT) <david.bedard@dot.state.ma.us>; Kunen, David <David.Kunen@us.idemia.com>

Subject: RE: Danvers Quote

Quote attached this time

John CORSON
Client Executive | Sales
Identity and Security, N.A.



Cadorette, John (DOT)

From: Tomassini, Joseph (DOT)
Sent: Wednesday, July 25, 2018 1:09 PM
To: Cadorette, John (DOT); Zaphiris, Sarah (DOT)
Cc: Bedard, David (DOT); Newton, Mark (DOT); Macdonald, Alan (DOT)
Subject: RE: Request Number: 12694 has been assigned to your request for DLID Capture Workstation(10)

Thank you, John.

Please use CIP Program Code, RM18XXX025, for the Equipment via PC-103179, and for Services via CT-90042. The maintenance piece will need to be funded by IT Operating.

Please contact me with any questions or concerns.

Regards,
Joe Tomassini
RMV Fiscal Liaison
10 Park Plaza, Suite 6620
Boston, MA 02116
857-368-9456

2014 YR1 Ln 1-35 2
2020 YR2 Ln 1-36 30,450
2021 YR3 Ln 1-41 30,450
60,900

-----Original Message-----

From: Cadorette, John (DOT)
Sent: Wednesday, July 25, 2018 12:38 PM
To: Tomassini, Joseph (DOT); Zaphiris, Sarah (DOT)
Cc: Bedard, David (DOT); Newton, Mark (DOT); Macdonald, Alan (DOT)
Subject: RE: Request Number: 12694 has been assigned to your request for DLID Capture Workstation(10)

Attached is the request

-----Original Message-----

From: Tomassini, Joseph (DOT)
Sent: Wednesday, July 25, 2018 12:01 PM
To: Cadorette, John (DOT); Zaphiris, Sarah (DOT)
Cc: Bedard, David (DOT); Newton, Mark (DOT); Macdonald, Alan (DOT)
Subject: RE: Request Number: 12694 has been assigned to your request for DLID Capture Workstation(10)

Is it a new request or one that I was previously involved for CIP Budget Tracking purposes?

If you-all could please advise, I would appreciate it. Thank you.

Regards,
Joe Tomassini
RMV Fiscal Liaison
10 Park Plaza, Suite 6620
Boston, MA 02116
857-368-9456

-----Original Message-----

From: Cadorette, John (DOT)

Sent: Tuesday, July 24, 2018 11:30 AM

To: Zaphiris, Sarah (DOT)

Cc: Bedard, David (DOT); Newton, Mark (DOT); Tomassini, Joseph (DOT)

Subject: Request Number: 12694 has been assigned to your request for DLID Capture Workstation(10)

Your request for, DLID Capture Workstation(10), has been received and assigned the Request Number, 12694.



296 Concord Road Suite 300
 Billerica, MA 01821
 978-215-2400

FIRM FIXED PRICE QUOTATION

Date: June 29, 2018
 Quote No: FQ20180604MA04 Revision 1
 Valid Through: 60 days from date above
 Payment Terms: Per contract terms
 Delivery: Per RMV instruction; not before 12 weeks after receipt of purchase order

To:
 Sarah Zaphiris
 Deputy Registrar for Operations
 Registry of Motor Vehicles
 25 Newport Avenue Extension
 Quincy, MA 02171

From:
 John Corson
 Client Executive
 IDEMIA
 296 Concord Road Suite 300
 Billerica, MA 01821

Hardware	Quantity	Unit Price	Total
Capture Workstation	10 units	\$14,836	\$148,360
Signature Capture Device	4 units	\$642	\$2,568
Wall-mounted, cloth backdrop	1 units	\$100	\$100
Freestanding, double-sided backdrop	2 units	\$2,000	\$4,000
Hardware Sub-Total			\$155,028
Professional Services	Quantity	Hourly Price	Total
Program Management	9 hours	\$185	\$1,665
Integration Engineer	15 hours	\$125	\$1,875
Installation	31 hours	\$125	\$3,875
Professional Services Sub-Total			\$7,415
Maintenance Services	Quantity	Unit Price	Total
Year 1 – Capture Workstation	10 units	\$0	No charge
Year 2 – Capture Workstation	10 units	\$3,005	\$30,050
Year 3 – Capture Workstation	10 units	\$3,005	\$30,050
Year 1 – Signature Capture Device	4 units	\$0	No charge
Year 2 – Signature Capture Device	4 units	\$100	\$400
Year 3 – Signature Capture Device	4 units	\$100	\$400
Maintenance Services Sub-Total			\$60,900
Total			\$223,343

162,443
 YR2 30,450
 YR3 30,450

Pricing notes:

- The price for the 10 capture workstations includes applicable software licenses.
- The price for the six ATS workstations, including software licenses, installation, and maintenance, were included under the order for 25 ATS workstations (see quotation FQ20171016MA13).
- There is no charge for hardware maintenance in the first year.

Sarah Z

7/13/18



COMMONWEALTH OF MASSACHUSETTS
 MASSACHUSETTS DEPARTMENT OF TRANSPORTATION
 PURCHASE ORDER
 FOR COMMODITIES AND/OR SERVICES

*Amendment
 10 WS Capture Maint
 for Danvers 7/23*

* COMMODITY/EQUIPMENT SERVICE

THIS PURCHASE ORDER CONFIRMS AN ORDER THAT WAS PREVIOUSLY PLACED. PLEASE DO NOT DUPLICATE.

*Purchase Order Issue Date:	*Purchase Order Number: CTDOT028719090042	
	Contract Number: 90042	
Contract Start Date: 8/20/2015	Contract End Date: 10/23/2021	Reference MA or Contract: RFR

Vendor Information	
*Name: MorphoTrust USA LLC *Address: 6840 Carothers Pkwy. Ste 650 *City, State, Zip Code: Franklin, TN 37067	Contact Person: John Corson Telephone: 678-575-1586 Fax: Email: jcorson@morphotrust.com Quote Number (if applicable): FQ20180604MA04 YEAR 2&3

Department Information	
Danvers RMV Service Center PO Contact: John Cadorette Email: john.cadorette@state.ma.us Contract Manager: Sarah Zaphiris, Deputy Registrar Email: sarah.zaphiris@massmail.state.ma.us	*Bill to Department Name: MassDOT - IT *Contact Person: Antonia Pires *Address: 10 Park Plaza, Room 8350 *City, State, Zip Code: Boston, MA 02116 Telephone: 857-368-9897 Email: antonia.pires@state.ma.us Prompt Payment Discount (Terms & %):

Instructions to the Vendor:

- The vendor's invoice must include the following minimum information: Purchase order number, quantity and description of item(s) shipped, unit of measure, unit price, total dollar amount of any discount, total price and the vendor's invoice number.
- The purchase order number must appear on the vendor's packing list.
- See attached specifications, if any, related to this purchase order. If this purchase order is for services, please see the section entitled Engagement of Services below. Additional specifications are not necessary if the details of the performance are covered in the contract.
- Vendor assumes risk of loss for commodities in transit. All commodities are subject to inspection upon delivery. Commodities delivered after the Requested Delivery Date above may be rejected. Rejected commodities will be returned at the vendor's expense.

* Engagement of Services (may be required for services): If this Purchase Order is for the provision of services which have been negotiated with the vendor, provide a brief description here of those services (attach detailed specifications, if appropriate) Also, include the dates of service, the number of hours and the hourly rates associated with this engagement. The vendor must sign this form for the engagement of services. Note: This form or additional specifications are not required if the RFR and contract contain all of the required Purchase Order information.

Line #	Vendor Item Number	Item Description	Unit of Measure	Quantity	Unit Price	Subtotal (Quantity x Unit Price)	** Discount	Total Price (Subtotal minus Discount)
1	SEE ATTACHED							
2								
3								

Department Approval Signature: <u>X John C Primerano</u> *Printed Name: John Primerano, Deputy CIO *Date: <u>7/26/2018</u> * Vendor Approval (only required for the Engagement of Services) *Signature: <u>Zara Gerald</u> *Printed Name: Zara Gerald *Date: 8/9/2018
--

Subtotal: Shipping and Handling: 0.00 Total Order Amount: \$60,900.00 <i>Year 2 \$30,450.00</i> <i>Year 3 \$30,450.00</i>
--

plew sign →

* Indicates required field. ** Discount includes any Prompt Payment Discounts.



295 Concord Road Suite 300
 Billerica, MA 01821
 978 215 2400

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Date: June 29, 2018
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162,443
 YR2 30,450
 YR3 30,450
 \$60,900

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Sarah Z

7/13/18