Date Prepared: 08/28/2013
PROCESSING DEPARTMENT:
\(\begin{array}{ll}Department: \& Treasurer/Tax Collector \\

\)|  Dept. Contact:  |  Shari Sumpter  |
| :--- | :--- |
|  Phone \#:  |  621-5819  |
|  Department  |  Treasyrer/Tax Collector  |
|  Head Signature:  |  |
|  |  |$>l\end{array}$

Need Date: ASAP
CONTRACTOR:
Name: PCI LLC
Address: 4893 W Waters AVE STE E
Tampa, FL 33634
Phone: 813-885-7974

CONTRACTING DEPARTMENT: Treasurer/Tax Collector
Service Requested: Software licenses and maintenance
Contract Term: Perpetual
Contract Value:
Yes: $\$ 28100.00 /$ year
Compliance with Human Resources requirements?
Compliance verified by:
COUNTY COUNSEL: (Must approve all contracts and MOU's)
Approved:
Approved: $-\sqrt{\text { Disapproved }}$
Date:
Date:

$\qquad$

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!
RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements) 志
Approved: $\sqrt{ }$ cord. Disapproved: Disapproved:

Date:
$9 / 23 \mid 13$
Date:


OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).
Departments:
Approved:

Approved: $\quad$| Disapproved: |
| :--- |
| Dy |

