OPERATIONAL EVALUATION (2024)

Yvonne Rosboril 28-A / 24005 Geauga County, Chardon BMV Site

FORM	DESCRIPTION	ок	NO
4.0	Operational Checklist - Maximum = 6 Points	(0	
4.1	(enter points recorded on bottom of Form 4.0) Appointment of Agency Managers	0	
7.1	A. Deputy to Work at Least Twenty (20) Hours Per Week		
	Proposed Work Hours Per Week 30	(5)	*
		(3)	0
4.0	B. Appointment of Manager and Assistant OR Acceptable Statement	(3)	
4.2	Experienced Employees Summary	651	
4.0	Gave Acceptable Statement OR Provided Names	(2)	0
4.3	Staffing and Personnel Calculation	A	
	A. Hours Recommended: Proposed: 190	(4)	*
	B. Work Hours and Pay Calculated Correctly	(2)	0
	C. Meets Minimum Wage Requirement	(1)	*
	(2024 Ohio Minimum Wage Rate = \$7.25 or \$10.45 Per Hour)		
4.4	Start-Up Costs Calculation	<i>(</i> 20)	
	A. Adequate and Accurate Personnel Costs	(3)	0
	B. Adequate and Accurate Site Preparation Costs	(2)	0
	C. Adequate and Accurate Rental Payments	(2)	00
	D. Total Required: \$19,931.99 On Deposit (Form 3.4): \$28765.74	(5)	*
4.5	Deputy Registrar Contract	0	
	A. Filled Out Completely and Properly	(2)	0
	B. Signed and Properly Notarized	(3)	0
NOTE: Score	OPERATIONAL EVALUATION POINTS (Max. 40 Points) e indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract	Continge	ncy.
Comments			
Evalu	ators' signatures Printed names	<u>Date</u>	
(1)	Jeff Payre	2/2	1/24

PAYROLL COMPARISON - 2024

Proposer Name: Yvonne Rosboril

Evaluator Printed Name: Jeff Payre

	Van Marke Tells	Location Number(s)										
	Loc. 1	Loc. 2	Loc. 3	Loc. 4	Loc. 5	Loc. 6						
	28-A											
Highest Rate	23.00											
Lowest Rate	17.00											
Number of Hours Recommended	174		**************************************	****************	*************							
Number of Hours Proposed	190	386A. = 1	***************************************		**************	*************						
Total Monthly Wages	12032			***************************************	***********							

Comments:		
	*	

PERSONAL EVALUATION (2024)

Yvonne Rosboril 28-A / 24005 Geauga County, Chardon BMV Site

Evaluation Team Number: Location(s) Proposed: (#1) 28 - A Proposed as 2 nd 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	e Rosboril Geavaa
Proposing as: (#10) Individual Clerk of Courts	Co. Auditor Nonprofit Corp
SCORING SUMM	ARY
FORM 3.0, PERSONAL CHECKLIST PERSONAL EVALUATION, Page 2 BUSINESS AND EMPLOYMENT EXPERIENCE, Page 3 PERSONAL EVALUATION, Page 5 PERSONAL EVALUATION, Page 6 PERSONAL EVALUATION, Page 7 PERSONAL EVALUATION, Page 8	(Max. 16 Points): 100 (Max. 55 Points): 100 (Max. 100 Points): 100 (Max. 28 Points): 28 (Max. 17 Points): 17 (Max. 27 Points): 27 (Max. 15 Points): 15
TOTAL POINTS	(Max. 258 Points): _ 358
Comments:	
Evaluators' Signatures (1) For Jeff (2)	Printed Names Date Payne 2/27/24

	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?	6	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
NO	PERSONAL EVALUATION POINTS, Page 2 (Max. 55 Points) TE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract continuous contract		5_
Com	nments:		

BUSINESS AND EMPLOYMENT EXPERIENCE VERIFICATION Person called: Rob Fragale at telephone (614) 752-20910 Bmv 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): Present Length: 80 Verified Hours 36 = Factor 100 x Years 300 x Points 50 = 1000Person 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 () _____

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

Verified experience as: Deputy Registrar Agency Owner (50) _____ Other Business Owner (34) _____

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

Hours per week: _____

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

BUSINESS AND EMPLOYMENT EXPERIENCE CALCULATION

13. DEPUTY REGISTRAR AGENCY OWNER Experience, Fo	m 3.2
--	-------

ITEM AGENCY/COMPANY	Н	ours	= 1	FACTO	R X YEARS	х	POINTS		SCORE	VERIFIED
A. Chardon BMV	#	NA	=	1.0	x 20.0	X	50	=	1,000	
В,	#	NA	=	1.0	Χ	Χ	50	=	i	
C.	#	NA	=	1.0	Х	Х	50	=		
		S	ubt	otal of	13-A, 13	-B 8	% 13-C	= -		

14. OTHER BUSINESS OWNERSHIP Experience, Form 3.2

ITEM AGENCY/COMPANY	HOU	RS = FAC	TOR X YEA	RS X F	POINTS	; =	SCORE	VERIFIED
A.	#	=	X	X	34	=		
B.	#	=	Х	Х	34	=		
C.	#	=	X	X	34	=		
		Subtota	I of 14-A,	14-B 8	14-C	=	A 14 5 14	

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

ITEM AGENCY/COMPANY	HOU	RS = FAC	TOR X YEA	RS X F	POINTS	s =	SCORE	VERIFIED
A.	#	=	X	Х	25	=		
B.	#	=	Х	Х	25	=		
C.	#	=	X	X	25	=		
		Subtota	l of 15-A,	15-B &	15-C	=		

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

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

ITEM AGENCY	HOU	RS = FAC	TOR X YEA	RS X I	POINTS	s =	SCORE	VERIFIED
Α.	#	=	X	X	23	=		
B.	#	=	X	X	23	=		
C.	#	=	Х	Х	23	=		
D.	#	=	х	X	23	=		
	Subto	otal of 16	6-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	HOUF	RS = FAC	TOR X YEA	RS X F	POINTS	=	SCORE	VERIFIED
Α,		#	=	Х	х	20	=		
В.		#	=	Х	Х	20	=		
C.,		#	=	Х	х	20	=		
D,		#	=	Х	Х	20	=		
	S	ubtotal of	Lines 17	'-A, 17-B,	17-C &	17-D	=	1,4 = 1,11	

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

ENTER LARGEST OF TOTALS [13-15 (100 pts.), 16 (90 pts.), or 17 (80 pts.)] = \ 0 ()

	PERSONAL EVALUATION	ОК	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	ırts)	
	A. Are funds in acceptable financial institution and verified with bank/teller stamp?	(5)	*
	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)	(5)	*
21	Form 3.6 – Personnel Policy Summary		
41.	Does proposer agree to provide/maintain a written personnel policy covering the follow	ina:	
	A. Hiring employees with deputy registrar agency experience?	ing.	Г
	B. Equal Employment Opportunity?		
	C. Employee training by the deputy registrar?		
	D. Participation in BMV provided training?	1	
	E. Evaluation of employee performance?		
	F. Grounds for discipline or dismissal/termination (list) which shall include drug and alcohol use?	\wedge	
	G. Progressive disciplinary steps?	(11)	0
	H. Dress code with list of acceptable attire?	1	
	Dress code with list of unacceptable attire?	İ	
	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)	2	8
NOT	E: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract cont	tingency	/.

Comments: _____

	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)	4						
	H. Video recording camera surveillance system? (Mandatory)							
	Safe or secured locking cabinet? (Mandatory)	13						
	 J. Secured storage room with alarm monitored contacts on door(s) and window(s), if applicable? (Mandatory) 	13	,					
	 K. Cross cut shredder to be made available to destroy customer copy records? (Mandatory) 							
	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	(OK)	NO					
23.	Form 3.8 – Facility Maintenance Plan Summary - Did proposer agree to provide:							
	A. Indoor/Outdoor maintenance and cleaning?	12	0					
	B. Prompt snow and ice removal?	(1)	0					
	C. Carpet and/or floor cleaning (if appropriate)?	(1)	0					
	D. Repainting?	(1)	0					
NOT	PERSONAL EVALUATION POINTS, Page 6 (Max. 17 Points) NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.							
Com	ments:		_					

Ņų.		PERSONAL EVALUATION	ок	NO	
24.	 4. Form 3.9 – Involved and Invested in Your Business 1. How do you plan to manage, be responsible, and be accountable for this business 				
	1.	How do you plan to manage, be responsible, and be accountable for this business at all times?	1	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?	0	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?				
	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?	1	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?	1	0	
	9.	How would you deal with an irate customer?	(1)	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?	1	0	
25.	For	m 3.10(A) (B) or (C) – Affidavit of Individual, Auditor/Clerk of Courts or Nonprofit Co	orpora	tion	
		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?	(2)	*	
26.	Lo	cal Law Enforcement Report / Articles of Incorporation (AOI)			
	Α.	No disqualifying convictions for individual / AOI for nonprofit corporation?	(3)	*	
	В.	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 POINTS, Page 7 (Max. 27 Points)

27

14,5	PERSONAL EVALUATION	ок	NO
28.	Credit Report (issued in 2024) / Certificate of Good Standing for Nonprofit Corporatio *Credit Reports are not required for County Auditors and County Clerks of Courts	n	
	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?	(2)	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?	$L^{(1)}$	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)	(2)	0
NOT	PERSONAL EVALUATION POINTS, Page 8 (Max. 15 Points) E: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract con	tingency	<u>) </u>
Comr	ments:		
			_
•			_
			_
			_
-			_
			_

3.0 PERSONAL CHECKLIST

Proposer's Full Legal Name	vonne	Rosbocil

Proposer Number (BMV use only)

<u>INSTRUCTIONS:</u> 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	BMV	NONPROFIT CORPORATION	1	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 3.2 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	V	~	Form 3.3 Customer Service Experience			Form 3.3 Customer Service Experience		
Form 3.4 Start-Up Cost Funds on Deposit	\checkmark	~	N/A	x	1	Form 3.4 Start-Up Cost Funds on Deposit		
Form 3.5 Political Contributions Report	V	~	N/A	x	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	/	V	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	1	~	Form 3.10(B) Affidavit of Auditor or Clerk of Courts			Form 3.10(C) Affidavit of Nonprofit Corporation		
2024 Credit Report	V	~	N/A	х	1	2024 Certificate of Good Standing		
2024 Local Law Enforcement Report	/	V	2024 Local Law Enforcement Report			Articles of Incorporation		
2024 WebCheck Receipt	/	~	2024 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		Pre-approval Statement for \$25,000 Bond		
INDIVIDUAL	16		COUNTY AUDITOR OR CLERK OF COURTS			NONPROFIT CORPORATION		

3.1 PERSONAL QUESTIONNAIRE

1.	Check the box underneath if proposing the location as a second site in addition to a current agency: 28-A
2.	Full legal name of proposer Yvonne Rosboril
3.	Proposer's street address_
	City Chardon State Ohio Zip code 44024
4.	County of residence (nonprofit corporation county of operation) Geauga
5.	Daytime telephone (
6.	
7.	Spouse's name (nonprofit corporation N/A) Joseph Rosboril
8.	Spouse's home street address (nonprofit corporation N/A)
	City Chardon State Ohio Zip code 44024
	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 (2024)

11. A.	Are you currently serving in Auditor, either by election or app					ıty
				Yes	No_	_
B.	If YES, in what elective office a	re you serving? _				
C.	If YES, date that you plan to lear	ve this office?				
12. A.	Are you currently running for an (including precinct committee pe	•		Yes	No_	_
В.	If YES, what office?					_
13. A.	Are you currently a deputy regis	trar?		Yes _	No	
B.	If YES, on what date does your	contract expire?	une 29,2024			_
C.	If YES, have you served as a depsince January 1, 1992?	outy registrar con	tinuously	No _	Yes	
14. A.	Is your spouse currently a deput	Yes				
В.	If YES, on what date does your	spouse's contract	expire?			_
	e following three questions, externer, father-in-law, mother-in-law,	•				n,
15. A.	Does any member of your exte	ended family cur	rently hold a	deputy registra	ar contract? (NI	2C
	N/A)			Yes _	No	
B.	If YES, list their name, relation their contract expires here:	nship to you, wh	ether you sha	are the same ho	ousehold, and da	ıte
N:	ame	Relationship	Same	Household	Contract Expir	es
Су	nthia Marfisi	Sister	Yes	No 🗸	6-30-2025	
		w when the state of the state o	Yes	No		
		-				
***********			Yes	No		
16. A.	To the best of your knowledge, submit a proposal in response to			ded family		
				Yes	No_	

Form 3.1, Personal Questionnaire, Page 2 of 6 (2024)

E	s. If YES, list their name, relationship to you, and whether you share	the sam	e hous	ehold:	
	Name Relationship		Sam	e Hous	ehold
_			Yes _	No)
_				No	
_			Yes _	No)
			Yes _	No	
17. A	Is any member of your extended family employed by any subdivis Public Safety? (NPC N/A)			_	
`		Yes	-	No_	
В	. If YES, list their name, relationship to you, and the date they became	me so en	nploye	d:	
	Name Relationship		Fmn	lovmen	t Date
			Emp	ioyincii	Date
_					
_					
_					
18. A	. Have you completed the Political Contributions Report, Form 3.5? (NPC must submit one for NPC itself and one for its C.E.O.)	No	***************************************	Vac	<u> </u>
-	, , , , , , , , , , , , , , , , , , ,				
В	. If "NO," are you applying as a Clerk of Courts or County Auditor?	No		Yes_	
19. A	. Are you an employee of the State of Ohio? (NPC N/A)	Yes	Maddinana	No_	/
В	. If "YES," will you resign, if appointed?	No		Yes_	
20. A	re you an insurance company agent, writing automobile insurance?				
(1	NPC N/A)	Yes		No_	/
0	as Proposer (including NPC and proposed office manager) been converted a crime punishable by death or imprisonment in excess of one	victed wi	thin th elony)	e past to	en years y crime
11	volving dishonesty or false statement?	Yes		No	/
th	of the date of this certification does Proposer owe any overpensation contributions, social security payments, or workers' content of Ohio or any political subdivision thereof, or to the federal subdivision thereof.	npensatio	on prer	niums e	either to
OI	locality within the United States?	Voc		NT.	•

Form 3.1, Personal Questionnaire, Page 3 of 6 (2024)

23.	Is Proposer willing and able, if appoint policy of business liability property deshold the Department of Public Safety, and the Registrar of Motor Vehicles & Revised Code 4503.03(C)? (County Au	amage, the Dire armless	and theft insurance sati ector of Public Safety, the s upon claims for dama	isfactory to he Bureau	the of M	Registor V	strar and Vehicles,
	Revised Code 4505.05(C)? (County Au		ierk of Courts N/A)	No	-	Yes_	V
24.	Is Proposer bondable as outlined in Ohi 4501:1-6-01(B)?	io Admi	inistrative Code	No		Yes_	
25.	Please provide the following information provide educational information for the	on rega	arding your education. hual who will manage the	If applying a license ag	g as a	a NPO	C, please ness.
	High school diploma?			No		Yes_	V
	High school name Notre Dame	e Ac	ademy				
	City Munson	State	Ohio		Zip_	44	024
	College name	·					P-1
	City	State		***************************************	Zip_		
	Major		Degree awarded				
	College name						
	City	State			Zip_		
	Major		Degree awarded				
26.	Computer experience. Does Propose computers? (Incumbent deputy registron nonprofit corporations, this question shall the nonprofit corporation's activities.)	rars ma	y take credit for opera	ating BMV	opera	npute ted o	ers. For
				***************************************		****	

If "YES" please explain all computer experience in detail.						
20+ years of experience working on BMV Computers. I use Quickbooks for my bookkeeping and Payroll for						
my business. I have extensive training for 10 yrs in Payroll by working at Paychex a small business Payroll						
providor. I use Quickbooks for my payroll and I fill out and process my own Payroll forms for Monthly,						
Quarterly and Yearly tax forms. I have had a bit of training in Word Processing Word for business and						
Yahoo and Outlook for my E-mail needs.						
	-					
	-					
	-					
	,					
	_					
27. Please provide the requested information for three persons we can contact by telephone						
daytime business hours and who will serve as a character reference for you. Do not list repolitical contacts, or employees of the Department of Public Safety (including BMV). It unable to contact at least one person or that person is unable to serve as a character reference may be evaluated unfavorably. Nonprofit corporations should list references who are family	relatives, f we are nce, you					
daytime business hours and who will serve as a character reference for you. Do not list r political contacts, or employees of the Department of Public Safety (including BMV). It unable to contact at least one person or that person is unable to serve as a character reference for you.	relatives, f we are nce, you					
daytime business hours and who will serve as a character reference for you. Do not list repolitical contacts, or employees of the Department of Public Safety (including BMV). It unable to contact at least one person or that person is unable to serve as a character reference may be evaluated unfavorably. Nonprofit corporations should list references who are family	relatives, f we are nce, you					
daytime business hours and who will serve as a character reference for you. Do not list repolitical contacts, or employees of the Department of Public Safety (including BMV). It unable to contact at least one person or that person is unable to serve as a character reference may be evaluated unfavorably. Nonprofit corporations should list references who are family	relatives, f we are nce, you					
daytime business hours and who will serve as a character reference for you. Do not list repolitical contacts, or employees of the Department of Public Safety (including BMV). It unable to contact at least one person or that person is unable to serve as a character reference may be evaluated unfavorably. Nonprofit corporations should list references who are family	relatives, f we are nce, you					
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Form 3.1, Personal Questionnaire, Page 5 of 6 (2024)

28. Employment, management, supervisory, and business experience. Each Proposer's experience is one of the most important factors to be considered in the award of deputy registrar contracts. For the purposes of this RFP, experience gained prior to the year 1990 will not be evaluated or considered. Please provide a professional resume, in chronological order (no earlier than 1990), the positions you have held. If the position you held in 1990 was one you started before 1990, you may list that position and the date you actually started on your submitted resume. If you did not hold any position in 1990, please begin with the first position you held after 1990. If applying as a NPC, please provide a description of the fundraising, program, and charitable functions of the nonprofit corporation.

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	Yvonne Ros	boril		Chardon License Bureau				
Company address	12611 Rave	enwoo	od Drive		City	Chardor	1	
					ephone (44			77
Type of business (Depu	uty Regis	trar	1	
Company's produc	cts and/or servic	es_Lice	ense Servi	ces				
BUSINESS OWN	IER - Form of o	wnersh	ip (sole prop	rietor, p	eartner, etc.)	S-Corp)	
1. Federal Tax	ID Number:							
2. Percentage	of business you	owned	100	_%	Но	ırs worked	d weekly	36
	perated this bus			7				
4. Is/was this b	business profital	ble?				No	Ye	es 🖊
5. Is/was this b	business your pr	rimary s	source of inco	ome and	d support?	No	✓ Ye	es
6. Do/did you	directly hire, ev	aluate,	train, and dis	scipline	employees?	No	Ye	es
7. Do/did you	directly manage	e emplo	yees on a dai	ily basis	s?	No	Ye	es 🗸
If you answ	vered yes to ques	stion nu	ımber 6, how	many	employees d	lo/did you	manage?	8
	ver developed a						Ye	
List at least one p least one person t registrar or deputy	to verify this ex	perienc	e, you will i	not rece	eive any cre	dit for it.	(If you are	e a deputy
Name	Cit	V		State		7in	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 Yvonne Rosboril	Company name Mentor License Bureau
Company address 8830 mentor Ave.	Mentor
State OH Zip 44060	Telephone (440) 974-9000
Type of business (deputy registrar, retail grocery, etc.)	Deputy Registrar
Management/supervisory duties I helped customers	and other employees with questions and
concerns. I also processed the dealer work daily, and helped	d with duties while Deputy not on site.
MANAGER OR SUPERVISOR - Job title: Asst. Mar	nager
1. Title of position Assistant Manager	Hours worked weekly?36
2. Dates this position was held: From: month	
3. Do/did you directly hire, evaluate, train, and discip	pline employees? No Yes
4. Do/did you directly manage/supervise employees	on a daily basis? No Yes
If you answered yes to question number 4, how m	any employees do/did you manage?6
5. Have you ever developed a comprehensive busine	ss plan? No Yes
List at least one person, not a relative of yours, who can least one person to verify this experience, you will not registrar or deputy registrar employee, you may list BM	receive any credit for it. (If you are a deputy
Name City St	ate Zip Davtime 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 Yvonne Rosboril	Compar	ny name Paych	nex
Company address 30825 Aurora Road		City Solon	
State OH Zip 441	39 Telephor	ne (440)	542-3750
Type of business (deputy registrar, retail groce	ry, etc.) Payroll S	Service	
Management/supervisory duties I supported of heavy workloads. I trained my sta			
MANAGER OR SUPERVISOR - Job title: Cl			med daily reports
MANAGER OR SUPERVISOR - Job title:	IOTIC OCI VIOCO O	upoi visoi	
1. Title of position CSS		Hours work	ked weekly? 42
2. Dates this position was held: From: mor	th 6 year 19	989 To: month	_5 _{year} 1991
3. Do/did you directly hire, evaluate, train,	and discipline empl	loyees? No	Yes
4. Do/did you directly manage/supervise en	nployees on a daily	basis? No	Yes
If you answered yes to question number	4, how many emplo	oyees do/did you	manage?6
5. Have you ever developed a comprehensi	ve business plan?	No	✓ Yes
List at least one person, not a relative of yours least one person to verify this experience, you registrar or deputy registrar employee, you may	u will not receive a	my 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 Yvon	ne Rosboril	(Company name Mentor License Bureau				
Company address 8830	Mentor Ave		Mentor				
State Ohio		060 _T	elephone (440)	974-9000			
Type of business (deputy	registrar, retail groc	ery, etc.) De	puty Registrar				
EMPLOYEE - Job title:	Clerk						
Hours worked weekly_		b duties Han	dled Deputy Registra	ar employee duties			
and processed Dea	ler Work on the	days that	I worked.				
Dates of this employmen	t: From: month	8 year _	2002 To: month	7 year 2003			
Describe how and to what	nt extent you provide	d high quali	ty customer service a	t this position:			
I could help any custo	mer with a freindly	out profession	onal manner. I answ	vered customer			
questions to the be	est of my knowle	dge and w	as helpful and dir	ected them to the			
right place if I could	not help them.						
List at least one person, least one person to verif registrar or deputy regist	y this experience, yo	ou will not re	eceive any credit for it	t. (If you are a deputy			
Name	City	Stat	e 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 Yvonne	Rosboril		Company nam	ne Paych	ex	
Company address 30825	Aurora R	oad		Solon		
StateOH	Zip	44139	_ Telephone (4	40)	542-275	0
Type of business (deputy reg	istrar, retai	il grocery, etc.	Payroll Service	ce .		
EMPLOYEE - Job title: Ne	w Client	Specialist				
Hours worked weekly	38	Job duties	I would input d	lata from	new custo	omers
old payroll system an	d then do	thier 1st p	ayroll. I was a	liason be	etween Sa	les
and operations.						
Dates of this employment: F	rom: mont	h ye	ear 1991 To:	month	5 year	1995
Describe how and to what ex	tent you p	rovided high	quality customer	service at th	his position:	
I would make a good first	impressio	n of Paychex	for a New Client	by listenin	ng to them	
and attentively giving then	n positive	feedback. I	would keep in clo	se contact	with the cli	ent
to insure a smooth tra	nsition to	our Payro	ll System.			
List at least one person, not least one person to verify the registrar or deputy registrar of	is experien	ice, you will i	not receive any cre	edit for it.	(If you are a	
Name	City		State	Zip	Davtime Pl	ione
				()	

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 try to be aware of my customers concerns and problems, and to make eye contact and listen to their problems. I try to be friendly and helpful. The most important thing is for the customers to want to return to My Agency, so I train my employees Quality Service, I also give them examples of where they fall short and give them encouragement when they did a nice job with the customers. It is not always easy to deal with the customers because from time to time you cant give them what they want for ex. you have to send them to E-Check or to the Title Bureau before you can help them so I tell my employees to explain the situation to the customer, give them options to fix the problem and make sure they know what they need when they return as to not have more problems and time spent. The employees and I are very aware of how many customers are waiting in Q-flow and our main concern is to keep the lines flowing. The customer is always our first priority and we can do paperwork or other duties at slower traffic times.

I try to have a meeting with as many employees as are working if any concerns come up as soon as possible. My biggest thing is to make sure all employees are aware of the same issues and fixes. I make sure every employee is aware of the broadcasts and the Buletin Board and can come get me if they have any problems. I also make sure my Manager and Supervisors are always on the same page so as not to confuse any of the employees or the customers. I try to keep up with DR Manual changes and Procedure.

One other big thing is I try to make the Customers as comfortable as possible by keeping the Agency clean and neat and have a calming atmosphere.

Form 3.3, Customer Service Experience (2024)

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:	Yvonne Rosboril	·
Title (if	officer of nonprofit corporation):	-
(A ====		

(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 "\sqrt{"}" in the appropriate box, "yes" or "no" for each category and year separately.

RECIPIENT	JAN 1 - DEC 31 2021		JAN 1 - DEC 31 2022				2024 To Date	
	Yes	No	Yes	No	Yes	No	Yes	No
Democratic Party including PACs and Associations		~		1		~		~
Republican Party including PACs and Associations	~	~		~		~		~
Any other Party including PACs and Associations		~		~		~		~
Governor, Candidate and Committee		~		./		~	-	V
Attorney General, Candidate and Committee		J		~		~		V
Secretary of State, Candidate and Committee		~		~		~		~
Treasurer of State, Candidate and Committee		~		~		~		V
Auditor of State, Candidate and Committee		~		-1		~		V
State Senator, Candidate and Committee		~		2		~	***************************************	~
State Representative, Candidate and Committee		~		~		~		~

Form 3.5, Political Contributions Report (2024)

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?

Yes No____

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:

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 have been a Deputy for almost 20 years. I have been my own Manager and have worked right along with my employees. I feel that the time I have spent working with the customers on a one on one basis really showed me what it's like to be a clerk on the front lines. It showed me how to manage my employees and show them empathy. Like I know how it is I've been there before and this is what I did. I am accountable for my business even when I am not at the Agency so I make sure I have a good Manager and Supervisors that think the same way I do.

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?

All Broadcasts are to be read and initialed by all employees, so as to keep up with anything new. We may have an occassional meeting if there is an area of concern. I try to keep everyone on the same page. Since I work side by side with my employees I keep up with what they say to the customers and can give them feedback, especially with areas of concern. All DL and ID applications that had scans are reviewed the next day and VR applications are looked through for proper issuance.

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

The Deputy and Manager and Supervisor review documents before they are scanned by the employees. Investigative review process is used if necessary to get documents to the Investigator. All employees have to take the fraudulent document classes, and they are kept up to date with using the black light or the magnifying glass. We all check \$10.00 bills and up with fraud detection pens. We also put in place to look at our signature pads before the end of day to check for skimming devices that may have been placed on the pads.

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 or important e-mails will be read and initialed by all employees. If anyone has questions either myself or my Manager will get the answer through our help desk or Field Operations. We will have an occasional meeting with all employees if there is an area of concern.

5. How will you demonstrate good leadership to your employees?

Every day I try to have a positive attitude. I am a pretty even tempered person and I don't get flustered very easily. The employees know they can come to me for help and guidance because I won't fly off the handle. We can talk out problems and come up with good solutions. I will also help right away with a customer situation before it gets out of hand. I am pretty aware and I'm available most days of the week I'm even available on call when not in the office.

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

I make sure all employees act professional. If I hear of an employee being unprofessional I talk to them right away, to get to a better place. I don't let my employees talk about customers or make any comments after the customer has left the Agency. I also make all new employees aware of the level of professionalism that I expect from all employees.

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

This Deputy Registrar is committed to hiring competent and qualified employees who are capable of providing a friendly and efficient service to all customers. I always try to hire employees with customer service skills and have worked with the public before. As for retaining the employees, just being aware and present for them is helpful. Being an empathatic ear by telling them I've been there and these are the things I tried. I try to be level headed and don't fly off the handle. The best thing is just being here for them.

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

We try to have a friendly atmosphere in the Agency so the customers feel comfortable. I also demonstrate a caring and helpful environment for our customers and they do appreciate it because they tell us how nice and quick this Agency is. I have a panic alarm system in place by every employee. Also, our County Building that we occupy has a Sherriff on duty at all times and they can monitor our Agency. As for cleaning, we sweep and mop the floors on a daily basis especially in the winter.

9. How would you deal with an irate customer?

The first thing I do is remain calm at all times. I listen to the customers issue while making eye contact, once it is my turn I explain my understanding and empathy towards their problem. I tell the customer that everything should be OK just give me a few moments to get the best plan of action. I have the customer sit down if it will be awhile, I make phone calls if I have to or go look up the information I have to. After I gather all the information I tell them exactly what we can or can't do for them. I will appologize to them for there frustration and then give them the exact steps they can take to solve the problem or if I can I will fix the problem and make sure it is done correctly. When we are done I make sure they are satisfied with the outcome. If they have to come back I tell them exactly who they can ask for to resolve the problem.

10.	What training or advice do you, or will you, give to your employees for dealing with irate customers?
	The biggest advice I can give them is to take their emotions out of the situation. If you respond with emotions you will escalate the situation. If they cannot control themselves they will need to get the Deputy, Manager or a supervisor to help them. I also tell them not to take the customers anger personally, it is usually not personal you are just the person in front of them.
11.	How will you meet the expectations of the Bureau of Motor Vehicles?
	I will meet the expectations of the Bureau of Motor Vehicles by being a committed Deputy Registrar who is aware how important this work really is and who is present and accounted for. I will have and will strive to have outstanding long term employees, who will follow all the rules and regulations set up by the Bureau to the best of my and their ability.
12.	Why should the Bureau of Motor Vehicles consider you for a deputy registrar license agency contract
	You should consider me for the Deputy Registrar License Agency contract because I have a proven track record with the BMV for 20+ years. I have effeciently provided a convenient, professional and friendly service to all my customers. I effectively got through the pandemic and put up sheilds and learned Q-flow while opening back up. We efficiently and effectively opened back up while learning to use Q-flow and all the covid restrictions. We kept our customers safe by putting up shields, masking, social distancing and covid cleaning. It was a very nervous and anxious time being on the front lines but I feel I came through it probably some what for the better. I feel I am a better boss, cleaner and safer then I was before. I also closed one Agency and opened another in the matter of 1 day in the middle of last year. I efficiently got all of our equipment, chairs, desks and paperwork all moved in 1 day. I effectively achieved that goal which is no small feat and now have a beautiful and efficient Agency for the employees and customers alike. Even though some of the last 5 years have felt a bit overwhelming as I look back on it, I feel honored that I got the chance to proove myself as a didicated boss and leader in the face of adversity. I came through on the other side more confident and a better boss and person. That is why I should be considered and awarded the Agency contract.

Form 3.9, Involved and Invested in Your Business, Page 3 of 3 (2024)

3.10(A) AFFIDAVIT OF INDIVIDUAL

(Not to be used by County Auditors, Clerks of Courts or Nonprofit Corporations)

(1101 to be used by county reductors, crosses of counts of reductions)			
County of : Geauga			
State of Ohio :			
I, Yone Respection, being first duly sworn, depose and say that:			
 I am submitting my proposal for appointment as deputy registrar in my own indiv capacity, and not as an agent, representative, partner, or business associate of any whatsoever of any other person or persons; 			
 If appointed, I will serve as a deputy registrar in my own individual capacity, and will not as an agent, representative, partner, or business associate of any kind whatsoever of any person or persons; 			
 If appointed as deputy registrar, I will not assign my deputy registrar contract, in whole part, nor any of my deputy registrar's responsibilities to any other person or persons wi the advance written consent of the Registrar; 			
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 region and there is no provision of the Ohio Revised Code or the Ohio Administrative Code would make me ineligible to serve as a deputy registrar; and,			
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:			
Printed/typed name of proposer: Yvone Rosbori			
Sworn to and subscribed in my presence by the above named yvonne Rosbori			
on this 16 day of Jan	2024		
Notary Public JEANNIE A MAST			
Printed name of Notary Public: Notary Public State of Ohio			

My commission expires:

4.0 OPERATIONAL CHECKLIST

Proposer's Full Legal Name	Yvonne Rosboril
Location Number	
Proposer Number (BMV use	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	~	V
4.3	Staffing and Personnel Costs Calculation	V	V
4.4	Start-Up Costs Calculation Amount: 19931.99	~	~
4.5	Deputy Registrar Contract (2 pages only)	~	~
		6	

4.1 APPOINTMENT OF AGENCY MANAGERS

Prop	oposer's name: \(\frac{\frac{1}{\lambda} \lambda_{00} \equiv_{00}}{\lambda_{00}}\)	Rosboril	Location number: 28-A
(A)	hours per week during the he entire term of the contract. I is twenty (20) hours per wee twenty-hour requirement do	ours the agency is open to I understand that the mini- ek during the hours the age oes not apply to County	o work in the agency at least 30 the public for business throughout the mum requirement for deputy registrars ency is open for business. This Auditors/Clerks of Courts, e locations (assessed as received).
(B)	another reliable person to se manager must be scheduled during the hours the agency. Appoint myself as the during the hours the agency and the hours the ho	to work at the agency at is open to the public for but the office manager and was agency is open to the public ble person to serve as the	office manager to work at least thirty-
(C)	ASSISTANT OFFICE MAN person to be responsible for	NAGER: I understand and the management of the ag	is open to the public for business. d agree that I must appoint a reliable gency in the absence of myself and the open to the public for business.
(D)	manager, assistant office man as my own work schedule, times. I also agree to not	nager, and all other emplo on file and available for ify the BMV in writing	arate and current roster of my office yees and their work schedules, as well inspection by BMV employees at all immediately of any changes in the e manager, and to keep the employee
Dep	puty registrar (proposer) signat	ure	Date: 1/9/2024

Form 4.1, Appointment of Agency Managers (2024)

4.2 EXPERIENCED EMPLOYEES SUMMARY

Prop	oser's nar	me: Yuonne	Rosboril	Loca	ntion number: <u>28-A</u>	
(A)	(A) <u>HIRING EXPERIENCED EMPLOYEES</u> . I certify that if I am appointed as a deputy registrar under contract with the Registrar of Motor Vehicles, I will make every good faith effort to hire and retain qualified employees who have relevant experience working in a deputy registrar agency. I agree to make bona fide offers of employment at comparable wages and under comparable conditions to their most recent deputy registrar employment experience.					
(B)	CHECK	EMPLOYEE. I he relevant deputy re every reasonable have relevant expression contact any deputy contract. I AM OR HAVE EMPLOYEE. I ha fide offer of emple to their present expression of the exp	EEN A DEPUTY REGIStrave not yet identified any egistrar experience. However effort to identify and hire, it perience working in a deputy registrar employees under the identified the following loyment at comparable wag imployment. (A deputy register experience may list him	y prospectiver, if awarded if possible, outy registrantial after your strantial after your st	ve employees who have ed a contract, I will make qualified employees who agency. Please do not have been awarded DEPUTY REGISTRA whom I will make a border comparable condition proposer who has deputed.	ke no ot a
, (C)		Joseph Jeannie Tracit Nake Ro Jordan	ienced Employee J. Rosbocil Lamburg Lamburg Lamburg LK Holcomb to hire properly qualified thhold or terminate my depr	uty registrar	contract.	
Depi	ity registr	rar (proposer) signa	ture	Date:	1/9/2024	
		, -	perienced Employees	Summary	(2024)	

4.3 STAFFING AND PERSONNEL CALCULATION

Proposer's name:	Yvonne Rosboril	Location number:	28-A

<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 \$385,000 per year and \$10.45 per hour by businesses with gross receipts of \$385,000 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	30.00	N/A	N/A	N/A
Office Manager (leave blank if the Deputy Registrar is also the Office Manager)	36.00	\$ 23.00	\$ 828.00	\$ 3,312.00
Assistant Office Manager	36.00	\$ 19.00	\$ 684.00	\$ 2,736.00
Experienced Employees Total Number (combine Full-time & Part-time) =3	88.00	\$ 17.00	\$ 1,496.00	\$ 5,984.00
New Hire Employees Total Number (combine Full-time & Part-time) =				
TOTALS	190.00	N/A	\$ 3,008.00	\$ 12,032.00

Form 4.3, Staffing and Personnel Calculation (2024)

4.4 START-UP COSTS CALCULATION

Propos	ser's n	ame:	Yvonne Rosboril	Location number:	28-A
The purpose of this form is to assure the BMV that you are financially able to cover costs of beginning a deputy registrar business. We need to know that you have enfinancial resources to cover your personnel, site preparation, and site rental costs.			have enough		
1.	PEF	RSO	NNEL COSTS (FOUR V	WEEKS)	
	Use	Form	4.3 to calculate four (4) week	s' personnel costs for this loca	ation.
				\$ <u>12032</u>	.00
2.	SIT	E PI	REPARATION COSTS	(AMORTIZED)	
	A.	costs	nis is a Deputy Provided Sites you will need to spend to strar agency in each of the follows:	te, calculate and enter the act prepare the building for use lowing categories:	ual projected as a deputy
		1.	Building Modifications	\$	
		2.	Counter Costs	\$	
		3.	Other Costs	\$	
		4.	Total	\$	
			al amortized over 60 month c vide line 4 by 60)	ontract period = \$	
	B.	Age	his is a BMV Controlled Sincy Specifications for this long the Agency Specifications.	ite, enter the information concation. Do not change the	tained in the information
3.	AGENCY RENTAL PAYMENTS (3 MONTHS)				
	A.		his is a Deputy Provided Sit or lease this site.	te, enter the actual amount yo	ou will pay to
	B If this is a BMV Controlled Site, enter the estimated rent listed in the Agency Specifications for this site. Do not change the amount listed.				
			• •	3.33 x 3 = \$ 7899.	
TOTAL START-UP COSTS [four weeks' personnel costs, plus one month's amortized site preparation costs (2.A total amount or 2.B BMV Controlled Site amount), plus three months' rent] \$ 19931.99					

STATE OF OHIO

DEPARTMENT OF PUBLIC SAFETY

BUREAU OF MOTOR VEHICLES

DEPUTY REGISTRAR CONTRACT - 2024

This Agreement i	s made by and betw	een the Registrar	of Motor Vehicles, (Registrar,
herein), located Yvonne Rosboril	at 1970 West Broa		ous, Ohio 43223-1102 and eputy registrar, herein) whose
home mailing add	-	, Ohio (Zip) Ohio	
registrar agency, I			to be located as follows: in the
State of Ohio, Cou	nty of Geauga		
City/Village/Town	ship (indicate which)	Township	of Claridon
Street address: 1	2611 Ravenwood Drive	9	
(City) Chardon		, Ohio (Zip) _	4024

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 2024 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 2024 Deputy Registrar Contract Terms and Conditions incorporated herein by reference;
- 3. The term of this appointment and contract shall begin on the 30th day of June, 2024, and shall end on the 30th day of June, 2029, unless otherwise terminated as provided herein;

Form 4.5, Deputy Registrar Contract (2024)

4. The deputy registrar is appointed and accepts ap "an individual," "County Auditor for (specify county)," or "a nonprofit corporation"]:	
an individual	
5. The Deputy Registrar certifies that he or she had to all of the 2024 Deputy Registrar Contract Ter	
Deputy Registrar signature	1//6/24 Date
STATE OF OHIO :	
COUNTY OF Geauga	
Before me, a notary public in and for said county and	l state, personally appeared the above
named Yvonne Rosbocil	who acknowledged that he or she did
sign the foregoing instrument and that the same is hi	s or her free act and deed.
Printed name of Notary Public: My commission Expires:	JEANNIE A MAST Notary Public State of Ohio y Comm. Expires June 9, 2025
STATE OF OHIO DEPARTMENT OF PUBLIC SAFETY BUREAU OF MOTOR VEHICLES	
BY: REGISTRAR OF MOTOR VEHICLES	
Done at Columbus, Ohio, on	

Form 4.5, Deputy Registrar Contract (2024)