

## Professional Consultant Services - Executed Contracts

Total Projected Cost &gt;= \$10,000 and &lt; \$50,000.00

Report Period: 12/05/2017 - 01/05/2018

Date Submitted	Vendor Name	Contract No.	Contract Period	Method of Procurement	Initial Contract Amount	Total Projected Amount
01/04/2018	DUVALL CONSULTING GROUP	RA1184013	12/15/2017 To 04/30/2018	Request for Proposal	\$18,980.00	\$18,980.00
Agency #	Agency Name	Division	Agency Contact Name	Agency Contact Phone No.	Agency Contact E-mail Address	
0135	University of Arkansas at Fayetteville	UA Fayetteville	ELLEN FERGUSON	479-575-5314	ellenf@uark.edu	
Item #	Category	Short Description	Quantity	UM Description	Cost	
00001	Personnel	Consultants	00002	Years	\$12,530.00	
00001	Expenses	Travel	00001	Years	\$6,450.00	
Date Submitted	Vendor Name	Contract No.	Contract Period	Method of Procurement	Initial Contract Amount	Total Projected Amount
01/04/2018	COGHILL COMMUNICATIONS INC	RA1184015	12/18/2017 To 04/18/2018	Small Order	\$10,000.00	\$10,000.00
Agency #	Agency Name	Division	Agency Contact Name	Agency Contact Phone No.	Agency Contact E-mail Address	
0135	University of Arkansas at Fayetteville	UA Fayetteville	ELLEN FERGUSON	479-575-5314	ellenf@uark.edu	
Item #	Category	Short Description	Quantity	UM Description	Cost	
00001	Personnel	Proposal Management, Writing/Editing	00001	Years	\$10,000.00	
Date Submitted	Vendor Name	Contract No.	Contract Period	Method of Procurement	Initial Contract Amount	Total Projected Amount
12/14/2017	BLAST MASTER LLC	4600041778	01/01/2018 To 12/31/2018	Small Order	\$14,350.00	\$14,350.00
Agency #	Agency Name	Division	Agency Contact Name	Agency Contact Phone No.	Agency Contact E-mail Address	
0630	Department of Finance & Administration - Revenue Services		Teresa A. Case	501-682-2554	teresa.case@dfa.arkansas.gov	
Item #	Category	Short Description	Quantity	UM Description	Cost	
00001	Personnel	PRO SERVICE,LEGAL WITNESS	11600	Lump Sum	\$1.00	
00001	Expenses	AIRFARE,TICKETS	01500	each	\$1.00	
00002	Expenses	FOOD,ADULT MEAL	00295	each	\$1.00	
00003	Expenses	FEE,LODGING,HOTEL ROOM	00955	each	\$1.00	
Date Submitted	Vendor Name	Contract No.	Contract Period	Method of Procurement	Initial Contract Amount	Total Projected Amount
01/04/2018	ADVANCED AUTOMATION CONSULTING	4501769510	01/01/2018 To 05/31/2018	Small Order	\$19,900.00	\$19,900.00
Agency #	Agency Name	Division	Agency Contact Name	Agency Contact Phone No.	Agency Contact E-mail Address	
0810	Department of Workforce Services		Nancy Morris	501-683-5372	nancy.morris@arkansas.gov	
Item #	Category	Short Description	Quantity	UM Description	Cost	
00001	Personnel	PRO SERVICE,CONSULTANT,DATA PROCESSING	00005	each	\$3,800.00	
00001	Expenses	REIMBURSEMENT,TRAVEL	00900	each	\$1.00	

**Technical and General Services - Executed Contracts**  
**Total Projected Cost >= \$25,000.00 and < \$100,000.00**

**Report Period: 12/01/2017 - 12/30/2017**

<b>Date Submitted</b> 12/19/2017	<b>Vendor Name</b> STRUCTUUR LLC	<b>Contract No.</b> 4600041734	<b>Contract Period</b> 12/01/2017 To 11/30/2018	<b>Method of Procurement</b> Small Order	<b>Initial Contract Amount</b> \$8,000.00	<b>Total Projected Amount</b> \$56,000.00
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<b>Agency #</b> 0290	<b>Agency Name</b> Board of Acupuncture and Related Techniques	<b>Division</b>	<b>Agency Contact Name</b> MARIA VELASCO	<b>Agency Contact Phone No.</b> 501-687-1396	<b>Agency Contact E-mail Address</b> asbart@cgiresults.com
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<b>Item #</b> 00001	<b>Category</b> Services	<b>Short Description</b> TECH SERVICE,ADMINISTRATIVE	<b>Quantity</b> 08000	<b>UM Description</b> Lump Sum	<b>Cost</b> \$1.00
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<b>Date Submitted</b> 12/11/2017	<b>Vendor Name</b> ARKANSAS DEPARTMENT OF HEALTH	<b>Contract No.</b> 4600039499	<b>Contract Period</b> 01/01/2017 To 12/31/2018	<b>Method of Procurement</b> Intergovernmental	<b>Initial Contract Amount</b> \$29,952.00	<b>Total Projected Amount</b> \$29,952.00
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<b>Agency #</b> 0319	<b>Agency Name</b> Minority Health Commission	<b>Division</b>	<b>Agency Contact Name</b> Melissa Griffith	<b>Agency Contact Phone No.</b> 501-683-2220	<b>Agency Contact E-mail Address</b> Melissa.griffith@dfa.arkansas.gov
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<b>Item #</b> 00001	<b>Category</b> Services	<b>Short Description</b> TECH SERVICE,REIMBURSABLE EXPENSES	<b>Quantity</b> 29952	<b>UM Description</b> each	<b>Cost</b> \$1.00
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<b>Date Submitted</b> 12/28/2017	<b>Vendor Name</b> UNIVERSITY OF ARKANSAS AT LITTLE RO	<b>Contract No.</b> 4600041812	<b>Contract Period</b> 01/14/2018 To 08/30/2018	<b>Method of Procurement</b> Intergovernmental	<b>Initial Contract Amount</b> \$68,538.00	<b>Total Projected Amount</b> \$68,538.00
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<b>Agency #</b> 0319	<b>Agency Name</b> Minority Health Commission	<b>Division</b>	<b>Agency Contact Name</b> ESTE FRAZIER	<b>Agency Contact Phone No.</b> 501-686-2748	<b>Agency Contact E-mail Address</b> Este.Frazier@arkansas.gov
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<b>Item #</b> 00001	<b>Category</b> Services	<b>Short Description</b> TECH SERVICE,DATA PROCESSING, RESEARCH	<b>Quantity</b> 68538	<b>UM Description</b> each	<b>Cost</b> \$1.00
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<b>Date Submitted</b> 12/20/2017	<b>Vendor Name</b> NCR CORP	<b>Contract No.</b> 4501768719	<b>Contract Period</b> 12/20/2017 To 06/30/2018	<b>Method of Procurement</b> Exempt by Law	<b>Initial Contract Amount</b> \$38,507.06	<b>Total Projected Amount</b> \$38,507.06
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<b>Agency #</b> 0610	<b>Agency Name</b> Department of Finance and Administration	<b>Division</b>	<b>Agency Contact Name</b> Jacob A Saugey	<b>Agency Contact Phone No.</b> 501-371-6182	<b>Agency Contact E-mail Address</b> Alan.Saugey@dfa.arkansas.gov
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<b>Item #</b> 00001	<b>Category</b> Services	<b>Short Description</b> TECH SERVICE,MAINTENANCE,COMPUTER EQUIPMT	<b>Quantity</b> 00001	<b>UM Description</b> each	<b>Cost</b> \$34,023.06
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<b>Item #</b> 00001	<b>Category</b> Commodities	<b>Short Description</b> TECH SERVICE,MAINTENANCE,IT SOFTWARE	<b>Quantity</b> 00001	<b>UM Description</b> each	<b>Cost</b> \$4,484.00
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**Technical and General Services - Executed Contracts**

**Total Projected Cost >= \$25,000.00 and < \$100,000.00**

**Report Period: 12/01/2017 - 12/30/2017**

Date Submitted	Vendor Name	Contract No.	Contract Period	Method of Procurement	Initial Contract Amount	Total Projected Amount
12/28/2017	ASSOCIATED INDUSTRIES OF ARKANSAS	4600041803	01/01/2018 To 09/30/2018	Exempt by Law	\$75,000.00	\$75,000.00
Agency #	Agency Name	Division	Agency Contact Name	Agency Contact Phone No.	Agency Contact E-mail Address	
0810	Department of Workforce Services		Warner Sebree	501-683-1654	warner.sebree@arkansas.gov	

Item #	Category	Short Description	Quantity	UM Description	Cost
00001	Services	TECH SERVICE, OCCUPATIONAL GUIDANCE	00003	each	\$25,000.00