

**Exhibit R-13 Maintenance Renewal  
Automated Victim Notification Services  
Wise County**



13401 E. 15th Street, Suite 200  
Tulsa, Oklahoma 74116-2849  
918.761.9431 • 918.761.9432  
www.appriss.com

**Category: Pilot - Medium**

Subject to the terms and conditions included in the Agreement, this **Exhibit R-13 Schedule of Payments** shall describe the amount due to Appriss which will be paid quarterly by the Office of the Attorney General to Appriss on the County's behalf as described in 4.3.5 of the Grant Contract.

**Maintenance Amount.** Customer shall pay Appriss a maintenance amount for the Renewal of Services determined as follows. This Renewal will extend services through August 31, 2017.

<b>Jail Maintenance Amount</b>	<b>District Court Maintenance Amount</b>	<b>County Court Maintenance Amount</b>	<b>Annual Maintenance Amount (12 Months)</b>	<b>Quarterly Maintenance Amount (4 Quarters)</b>	<b># of Months Through 8/31/17</b>	<b>Total Maintenance Amount Due</b>
\$11,616.48	\$0.00	\$0.00	\$11,616.48	\$2,904.12	12 Months	\$11,616.48

Maintenance Amount as indicated above does not include "3<sup>rd</sup> Party Vendor Fees" <sup>1</sup> include booking system vendors, IT staff or other work that is associated with any booking system change not covered under the Vendor Certification. These services are considered additional costs and will be billed by the Certified Vendor directly to the entity. Unless approved by the OAG, in writing, in advance, the "3<sup>rd</sup> Party Vendor" may not be reimbursed by the OAG's SAVNS grant program.



# CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 2

Complete Nos. 1 - 4 and 6 if there are interested parties.  
 Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

## OFFICE USE ONLY CERTIFICATION OF FILING

**1 Name of business entity filing form, and the city, state and country of the business entity's place of business.**  
 Appriss Inc.  
 Louisville, KY United States

**Certificate Number:**  
 2016-108115

**Date Filed:**  
 09/06/2016

**2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.**  
 Wise County Sheriff's Office

**Date Acknowledged:**  
 9-12-16

**3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.**  
 EXH R-13 Maint. Renewal FY17  
 TX Statewide Automated Victim Notification System (SAVNS) an anonymous telephone service that gives victims of crime information and notification about offender custody status and related court cases.

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Parekh, Deven	Louisville, KY United States	X	
	Swift, James	Louisville, KY United States	X	
	Agarwal, Anika	Louisville, KY United States	X	
	Menzies, Euan	Louisville, KY United States	X	
	Sastry, Krish	Louisville, KY United States	X	
	Cohen, Rob	Louisville, KY United States	X	
	Byal, Jeff	Louisville, KY United States	X	
	Hensley, Rusty	Louisville, KY United States	X	
	Wolin, Neal	Louisville, KY United States	X	
	Davis, Michael	Louisville, KY United States	X	
	Appriss Inc.	Louisville, KY United States	X	

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**5 Check only if there is NO Interested Party.**

**6 AFFIDAVIT** I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



*Thomas R. Seigle*  
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Thomas R. Seigle this 6 day of September 20 16 to certify which, witness my hand and seal of office. My Commission Expires 10/23/17 Notary ID 499639

*Julie Kwick*  
Signature of officer administering oath

Julie Kwick  
Printed name of officer administering oath

Account Specialist  
Title of officer administering oath