PAYROLL COMPARISON - 2025

Proposer Name: Leonardo Argueta

Evaluator Printed Name: Michael Farell

	<u>Loc. 1</u>	Loc. 2		umber(s)		
	25-K	<u>LOC. 2</u>	<u>Loc. 3</u>	<u>Loc. 4</u>	Loc. 5	Loc. 6
Highest Rate	\$186-		*************			
Lowest Rate	\$1460					
Number of Hours Recommended	241					**********
Number of Hours Proposed	264					
Total Monthly Wages	114 480					S-P400 to liber-101
Comments:	174, 4 80					

PERSONAL EVALUATION (2025)

Leonardo Argueta 25-K / 25037 Franklin County, Whitehall 3481 E Broad St.

- 1 0 - N 1		
Evaluation Team Number:		
Location(s) Proposed: (#1) 25-K	A	
Proposed as 2 nd Location	- 1	
Verify Proposer's Full Name: (#2) Leonardo A.	Argueta	
Proposer's County of Residence (NPC Operation): (#4)	ark	
Verify Proposer's Driver's License Number: (#6)		-
Proposing as Minority: (#9) Yes No		
Proposing as: (#10) Individual Clerk of Courts Co.	. Auditor Nonprofit	Corp
SCORING SUMMAR	Y	
FORM 3.0, PERSONAL CHECKLIST	(Max. 16 Points):	16
PERSONAL EVALUATION, Page 2	(Max. 55 Points):	55
BUSINESS AND EMPLOYMENT EXPERIENCE, Page 3	(Max. 100 Points);	100
PERSONAL EVALUATION, Page 5	(Max. 28 Points):	28
PERSONAL EVALUATION, Page 6	(Max. 17 Points):	17
PERSONAL EVALUATION, Page 7	(Max. 27 Points):	27
PERSONAL EVALUATION, Page 8	(Max. 15 Points):	15
TOTAL POINTS	(Max. 258 Points):	258
Comments:		
Evaluators' Signatures Evaluators' P	rinted Names	<u>Date</u>
(1) Michael Michael	1 Farrell	2/26/25
(2)		1.0

K.	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?	0	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 contract continuous contract contrac		, —— y.
Com	nments:		

BUSINESS AND EMPLOYMENT EXPERIENCE VERIFICATION

Person called: Verifical	at	telephone ()
Company: East Broad St.	License Agency	
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: 22. 7
		7 x Points <u>50</u> = 1,135
***************************************		•••••
Person called:	at	telephone ()
Company:		
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 ()
Company:		
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 =

BUSINESS AND EMPLOYMENT EXPERIENCE CALCULATION

13. DEPUTY REGISTRAR AGENCY OWNER Experience, Form 3.2

ITEM AGENCY/COMPANY	Н	DURS	= F	ACTO	R X YEARS	X	POINTS		SCORE	VERIFIED
A. East Broad St. License Agency B.	#	NA	=	1.0	×22.7	Х	50	=	1,135	
В.	#	NA	=	1.0	Х	X	50	=	,	
C.	#	NA	=	1.0	Х	Х	50	=		
世纪1987年1987年1988年1987年1986年1	Real	S	ubto	otal of	13-A, 13	-B	& 13-C	+ [4]	1.135	

14. OTHER BUSINESS OWNERSHIP Experience, Form 3.2

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

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	×	25	=		
B.	#	=	X	X	25	=		
C.	#	=	X	×	25	=		
		Subtota	l of 15-A,	15-B 8	15-C	=		

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

TEM AGENCY	HOU	RS = FAC	TOR X YEA	RS X	POINTS	3 =	SCORE	VERIFIED
Α.	#	=	X	X	23	=		
B.	#	=	X	X	23	=		
C.	#	=	Х	X	23	=		
D.	#	=	Х	Х	23	=		

Total DR Employment Experience #16 (Max. 90 Points) =

ITEM AGENCY/COMPANY	HOU	JRS = FAC	TOR X YEA	RS X	POINTS	3 =	SCORE	VERIFIED
A.	#	=	Х	×	20	×		
B.	#	=	Х	Х	20	=		
C.	#	Œ	Х	X	20			
D.	#	-	Х	Х	20	=		
	Subtotal o	f Lines 17	7-A, 17-B,	17-C &	17-D			

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

11000	PERSONAL EVALUATION	OK	NO
		OK	NO.
18.			
	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?		0
19.	Form 3.4 - Start-Up Cost Funds On Deposit (not required for Auditors or Clerks of Co	urts)	
l	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)	*
24	Form 2.6. Dereamed Balieu Commence.		
21.			
	Does proposer agree to provide/maintain a written personnel policy covering the followal. Hiring employees with deputy registrar agency experience?	wing.	
	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?		
1	G. Progressive disciplinary steps?	(11)	0
	H. Dress code with list of acceptable attire?		
	Dress code with list of unacceptable attire?	1	
	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)?		
			1
NO.	PERSONAL EVALUATION POINTS, Page 5 (Max. 28 Points) _ TE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract co	28 ntingenc	

Comments: _____

		PERSONAL EVALUATION	ок	NO
22.	For	m 3.7 – Security Plan Summary - Did proposer agree to provide:	-	
	<u>A.</u>	An electronic alarm system? (Mandatory)		
	B.	Alarm system monitored 24 hours, off-site? (Mandatory)		
	C ₂	Alarm system reports off-site if wires cut or tampered with? (Mandatory)		
	D.	Adequate alarm monitored panic/hold-up buttons? (Mandatory)		
	<u>E.</u>	Motion detectors connected to alarm system? (Mandatory)		
	F _{in}	Alarm monitored contacts on all exterior doors? (Mandatory)		
	G.	Alarm monitored contacts on all exterior windows? (Mandatory)		
	<u>H.</u>	Video recording camera surveillance system? (Mandatory)	(80)	3
	1.	Safe or secured locking cabinet? (Mandatory)	(.
	J.	Secured storage room with alarm monitored contacts on door(s) and window(s), if applicable? (Mandatory)	0	
	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)?	1	
	N	Interior/Exterior motion activated security lights? (Suggested) - Check OK or NO	ОК	NO
23.	For	m 3.8 – Facility Maintenance Plan Summary - Did proposer agree to provide:	$\overline{}$	
	Α	Indoor/Outdoor maintenance and cleaning?	(2)	0
	<u>B.</u>	Prompt snow and ice removal?	(1)	0
	<u>C,</u>	Carpet and/or floor cleaning (if appropriate)?	W	0
	D.	Repainting?	(1)	0
NOT	E: S	PERSONAL EVALUATION POINTS, Page 6 (Max. 17 Points) — core indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract cont]/ ingency	<i>!</i>
Com	men	nts:		_
<u> </u>				_ 1

		PERSONAL EVALUATION	oĸ	NO
24.	For	m 3.9 – Involved and Invested in Your Business	_	
	1.	How do you plan to manage, be responsible, and be accountable for this business at all times?	0	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?	(1)	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?		0
	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?		0
	9.	How would you deal with an irate customer?	Y)	0
	10.	What training or advice do you, or will you, give to your employees for dealing with irate customers?)=(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?		0
25.	For	m 3.10(A) (B) or (C) – Affidavit of Individual, Auditor/Clerk of Courts or Nonprofit Co	rpora	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)		
		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

	PERSONAL EVALUATION	OK	NO
28.	Credit Report (issued in 2025) / Certificate of Good Standing for Nonprofit Corporation *Credit Reports are not required for County Auditors and County Clerks of Courts	1 ~	
	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?*	0	0
	D. *No bankruptcy filed or trusteeship imposed for the past 36 months?	12	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?	(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)	3	0
Comr	ments:		_
			_
			-
			_
			_

OPERATIONAL EVALUATION (2025)

Leonardo Argueta 25-K / 25037 Franklin County, Whitehall 3481 E Broad St.

FORM	DESCRIPTION	ок	NO						
4.0	Operational Checklist – Maximum = 6 Points (enter points recorded on bottom of Form 4.0)	(6)							
4.1	Appointment of Agency Managers								
	A. Deputy to Work at Least Twenty (20) Hours Per Week								
	Proposed Work Hours Per Week 24	(5)	*						
	B. Appointment of Manager and Assistant OR Acceptable Statement	(3)	0						
4.2	Experienced Employees Summary								
	Gave Acceptable Statement OR Provided Names	(2)	0						
4.3	Staffing and Personnel Calculation								
	A. Hours Recommended: 24/ Proposed: 364	4	*						
	B. Work Hours and Pay Calculated Correctly	(2)	0						
	C. Meets Minimum Wage Requirement	(1)	*						
4.4	(2025 Ohio Minimum Wage Rate = \$7,25 or \$10.70 Per Hour)								
4.4	Start-Up Costs Calculation								
	A. Adequate and Accurate Personnel Costs B. Adequate and Accurate Site Preparation Costs	34	0						
	C. Adequate and Accurate Rental Payments	153	0						
	D. Total Required: \$23,840.60 On Deposit (Form 3.4): \$87,622	57	*						
4.5	Deputy Registrar Contract	0							
4.5	A. Filled Out Completely and Properly	1/2)	0						
	B. Signed and Properly Notarized	23	0						
	B. Cigned and Property Notarized		0						
	OPERATIONAL EVALUATION POINTS (Max. 40 Points)	40							
NOTE: Sco	re indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contrac	t continge	ncy.						
Comment	ts:								
	·								
Evalu	uators' signatures Printed names	Date							
(1) 7	Wester Facel Michael Farrell	2/2	6/25						
111	THOUGH TRANS	w/m	4/4/						
(2)									

DEPUTY REGISTRAR

REQUEST FOR PROPOSALS

2025 FORMS

AND

INSTRUCTIONS

3.0 PERSONAL CHECKLIST

Proposer's Full Legal Name Leonardo A. Argueta

Proposer Number (BMV use only)
INSTRUCTIONS: 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		вму	COUNTY AUDITOR OR CLERK OF COURTS		ВΜ\	NONPROFIT	/	BMV
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 3.1 Personal Questionnaire		
Form 3.2 Business and Employment Experience	•		Forms 3.2 Business and Employment Experience			Forms 3.2 Business and Employment Experience		
Form 3.3 Customer Service Experience			Form 3.3 Customer Service Experience			Form 3.3 Customer Service Experience		
Form 3.4 Start-Up Cost Funds on Deposit			N/A	X	1	Form 3.4 Start-Up Cost Funds on Deposit		
Form 3.5 Political Contributions Report	✓		N/A	X	1	Form 3.5 Political Contributions Report Nonprofit Corporation		
N/A	X	1	N/A	X	1	Form 3.5 Political Contributions Report Chief Executive Officer		
Form 3.6 Comprehensive Personnel Policy Agreement			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	/		Form 3.10(B) Affidavit of Auditor or Clerk of Courts			Form 3.10(C) Affidavit of Nonprofit Corporation		
2025 Credit Report			N/A	Х	1	2025 Certificate of Good Standing		· · · · · · · · · · · · · · · · · · ·
2025 Local Law Enforcement Report	/		2025 Local Law Enforcement Report			Articles of Incorporation		 <u>.</u>
2025 WebCheck Receipt			2025 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		
INDIVIDUAL			COUNTY AUDITOR OR CLERK OF COURTS			NONPROFIT CORPORATION		

Form 3.0, Personal Checklist (2025)

3.1 PERSONAL QUESTIONNAIRE

1.	List all location numbers for which the applicant intends to submit a proposal (limit six locations). Check the box underneath if proposing the location as a second site in addition to a current agency:
	25-K
2.	Full legal name of proposer Leonardo A. Argueta
3.	Proposer's street address
	City State OH Zip code 45503
4.	County of residence (nonprofit corporation county of operation) Clark
5.	Daytime telephone
6.	Proposer's driver's
7.	Spouse's name (nor
8.	Spouse's home stre
	City OH Zip code 45503
9.	Are you proposing as the owner of a minority business enterprise (MBE)? No Yes
10	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 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 (2025)

11. A.	Are you currently serving in elective public of Auditor, either by election or appointment (include	ffice, other es precinct o	than Clerk of committee perso	Courts or n)? (NPC 1	County V/A)
			Yes	No_	
В.	If YES, in what elective office are you serving?			······································	, .,
C.	If YES, date that you plan to leave this office?				· · · · · · · · · · · · · · · · · · ·
12. A.	Are you currently running for any elective public (including precinct committee person)? (NPC N/A		Yes	No	
В.	If YES, what office?	······································	· · · · · · · · · · · · · · · · · · ·		
13. A.	Are you currently a deputy registrar?		Yes	No_	
В.	If YES, on what date does your contract expire?	une 28,2025		- · · · · · · · · · · · · · · · · · · ·	
C.	If YES, have you served as a deputy registrar continue January 1, 1992?	nuously	No	Yes	
14. A.	Is your spouse currently a deputy registrar? (NPC)	N/A)	Yes	No	
В.	If YES, on what date does your spouse's contract e	xpire?			
daught	e following three questions, extended family incluer, father-in-law, mother-in-law, brother-in-law, sis Does any member of your extended family currence N/A)	ter-in-law,	son-in-law, or da	ughter-in-	aw:
			Yes	No_	
В.	If YES, list their name, relationship to you, whe their contract expires here:	ther you sh	are the same ho	ousehold, a	nd date
Na	me Relationship	Same	Household	Contract	Expires
		Yes	No		
, , .		Yes	No		
		Yes	No		·,····
- 	***	Yes	No	······································	·
	To the best of your knowledge, will any member of submit a proposal in response to this RFP? (NPC N	-	ded family		
			Yes	_ No	

Form 3.1, Personal Questionnaire, Page 2 of 6 (2025)

23. Is Proposer willing and able, if appropriately policy of business liability property hold the Department of Public Safety and the Registrar of Motor Vehicles	damage, , the Dire harmles	and theft insurance ector of Public Safet upon claims for da	satisfactory y, the Burea	to the u of M	Regis otor V	trar and ehicles.
Revised Code 4503.03(C)? (County A	Auditor/C	lerk of Courts N/A)	No		Yes_	
24. Is Proposer bondable as outlined in O 4501:1-6-01(B)?	hio Admi	inistrative Code	No	. <u> </u>	Yes	
25. Please provide the following information for the	ation rega	arding your education who will manage	n. If applyie the license	ng as a agency	NPC busin	, please ess.
High school diploma?			No		Yes	
High school name Bushwick F	1. S.			· · · · · · · · · · · · · · · · · · ·		
City Brooklyn	State	N.Y.		Zip	112	221
College name City College of	of N.Y		·			
City New York	State	N.Y.		Zip	100)38
Political Science		Degree awarded	no	<u> </u>		
College name New York City	y Polic			·		-
City New York	State	N.Y.		Zip	100	121
Major Political Science		Degree awarded	yes	— -F	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
26. Computer experience. Does Propose computers? (Incumbent deputy regist nonprofit corporations, this question the nonprofit corporation's activities.)	strars may	y take credit for of	perating BM	fV con operate	nputer ed or	s. For used in

Form 3.1, Personal Questionnaire, Page 4 of 6 (2025)

a Deputy Registrar I work with a do payroll for my business.				
			······································	······································
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daytime business hou political contacts, or	equested information for irs and who will serve as employees of the Depart east one person or that pe	a character ref ment of Public	erence for you. Safety (includ	Do not list relaing BMV). If w
daytime business hou political contacts, or unable to contact at l	employees of the Depart east one person or that peravorably. Nonprofit corp	a character ref ment of Public rson is unable	erence for you. Safety (includition to serve as a chief.)	Do not list relating BMV). If what was a section of the section of
daytime business hou political contacts, or unable to contact at l may be evaluated uni	employees of the Depart east one person or that peravorably. Nonprofit corp	a character ref ment of Public rson is unable	erence for you. Safety (includition to serve as a chief.)	Do not list relating BMV). If what was a section of the section of
daytime business hou political contacts, or unable to contact at l may be evaluated uni	employees of the Depart east one person or that peravorably. Nonprofit corp	a character ref ment of Public rson is unable	erence for you. Safety (includition to serve as a chief.)	Do not list relating BMV). If what was a section of the section of
daytime business hou political contacts, or unable to contact at l may be evaluated uni	employees of the Depart east one person or that peravorably. Nonprofit corp	a character ref ment of Public rson is unable	erence for you. Safety (includition to serve as a chief.)	Do not list relating BMV). If what was a section of the section of
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daytime business hou political contacts, or unable to contact at l may be evaluated uni	employees of the Depart east one person or that peravorably. Nonprofit corp	a character ref ment of Public rson is unable	erence for you. Safety (includition to serve as a chief.)	Do not list relating BMV). If what was a section of the section of
daytime business hou political contacts, or unable to contact at l may be evaluated uni	employees of the Depart east one person or that peravorably. Nonprofit corp	a character ref ment of Public rson is unable	erence for you. Safety (includition to serve as a chief.)	Do not list relating BMV). If what was a section of the section of
daytime business hou political contacts, or unable to contact at l may be evaluated uni	employees of the Depart east one person or that peravorably. Nonprofit corp	a character ref ment of Public rson is unable	erence for you. Safety (includition to serve as a chief.)	Do not list relating BMV). If what was a section of the section of
daytime business hou political contacts, or unable to contact at l may be evaluated uni	employees of the Depart east one person or that peravorably. Nonprofit corp	a character ref ment of Public rson is unable	erence for you. Safety (includition to serve as a chief.)	Do not list relating BMV). If what was a section of the section of
daytime business hou political contacts, or unable to contact at l may be evaluated uni	employees of the Depart east one person or that peravorably. Nonprofit corp	a character ref ment of Public rson is unable	erence for you. Safety (includition to serve as a chief.)	Do not list relating BMV). If what was a section of the section of
daytime business hou political contacts, or unable to contact at l may be evaluated uni	employees of the Depart east one person or that peravorably. Nonprofit corp	a character ref ment of Public rson is unable	erence for you. Safety (includition to serve as a chief.)	Do not list relating BMV). If what was a section of the section of
daytime business hou political contacts, or unable to contact at l may be evaluated uni	employees of the Depart east one person or that peravorably. Nonprofit corp	a character ref ment of Public rson is unable	erence for you. Safety (includition to serve as a chief.)	Do not list relating BMV). If what was a section of the section of
daytime business hou political contacts, or unable to contact at l may be evaluated uni	employees of the Depart east one person or that peravorably. Nonprofit corp	a character ref ment of Public rson is unable	erence for you. Safety (includition to serve as a chief.)	Do not list relating BMV). If what was a section of the section of
daytime business hou political contacts, or unable to contact at l may be evaluated uni	employees of the Depart east one person or that peravorably. Nonprofit corp	a character ref ment of Public rson is unable	erence for you. Safety (includition to serve as a chief.)	Do not list relating BMV). If what was a section of the section of
daytime business hou political contacts, or unable to contact at l may be evaluated uni	employees of the Depart east one person or that peravorably. Nonprofit corp	a character ref ment of Public rson is unable	erence for you. Safety (includition to serve as a chief.)	Do not list relating BMV). If what was a section of the section of
daytime business hou political contacts, or unable to contact at l may be evaluated uni	employees of the Depart east one person or that peravorably. Nonprofit corp	a character ref ment of Public rson is unable	erence for you. Safety (includition to serve as a chief.)	Do not list relating BMV). If what was a section of the section of

Form 3.1, Personal Questionnaire, Page 5 of 6 (2025)

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 3.1, Personal Questionnaire, Page 6 of 6 (2025)

FORM 3.2(A) BUSINESS OWNERSHIP EXPERIENCE FORM 3.2(B) MANAGEMENT AND/OR SUPERVISORY EXPERIENCE FORM 3.2(C) EMPLOYEE EXPERIENCE

Instructions

It is important that you supply complete and accurate information about all relevant business ownership, management, supervisory, and employment experience so that the BMV will be able to verify that experience from independent sources. Generally, proposers receive the most consideration for service as a deputy registrar, second most consideration for service as a business owner, third most consideration for service as a manager or supervisor, fourth most consideration as a deputy registrar employee without management experience, and least consideration for other employment experience without any supervisory or management experience. Be sure to include as much detailed experience possible within the submitted professional resume.

Nonprofit corporations must report only the businesses and activities conducted by the nonprofit corporation itself on Form 3.2(A) Business Ownership Experience. If the nonprofit corporation has operated a deputy registrar agency, that information should be entered and submitted on one Form 3.2(A) Business Ownership Experience. Any other business activities (fundraising, charitable activities, etc.) should also be entered and submitted on a separate 3.2(A) Business Ownership Experience. Use a separate Form 3.2 for each separate business activity performed by the NPC and a separate Form 3.2(A) for each separate business activity performed by the NPC.

Form 3.2(A) Business Ownership Experience. Deputy registrars, nonprofit corporations, county auditors, clerks of courts, and individuals should use this form to report on businesses actually owned and operated by them.

Form 3.2(B) Management and/or Supervisory Experience. Individuals, county auditors, and clerks of courts should use this form to report management and supervisory experience performed by them. Service as a county auditor or clerk of court qualifies as management and supervisory experience.

Form 3.2(C) Employee Experience. Individuals, county auditors, and clerks of courts should use this form to report all other employment that did not include management or supervisory authority.

Form 3.2, Business and Employment Experience, Page 1 of 4 (2025)

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	Leonardo A. Arguet	a	Company nar	me East Broa	d st.License A	gency
Company address	3481 E Broad st		City	, Columbus	5	
State OH	Zip	43213	Telephone (614	237-8247	
Type of business (deputy registrar, retail	grocery, etc.)	Deputy Regist	tar		
Company's produc	cts and/or services_sal	es of Driver I	icense and veh	nicle registra	tion	
BUSINESS OWN	ER - Form of ownersh	ip (sole propr	ietor, partner, etc	.): sole prop	rietor	
1. Federal Tax	ID Number:			··		
2. Percentage	of business you owned	. 100	_% Ho	ours worked v	veekly	40
3. Dates you o	perated this business: l	From: month				r 2025
4. Is/was this b	ousiness profitable?			No	Yes_	
5. Is/was this b	ousiness your primary s	source of incom	me and support?	No	Yes_	
6. Do/did you	directly hire, evaluate,	train, and disc	cipline employees	s? No	Yes	
7. Do/did you	directly manage emplo	yees on a dail	y basis?	No	Yes_	
If you answ	ered yes to question nu	ımber 6, how	many employees	do/did you m	anage?	8
8. Have you ev	ver developed a compre	ehensive busir	ess plan?	No	Yes_	✓
least one person to	erson, not a relative of o verify this experience registrar employee, you	e, you will no	ot receive any cr	edit for it. (If you are a	deputy
Vama	7 124				TX EXI	
)	

Form 3.2(A), Business Ownership Experience, Page 2 of 4 (2025)

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.

Leonardo A. Argueta

Proposer's name

Company name N.Y.C. Police Department

Company address _	i Police Plaza		City New York					
State NY	Zip	10038	Telephone	(646)	610-7622			
Type of business (d	leputy registrar, reta	il grocery, etc.)	Police Offic	cer				
EMPLOYEE - Job	title: Police Office	er						
Hours worked weel	kly45	Job duties _	enforce laws	of NYC and	state. protect			
and serve the co	mmunity of NYC							
Describe how and t	yment: From: monto o what extent you p nd traffic laws. pro	rovided high q	uality custor	ner service at				
visitors of NYC.	ender aid to accid	ent victims an	d other pers	ons in need.				
protect and serve	e the community a	nd visitors of I	VYC					
least one person to		nce, you will n	ot receive any	y credit for it.	If we cannot contact at . (If you are a deputy t experience.)			
Name	City		State	Zin	Daytime Phone			
		. T						
					<u> </u>			

Form 3.2(C), Employee Experience, Page 4 of 4 (2025)

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):

train employees to be able to be able to process all transaction done in our office to better serve our customer trained the employees to be aware of any customers that are elderly and/or physically challenge and try to assist them as quick as possible to reduce their wait time in our office.

would try to hire a least 1 Bilingual employee to serve our non-English speaking customers.

I am Bilingual, I fluently speak, write Spanish. I have trained employees to call me if they have a need to help translating or communicating with Spanish speaking customers. so that we can better serve these customers.

I would continue to have a renewal registration line, to expedite customers that just need to renew vehicle registration.

Form 3.3, Customer Service Experience (2025)

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.

County Auditors and Clerks of Court are exempt 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:	Leonardo A. Argueta
Title (if o	officer of nonprofit corporation):

(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 "✓" in the appropriate box, "yes" or "no" for each category and year separately.

RECIPIENT	JAN 1 - DEC 31 2022		JAN 1 - DEC 31 2023		JAN 1 - DEC 31 2024		2025 To Date	
	Yes	No	Yes	No	Yes	No	Yes	No
Democratic Party including PACs and Associations		✓		V		~		~
Republican Party including PACs and Associations		V		~		•		~
Any other Party including PACs and Associations				•				•
Governor, Candidate and Committee		✓		✓		✓		V
Attorney General, Candidate and Committee		✓		~		•		✓
Secretary of State, Candidate and Committee		✓		✓		~		✓
Treasurer of State, Candidate and Committee	**************************************	✓		~		~		✓
Auditor of State, Candidate and Committee		/		~		~		✓
State Senator, Candidate and Committee		√		~		~		/
State Representative, Candidate and Committee		/		✓		✓		~

Form 3.5, Political Contributions Report (2025)

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

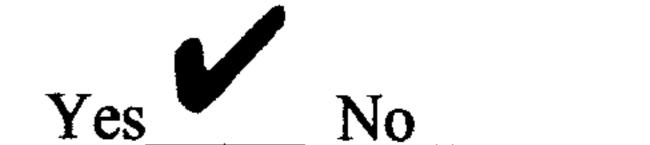
COMPREHENSIVE PERSONNEL POLICY MUST INCLUDE PROVISIONS FOR:

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?



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.

through your lease or sublease, or by separate contract:	No	Yes
OUTDOOR BUILDING MAINTENANCE		
KEEP OUTDOOR AREA FREE OF TRASH AND DEBRIS		
PROVISION TO ASSURE PROMP SNOW AND ICE REMOVA	AL	
CLEANING INSIDE OF AGENCY INCLUDING EQUIPMENT		
PROVISION FOR INSIDE/OUTSIDE MAINTENANCE		**
PROVISION FOR PROFESSIONAL CARPET/FLOOR CLEAN	NING (MIN. OF (DNCE A YEAR
PROVISION FOR REPAINTING AND/OR COSMETIC UPDA	····	

Form 3.8, Facility Maintenance Plan Summary (2025)

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.

1100	ded 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 a knowledgeable Manager that has over 10 years experience. office has currently 13 cameras where I can look at office in real time, office has alarm system in place with company monitoring.
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?
	Me and/or my manager would check applications to ensure proper procedure are being followed in the issuance of Drivers License and Vehicle registration. ensure employees are knowledgeable on Policy and procedure of the BMV. hold regular office meetings so that employees are up to date with current changes within the BMV. go over broadcast and email with employees to ensure they are up to date with changes. encourage employees to read the manual during down time. quiz employees on policy and procedure of the BMV, to ensure they are following procedure of BMV.
3.	What measures will you put in place to detect, deter, and prevent fraud?
	1) do cash audits on employee cash draw to ensure cash draw are correct. 2) carefully look over transaction that are voided to ensure that there was a legitimate reason for void. 3) Randomly ask customers if they received a receipt for their transaction. 4) ensure that employees attend all fraud training sessions.
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 procedure are communicated to the staff and followed on a daily basis?
	make sure that broadcast and email are read and have employees initial broadcast and email. ensure employees understand the changes and procedure outlined in the broadcast and email.
	have regular office meeting to ensure proper procedure are followed.
	check applications to ensure proper procedures are being followed.

Form 3.9, Involved and Invested in Your Business, Page 1 of 3 (2025)

5.	How will you demonstrate good leadership to your employees?
	lead by example, being accountable and responsible and expect staff to do the same. being professional, courteous and sincere in dealing with staff and customers show staff they are appreciated and valued. being confident in what we do in our office make myself available to staff and customers. continue attending BMV training to stay up to date with changes.
6.	How will you maintain a high level of professionalism each day in this business?
	Promote the BMV values and brand with the highest ethical standard. Stress the importance of grea
	customer service. communicate to staff the importance of treating customers the way they would like to be treated. insure staff adhere to dress code as establish in our manual.
~7	
/.	How do you intend to recruit and retain high quality employees? 1) offer competitive wages
	2) offer incentives to keep employees motivated 3) treat employees with dignity and respect 4) create a friendly, safe environment
8.	How will you provide a safe, clean and friendly place to do business?
	 have surveillance cameras in place to make customers and staff feel safe and secure have alarm system with motion detection buttons and panic alarm buttons ensure facility is cleaned every night by private contractor or employees ensure employees are greetings customers in a friendly manner remind employees that our most precious asset is the customer
€.	How would you deal with an irate customer?
	listen to the point of view of the customer, select some part of the customer point of view you can agree on. show real genuine concern about the customer point of view, if unable to resolve the issue give customer as much information as possible to try to resolve the issue always believing a resolution is possible. remain professional, do not take it personal offer an apology.
	Form 3.0 Involved and Invested in Vour Dusiness Dece 2 of 2 (2025)

Form 3.9, Involved and Invested in Your Business, Page 2 of 3 (2025)

0. What training or advice do you, or will you, give to your employees for dealing with irate customer
allow the customer speak, listen to the customer, do not take it personal. always believe a resoluti is possible. try give customer as much information to try to resolve their concern.
1. How will you meet the expectations of the Bureau of Motor Vehicles?
stress the importance of treating every customer with courtesy, respect, dignity and fairness have regular meeting and stressing the importance of great customer service. emphasize the importance of confidentially, trust, honesty, and respect in all our interaction with customers, employees, and BMV staff.
2. Why should the Bureau of Motor Vehicles consider you for a deputy registrar license agency contra
I have been a Deputy Registrar for over 22 years, I have the knowledge and experience that the BMV is looking for in the position of Deputy Registrar. I am very Knowledgeable in the procedure of the BMV and the Real ID. I am Bilingual, I speak, read and write Spanish fluently.
In my 22 plus years as a Deputy Registrar I have attended all BMV training sessions and meeting. I have been a Deputy Registrar in two Different Location (Fairborn, East Broad ST.) both of these agencies were not performing up to the BMV standard when I took over. There were many challenges and obstacles that had to be overcome. With the help of the BMV
district personnel and my staff working together we have certainly overcome every obstacle that presented itself that had hinder these offices from reaching their full potential. I think there are new challenges we face Like real id and a diverse community, If selected to continue in my current position, my staff and I will continue to strive to be successful in providing the kind of service that would meet
and exceeds the expectation of the Bureau of Motor Vehicle, and we will continue to provide great customer service to the citizens of Ohio.

Form 3.9, Involved and Invested in Your Business, Page 3 of 3 (2025)

3.10(A) AFFIDAVIT OF INDIVIDUAL

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

Co	unty of FRANKLIN :
	te of Ohio : LEONARDO A. ARGUETA , being first duly sworn, depose and say that:
1)	I am submitting my proposal for appointment as deputy registrar in my own individual capacity, and not as an agent, representative, partner, or business associate of any kind whatsoever of any other person or persons;
2)	If appointed, I will serve as a deputy registrar in my own individual capacity, and will not act as an agent, representative, partner, or business associate of any kind whatsoever of any other person or persons;
3)	If appointed as deputy registrar, I will not assign my deputy registrar contract, in whole or in part, nor any of my deputy registrar's responsibilities to any other person or persons without 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;
	To the best of my knowledge and belief, I am fully qualified to serve as a deputy registrar, and there is no provision of the Ohio Revised Code or the Ohio Administrative Code which 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.
Sig	nature of proposer:
Pri	nted/typed name of proposer: LEONARDO A. ARGUETA
Sw	orn to and subscribed in my presence by the above named Léo Navdo A. All Guerit
on 1	
1	suremetet
Not	ary Public
Prin	ited name of Notary Public: DEbra RENSEE Mitchell
My	commission expires:
	Form 3.10(A), Affidavit of Individual (2025) Notary Public State of Ohio My Comm. Expires October 13, 2029

DEPUTY REGISTRAR REQUEST FOR PROPOSALS

SECTION 4

(2025)

OPERATIONAL FORMS

4.0 OPERATIONAL CHECKLIST

Proposer's Full Legal	LEONARDO A. ARGUETA lame	 -
25 Location Number	K	
Proposer Number (<i>BM</i>	V 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	N. T.	BMV
4.0	Operational Checklist (this form)		
4.1	Appointment of Agency Managers		
4.2	Experienced Employees Summary		
4.3	Staffing and Personnel Costs Calculation		
4.4	Start-Up Costs Calculation Amount: \$		
4.5	Deputy Registrar Contract (2 pages only)		

Form 4.0, Operational Checklist (2025)

4.1 APPOINTMENT OF AGENCY MANAGERS

Prop	LEONARDO A. ARGUETA oser's name:	Location number:	25-K
(A)	DEPUTY REGISTRAR: As deputy registrar, I agree to work hours per week during the hours the agency is open to the pentire term of the contract. I understand that the minimum is twenty (20) hours per week during the hours the agency is twenty-hour requirement does not apply to County Aud nonprofit corps., or deputy registrars operating multiple local	requirement for deputy s open for business. The itors/Clerks of Courts.	ughout the registrars
(B)	OFFICE MANAGER: I understand and agree that I must another reliable person to serve as the office manager for manager must be scheduled to work at the agency at least during the hours the agency is open to the public for busines. Appoint myself as the office manager and work a during the hours the agency is open to the public for Appoint another reliable person to serve as the offic six hours per week during the hours the agency is open.	the agency, and that the thirty-six (36) hours pass. It is my intention to the least thirty-six hours business.	he office er week : per week
(C)	ASSISTANT OFFICE MANAGER: I understand and agreers person to be responsible for the management of the agency agency office manager during the hours the agency is open to	in the absence of mys	elf and the
(D)	OTHER EMPLOYEES: I agree to maintain an accurate manager, assistant office manager, and all other employees as my own work schedule, on file and available for inspettimes. I also agree to notify the BMV in writing immappointment of the office manager or assistant office manager complete and current.	and their work schedulection by BMV employediately of any change	es, as well yees at all ges in the
Den	outy registrar (proposer) signature	01/24/2025 Date:	

Form 4.1, Appointment of Agency Managers (2025)

4.2 EXPERIENCED EMPLOYEES SUMMARY

Prop	oser's nar	LEONARDO A.ARGUETA ne:	Location number:	25-K
(A)	registrar effort to deputy r	EXPERIENCED EMPLOYEES. I certify that if under contract with the Registrar of Motor Vehicles hire and retain qualified employees who have release egistrar agency. I agree to make bona fide offers and under comparable conditions to their most recent ce.	s, I will make every evant experience we of employment at o	good faith orking in a comparable
(B)	<u>CHECK</u>	WHICHEVER APPLIES:		
		I HAVE NOT BEEN A DEPUTY REGISTRAR EMPLOYEE. I have not yet identified any prosent relevant deputy registrar experience. However, if an every reasonable effort to identify and hire, if possibate relevant experience working in a deputy registrar employees until after contract. I AM OR HAVE BEEN A DEPUTY REGISTRAL EMPLOYEE. I have identified the following personal fide offer of employment at comparable wages and to their present employment. (A deputy registrar or registrar employment experience may list himself or	pective employees warded a contract, I ible, qualified employers agency. Pleaser you have been a set o whom I will make the comparable or a proposer who	who have will make oyees who see do not awarded a GISTRAR ake a bona conditions
(C)		tand that failure to hire properly qualified and es is grounds to withhold or terminate my deputy reg		y registrar
		Lygalar Dat	01/24/2025 e:	
Depu	ty registra	ar (proposer) signature		

Form 4.2, Experienced Employees Summary (2025)

4.3 STAFFING AND PERSONNEL CALCULATION

Proposer's name:	LEONARDO A. ARGUETA	Location number:	25-K
•			

<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 \$394,000 per year and \$10.70 per hour by businesses with gross receipts of \$394,000 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 HOURIA RATE	PROJECTED WEEKLY PAY	PROJECTED MONTHA PAY (weekly x 4)
Deputy Registrar	24.00	N/A	N/A	N/A
Office Manager (leave blank if the Deputy Registrar is also the Office Manager)	40.00	\$ 18.00	\$ 720.00	\$ 2,880.00
Assistant Office Manager	40.00	\$ 16.50	\$ 660.00	\$ 2,640.00
Experienced Employees Total Number (combine Full-time & Part-time) = 4	160.00	\$ 14.00	\$ 2,240.00	\$ 8,960.00
New Hire Employees Total Number (combine Full-time & Part-time) =				
TOTALS	264.00	N/A	\$ 3,620.00	\$ 14,480.00

Form 4.3, Staffing and Personnel Calculation (2025)

4.4 START-UP COSTS CALCULATION

Propos	ser's n	ame:	LEONAROD A. ARGUE	TA Location	25-K number:	
costs	of beg	inning	is form is to assure the BMV a deputy registrar business. to cover your personnel, site	We need to know	that you have eno	
1.	PEI	RSON	INEL COSTS (FOUR V	VEEKS)		
	Use	Form 4	4.3 to calculate four (4) week	s' personnel costs fo	r this location. 14.480.00	
2.	SIT	E PR	EPARATION COSTS	(AMORTIZED)		
	A.	costs	is is a Deputy Provided Site you will need to spend to rar agency in each of the follower.	prepare the buildin	1 V	
		1.	Building Modifications	\$		
		2.	Counter Costs	\$		
		3.	Other Costs	\$		
		4.	Total	\$		
			amortized over 60 month code line 4 by 60)	ontract period =	\$ 0	
	B.	Agen	is is a BMV Controlled Sincy Specifications for this lother the Agency Specifications.			
3.	AG	ENC	Y RENTAL PAYMEN	rs (3 months)		
	A.		s is a Deputy Provided Site or lease this site.	e, enter the actual ar	nount you will pay	y to
	В		is is a BMV Controlled Si cy Specifications for this site	e. Do not change th		the
		One r	month's rent: \$\frac{312}{}	$\frac{0.20}{x^3} =$	\$ 9360.6	جينين المارات ال
TOT			T-UP COSTS	41 4		
	site	prepar	s' personnel costs, plus one ration costs (2.A total amound). Site amount), plus three mon	int or 2.B BMV	\$ 23,840.60	

STATE OF OHIO

DEPARTMENT OF PUBLIC SAFETY

BUREAU OF MOTOR VEHICLES

DEPUTY REGISTRAR CONTRACT - 2025

This Agreement is made by and be	etween the Regi	strar of M	lotor Vehicles, (Registrar,
herein), located at 1970 West B LEONARDO A. ARGUETA	road Street, C	•	Ohio 43223-1102 and y registrar, herein) whose
home mailing address is			
(City)	, Ohio (Zip)	45503	, to operate a deputy
registrar agency, Location No. 25-K		, to be	located as follows: in the
State of Ohio, County of FRANKL	_IN		
City/Village/Township (indicate whic	h) CITY	of	WHITEHALL
Street address: 3481 E. BROAD ST			
(City) COLUMBUS	, Ohio (Z	(ip) 4321	3

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:

- 1. The Registrar hereby appoints the above named person as a deputy registrar subject to the 2025 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 2025 Deputy Registrar Contract Terms and Conditions incorporated herein by reference;
- 3. The term of this appointment and contract shall begin on the 29th day of June, 2025, and shall end on the 29th day of June, 2030, unless otherwise terminated as provided herein;

Form 4.5, Deputy Registrar Contract (2025)

4. The deputy registrar is "an individual," "Cou county)," or "a nonpro AN INDIVIDUAL	inty Auditor for (spe	s appointment in tecify county)," "(the capacity of [state who Clerk of Courts for (sp	ecify
5. The Deputy Registra to all of the 2025 Dep			rstands, and hereby agreed itions incorporated herein	
19 Duel	a	01/24/2025	;)	
Deputy Registrar signature		Date		
STATE OF OHIO	•			
COUNTY OF COLUMBI	JS :			
Before me, a notary public LEONARDO A. AF	in and for said county RGUETA	-	ally appeared the above edged that he or she did	
sign the foregoing instrume	ent and that the same is	s his or her free ac	ct and deed.	
IN WITNESS WHEREOF JANUARY OF NOTARY PUBLIC	I have hereunto set my		l seal, this day DEBRA RENEE MITCHELL Notary Public State of Ohio My Comm. Expires October 13, 2029	
Printed name of Notary Pul	blic: De by Re	WEE Mike	Le de la companya della companya del	
My commission Expires:) (A) 3-02-	9		
STATE OF OHIO DEPARTMENT OF PUBL BUREAU OF MOTOR VE				
BY: REGISTRAR OF M	OTOR VEHICLES			
Done at Columbus,	Ohio, on			

Form 4.5, Deputy Registrar Contract (2025)

DEPUTY REGISTRAR REQUEST FOR PROPOSALS

SECTION 5

(2025)

DEPUTY PROVIDED SITES

5.0 DEPUTY PROVIDED SITE CHECKLIST

I EANADDA ADGITTA

Proposer's Full Legal Name	LECIMANDO A. ANGOLIA	<u> </u>
Location Number 25-K		
	81 E. BROAD ST.	
—— ——————————————————————————————————	er (number where BMV staff can reach you) (937)	605-5209
Proposal Number (<i>BMV use</i>		

INSTRUCTIONS: You must submit one original of this form and all documents listed on this form FOR EACH LOCATION YOU ARE PROPOSING. If you fail to submit a complete set of originals FOR EACH LOCATION, you will not be evaluated for those locations.

ATTENTION: Proposers applying for contracts at existing license agency locations designated as Deputy Provided Sites are not required to complete and submit all Section 5 forms if the site was approved under a previous RFP and if there have been no changes to the site since the last contract was approved and signed. Under this license agency site provision, form 5.0, page one (1) of form 5.1, and form 5.3 must be completed and submitted with all other required forms and documents.

FORM	DESCRIPTION		BMV
5.0	Deputy Provided Site Checklist (this form)	'	
5.1	Site Questionnaire (page 1 only if proposing existing license agency site)		
5.2	ADA Checklist (leave blank if proposing existing license agency site)		
5.3	Lease Option (required for all proposers, which includes incumbent deputy registrars)		
	- filled out, including complete address		
	- signed and notarized		
5.4	Proximity Attachment [for "Proximity" sites only] (leave blank if proposing existing license agency site)		
Proposer provided	Site Plan (leave blank if proposing existing license agency site)		
	 with 8½ x 11-inch formatting (SUBMITTED ELECTRONICALLY) with complete dimensions 		
Proposer provided	Counter Plan (leave blank if proposing existing license agency site) - with 8½ x 11-inch formatting (SUBMITTED ELECTRONICALLY) - with complete dimensions		
Proposer provided	Map (leave blank if proposing existing license agency site)		
	- with site clearly marked		

Form 5.0, Deputy Provided Site Checklist (2025)

5.1 SITE QUESTIONNAIRE

1.	Loc	ation Number for which you are proposing (from Agency Specif	fications): 25	-K	······································
	Stre	et address of site 3481 E. Broad St.			
	City	Columbus	Ohio, Zip Code	4321	3
2.	Is th	ne site you are proposing currently in operation as a deputy regis	trar agency?		
			No	Yes	
3.		you intend to perform construction or remodeling to prepare this	s site for operati	on under	a new
	aep	uty registrar contract?	No _	Yes	
4.		you applying for a contract at an existing license agency site the approved under a previous contract?	at		
			No	Yes	
5.	A.	If you answered "No" to question number 4, skip to question number formation required for this form (5.1) and the remainder of Second S		-	
	В.	If you answered "Yes" to question number 4, have there been a (interior and/or exterior to include parking areas, path of travel,	•		iduals
		with disabilities, and signage)?	No	Yes	
6.	A.	If you answered "No" to question number 5, please print and sometimes of some state of the section of your required proposal documents.			rm 5.3
	B .	If you answered "Yes" to question number 5, list the site chang specific with the description(s) of any changes that have been no supporting documentation and attachments if needed, then stop along with any other documentation and attachments for complete requirements for this RFP and include it with all other required	nade. Include add here. Print and s iance with Section	ditional ubmit this on 5	

5.3 LEASE OPTION BROADMOOR CENTER LLC

of (owners' complete addre	ss) 3455 E BROAD ST	
City COLUMBUS	, State OHIO	, Zip 43213
HEREBY GRANT, upon d	lue consideration, receipt of which is he	reby acknowledged, this OPTION
TO LEASE the following FRANKLIN	the state of the s	the State of Ohio, County of city, village or township)
CITY	of COLUMBUS	and commonly known as:
(property's address) 347	9-3481 E BROAD ST	
Suite	City COLUMBUS	, Ohio, Zip 43213
	ONARDO ARGUETA	
of (proposer's address)		
City		, Ohio, Zip 45503
for the operation of a de	eputy registrar agency under contract	with the Ohio Bureau of Motor

2. THE TERM OF THE LEASE, if executed, shall begin no later than the 29th day of June, 2025 and shall not terminate before the 29th of June, 2030.

3. THE TERM OF THIS LEASE OPTION shall begin on the date of its execution (signing) below and shall be held open until the 31^{st} day of May, 2025.

4. THE PARTIES AGREE AS FOLLOWS:

- A. The owners may, in their sole discretion, grant a similar lease option to operate a deputy registrar agency for the stated period of time to more than one proposer, provided that the premises are not subject to an existing lease for any portion of the term of lease as specified in paragraph 2, above.
- B. If the owners have granted or hereafter grant an option to the same described real estate to another person or entity for the operation of a deputy registrar agency it is understood and agreed by owners and proposer that only the option granted to the person or entity awarded a contract by the Ohio Bureau of Motor Vehicles shall be entitled to exercise the relevant option.

Form 5.3, Lease Option, Page 1 of 2 (2025)

D. The lease under this option shall be on any terms as owners and optionee agree to contemporaneously with the granting of this option, provided that no such term shall be inconsistent with this lease option. Said terms, if any, are incorporated herein.	:C
Owner(s)' signature(s):	
Owner(s)' printed name(s): Morle ESNer	
STATE OF OHIO :	
COUNTY OF FRANKLIN:	
The foregoing instrument was acknowledged before me on this 28 th day o January, 2025, by the owners, Mark Ebner) Í
Mity Manus	
Notary Public Printed name of Notary Public: Mitchell Massaro	
My commission expires on <u>January 5th 2030</u>	
I hereby accept this option.	•
STATE OF OHIO	1:55 /
1: 28. MAG	

C. Except as provided in paragraphs 4(A) and (B), above, the owners shall not grant an option,

paragraph 3, above.

Date

lease, or rental agreement to any other person during the term of this lease option specified in

Form 5.3, Lease Option, Page 2 of 2 (2025)

Optionee signature, Deputy Registrar Proposer