



The Purchasing Memo

**Date:** December 17, 2025

**To:** Governing Body, Finance Committee, and Public Works & Utilities Committee

**From:** Erin Gomez, Contract Administrator

**Via:** Eric Candelaria, ITT Department Director

**Subject:** Kronos ERP

**Vendor Name:** UKG Kronos Systems, LLC

**Munis Vendor Number:** 10540

**ITEM AND ISSUE:**

Request for Approval of Additional Telestaff Cloud Storage with UKG Kronos Systems LLC in the Total Amount of \$257,267.90 Including NMGRY for the First Year of the Four-Year Term through July 13<sup>th</sup>, 2029. (Eric Candelaria, ITT Department Director; edcandelaria@santafenm.gov)

**CONTRACT NUMBER:**

The FY26 Munis contract number is 3260163.

**BACKGROUND AND SUMMARY:**

The City of Santa Fe has historically procured UKG Kronos Systems LLC services indirectly through their partner company, Immix Group. The City now seeks to establish a direct Sole Source procurement relationship with UKG Kronos Systems LLC. As an industry leader in human resources, payroll, and workforce management solutions, UKG will provide comprehensive services to all City departments, streamlining operations and enhancing administrative efficiency across municipal functions.

**PRIOR APPROVALS AND SUPPORTING INFORMATION:**

**FUNDING SOURCE:**

**Fund Name/Number:** ITT ERP/325

**Munis Org Name/Number:** ITT ERP/3253950

**Munis Object Name/Number:** Other Consulting/510340

**Budget Officer / Designee:** Andy Hopkins **Date:** 01/21/2026

**Budget Officer Comment/Exceptions:** \_\_\_\_\_

**PROCUREMENT METHOD:**

The procurement method used was NMSA 1978, Section 13-1-126, ~~Sole Source~~ CoOp

Chief Procurement Officer (CPO) / Designee: JoAnn Lovato Montaña Date: 01/21/2026

CPO Comment/Exceptions: 13-1-135 Cooperative Procurement - NOT 13-1-126 Sole Source.

**ASSOCIATED APPROVALS:**

IT Components included?  Yes |  No

Approval:  Title: ITT Department Director Date: 12/18/2025  
Eric Candelaria (Dec 18, 2025 08:38:06 MST)

Comment/Exceptions: \_\_\_\_\_

Vehicles included?  Yes |  No

Approval: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Comment/Exceptions: \_\_\_\_\_

Construction to City Facilities, Furniture, and/or Fixtures included?  Yes |  No

Approval: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Comment/Exceptions: \_\_\_\_\_

Is this an externally funded purchase?  Yes |  No

If yes, what is the issuing agency: \_\_\_\_\_

Approval: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Comment/Exceptions: \_\_\_\_\_

Is this a Capital Asset or Project?  Yes |  No

Project Ledger Number: \_\_\_\_\_

Approval: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Comment/Exceptions: \_\_\_\_\_

**ATTACHMENTS:**

Linking Agreement to Omnia No. 24-6833

Omnia No. 24-6833 Executive Summary

Quote #323128

COI

W9

Item #: \_\_\_\_\_  
Munis Contract #: 3260163  
Original Contract Item #: 25-0454  
Omnia Master Agreement #: 24-6833

**AMENDMENT No. 1 TO  
LINKING AGREEMENT  
THE OMNIA MASTER AGREEMENT No. 24-6833  
BETWEEN  
CITY OF SANTA FE, NEW MEXICO  
AND  
UKG KRONOS SYSTEMS, LLC**

This AMENDMENT No. 1 (the "Amendment") amends the LINKING AGREEMENT for the Omnia Master Agreement No. 24-6833 between the City of Santa Fe, New Mexico and UKG Kronos Systems, LLC ("Contract"), dated September 29, 2025 (the "Agreement"), between the City of Santa Fe (the "City") and UKG Kronos Systems, LLC. (the "Contractor"). The date of this Amendment shall be the date when it is executed by the City and the Contractor, whichever occurs last.

**RECITALS:**

- A. Under the terms of the Contract, Contractor has agreed to provide comprehensive services to all City departments, streamlining operations and enhancing administrative efficiency across municipal functions.
- B. Pursuant to Article XII, subsection H, of the Contract, and for good and valuable consideration, the receipt and sufficiency of which are acknowledged by the parties, the City and the Contractor agree as follows:

1. SCOPE:

In the September 29, 2025, Linking Agreement, the Renewal Order Form dated 31 Jul 2025, SaaS section, shall be amended to incorporate additional Telestaff cloud storage capacity.

2. COMPENSATION:

Section II of the Linking Agreement is amended to increase the amount of compensation by a total of \$46,114.80 so that Section II reads in its entirety as follows:

The Customer shall pay to UKG in full payment for Services delivered as set forth in this Order and in accordance with the terms of the OMINA Master Agreement. The total amount payable to UKG under this Order for the first year, including gross receipt tax and expenses, not to exceed two hundred fifty-seven thousand, two hundred sixty-seven dollars and ninety cents. (\$257,267.90). This amount is a maximum for the first year and not guarantee that the work assigned to performed by UKG under this Agreement shall equal the amount stated herein. The Customer shall remit payment in full to UKG on an annual basis in accordance with Order.

3. CONTRACT IN FULL FORCE.

Except as specifically provided in this Amendment, the Contract and Linking Agreement remain and shall remain in full force and effect, in accordance with its terms.

[REMAINDER OF PAGE INTENTIONALLY LEFT BLANK]  
[SIGNATURE PAGE TO FOLLOW]

IN WITNESS WHEREOF, the parties have executed this Amendment No. 1 to the Linking Agreement as of the dates set forth below.

CITY OF SANTA FE:

CONTRACTOR:

*Fabrice Pajot*

Fabrice Pajot (Dec 16, 2025 16:29:27 EST)

FABRICE PAJOT  
SR. MANAGER ORDER PROCESSING

\_\_\_\_\_  
MAYOR

ATTEST:

\_\_\_\_\_  
CITY CLERK

CITY ATTORNEY'S OFFICE:

*Frank Ruybalid*

FRANK RUYBALID, ASSISTANT CITY ATTORNEY

APPROVED FOR FINANCES:

01/21/2026

*BRIAN MOYA*

FINANCE DIRECTOR

## The Purchasing Memo

**Date:** September 2, 2025

**To:** Governing Body, Finance Committee, and Public Works & Utilities Committee

**From:** Joshua Chandler, Contract Administrator

**Via:** Eric Candelaria, ITT Department Director <sup>EC</sup>/<sub>EC</sub>

**Subject:** Kronos ERP

**Vendor Name:** UKG Kronos Systems, LLC

**Munis Vendor Number:** 10540

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### ITEM AND ISSUE:

Request for Approval of Citywide Timekeeping and Workforce Management with UKG Kronos Systems LLC in the Total Amount of \$211,153.10 Including NMGRT for the First Year of the Four-Year Term through July 13<sup>th</sup>, 2029. (Eric Candelaria, ITT Department Director; edcandelaria@santafenm.gov)

### CONTRACT NUMBER:

The FY26 Munis contract number is 3260163.

### BACKGROUND AND SUMMARY:

The City of Santa Fe has historically procured UKG Kronos Systems LLC services indirectly through their partner company, Immix Group. The City now seeks to establish a direct Sole Source procurement relationship with UKG Kronos Systems LLC. As an industry leader in human resources, payroll, and workforce management solutions, UKG will provide comprehensive services to all City departments, streamlining operations and enhancing administrative efficiency across municipal functions.

### PRIOR APPROVALS AND SUPPORTING INFORMATION:

#### FUNDING SOURCE:

**Fund Name/Number:** ITT ERP/325

**Munis Org Name/Number:** ITT ERP/3253950

**Munis Object Name/Number:** Other Consulting/510340

**Budget Officer / Designee:** Andy Hopkins **Date:** 09/04/2025

**Budget Officer Comment/Exceptions:** \_\_\_\_\_



**ATTACHMENTS:**

Linking Agreement to Omnia No. 24-6833

Omnia No. 24-6833 Executive Summary

Quote #322898

COI

W9

**LINKING AGREEMENT**  
**THE OMNIA MASTER AGREEMENT No. 24-6833**  
**BETWEEN**  
**CITY OF SANTA FE, NEW MEXICO**  
**AND**  
**UKG KRONOS SYSTEMS, LLC**

This Linking Agreement (hereafter the “Linking Agreement”), effective as of the date last signed below (“Effective Date”), to the terms and conditions of the Omnia Master Agreement No. 24-6833 dated July 14, 2025, as amended (the "Omnia Master Agreement"), is entered into by and between UKG Kronos Systems, LLC (hereafter referred to as “UKG”) and the City of Santa Fe, New Mexico (hereafter referred to as "Customer"). In consideration of those mutual undertakings and covenants, the parties agree as follows:

**SECTION I - INTERPRETATION AND INTENT**

All capitalized terms not otherwise defined herein shall have the same meaning as set forth in the Omnia Master Agreement.

The Customer, as an eligible Participating Public Agency, assumes the rights and obligations of the Customer and is subject to the terms and conditions of the Omnia Master Agreement. The terms and conditions of the Omnia Master Agreement, as amended by this Linking Agreement, shall govern when Customer makes purchases of Services under the Omnia Master Agreement. In the event of a conflict between this Linking Agreement and the Omnia Master Agreement, this Linking Agreement shall govern.

The Customer is purchasing and UKG agrees to provide the Services at the price set forth in an applicable Order which is subject to the terms and conditions of the Omnia Master Agreement, as modified by this Linking Agreement.

**SECTION II – COMPENSATION**

The Customer shall pay to UKG in full payment for Services delivered as set forth in this Order and in accordance with the terms of the OMNIA Master Agreement. The total amount payable to UKG under this Order for the first year, including gross receipts tax and expenses, not to exceed two hundred eleven thousand, one hundred fifty-three dollars and ten cents. (\$211,153.10). This amount is a maximum for the first year and not a guarantee that the work assigned to be performed by UKG under this Agreement shall equal the amount stated herein. The Customer shall remit payment in full to UKG on an annual basis in accordance with this Order

**SECTION II - TERM**

The term of this Linking Agreement commences on the Effective Date and shall run co-terminus with the Omnia Master Agreement, unless otherwise terminated in accordance with the Omnia Master Agreement.

## SECTION III – INSURANCE

1. UKG shall procure and maintain, at all times and at its own expense, during the term of the Order entered into between the Customer and UKG, the types of insurance(s) specified below:

**A. Commercial General Liability**

UKG shall provide coverage on a Commercial General Liability Occurrence Coverage Form limits of \$1,000,000.00 each occurrence and \$2,000,000.00 annual aggregate. Limits may be achieved via a combination of primary and umbrella/excess insurance. Customer shall be included as an additional insured via blanket endorsement for General Liability and ongoing operations. Such protection shall be primary and non-contributory with respect to Customer's insurance, but only with respect to UKG's sole negligence. Upon written request, such blanket endorsement shall be provided to Customer.

**B. Workers' Compensation**

UKG shall provide Workers' Compensation Insurance as required by statute.

**C. Umbrella/Excess Liability**

Limits of liability of \$5,000,000 per occurrence.

**D. Automobile Liability**

Limits of liability of at least \$1,000,000 combined single limit, including but not limited to, all owned, hired and non-owned motor vehicles.

**E. Professional Liability/Errors & Omissions/Cyber Risk Liability**

UKG shall maintain coverage on a Professional Liability Form (or equivalent) in the amount of \$5,000,000 per claim with a \$5,000,000 annual aggregate.

**F. All Risk Property Insurance**

UKG shall provide All Risk Property Insurance in an amount not less than the full replacement cost of UKG's property.

**G. Miscellaneous**

UKG shall supply Customer with the above proof of insurance, as required upon the signing of this Agreement. All insurance companies for each of the coverages set forth above must be rated A- or better with a financial rating of VII or better in the most recent A.M. Best's Rating Guide.

## SECTION IV - ADDITIONAL TERMS AND CONDITIONS OF THE CUSTOMER


1. **Records and Audit.** UKG shall maintain, and Customer and its representatives shall have the right to review all invoices associated with any Order incurred for the services under the Agreement, and similar materials relating to work performed for the Customer under this Agreement on file for at least three (3) years following the date of final payment to UKG by Customer. UKG shall maintain all invoices or applicable records for at least three (3) years following the date of final payment to UKG by Customer. Any duly authorized representative(s) of Customer shall have access to such invoices or applicable records upon a 30 day prior request at reasonable times, during usual and customary business hours.


**2. Equal Opportunity Compliance.** UKG maintains its commitment to non-discrimination, providing equal opportunity employment and complying with all such requirements and obligations relating to its employees under Applicable Law. Similarly, UKG adheres to its Code of Conduct, which includes non-discrimination requirements and available on our public website at <https://www.ukg.com/about-us/esg>. If UKG is found not to be in compliance with these requirements during the life of this Agreement, UKG agrees to take appropriate steps to correct these deficiencies.

**3. New Mexico Tort Claims Act.** Any liability incurred by Customer in connection with this Agreement is, to the extent applicable, subject to the immunities and limitations of the New Mexico Tort Claims Act, Section 41-4-1, et. seq. NMSA 1978, as amended.

**4. Governing Law and Venue.** This Agreement is governed by and is to be interpreted solely in accordance with the laws of the State of New Mexico, without regard to any conflict of law provision that would result in the application of a different body of law, and each Party agrees to submit to exclusive venue in a court of competent jurisdiction.

IN WITNESS WHEREOF, the parties hereto have executed this Linking Agreement on the dates subscribed below.

<b>CITY OF SANTA FE, NEW MEXICO</b>
Dated: 09/29/2025
By:  Alan Webber (Sep 29, 2025 16:16:20 MDT)
Name: ALAN WEBBER
Title: MAYOR

<b>UKG KRONOS SYSTEMS, LLC</b>
Dated: 8/28/2025   10:09 AM EDT
By:  Signed by: Fabrice Pajot 7E4599F8AC5945F...
Name: Fabrice Pajot
Title: Sr Mgr. Order Processing

**ATTEST:**

  
ANDREA SALAZAR (Sep 29, 2025 16:18:57 MDT)

ANDREA SALAZAR, CITY CLERK   
GB MTG 09-24-25

**CITY ATTORNEY'S OFFICE:**

  
ASSISTANT CITY ATTORNEY

**APPROVED FOR FINANCES:**

  
EMILY OSTER, FINANCE DIRECTOR



Human Resource Information Systems and Related Products and Services  
Executive Summary

**Lead Agency:** Cobb County

**Solicitation:** 24-6833

**RFP Issued:** June 28<sup>th</sup>, 2024

**Pre-Proposal Date:** July 10<sup>th</sup>, 2024

**Response Due Date:** August 8<sup>th</sup>, 2024

**Proposals Received:** #

**Awarded to:** UKG Kronos Solutions, LLC

Cobb County, GA, Department of Procurement issued RFP #24-6833 on June 28<sup>th</sup>, 2024, to establish a national cooperative contract for Human Resources Information Systems and Related Products and Solutions.

The solicitation included cooperative purchasing language Page 3 and Exhibit A: Section 1.1:

Page 3:

**NATIONAL CONTRACT**

Cobb County, GA, as the Principal Procurement Agency, defined in Attachment A, has partnered with OMNIA Partners, Public Sector, Inc., a Delaware corporation (“**OMNIA Partners**”) to make the resultant contract (also known as the “**Master Agreement**” in materials distributed by OMNIA Partners) from this solicitation available to other public agencies nationally, including state and local governmental entities, public and private primary, secondary and higher education entities, non-profit entities, and agencies for the public benefit (“**Public Agencies**”), through OMNIA Partners’ cooperative purchasing program. Cobb County, GA, is acting as the contracting agency for any other Public Agency that elects to utilize the resulting Master Agreement. Use of the Master Agreement by any Public Agency is preceded by their registration with OMNIA Partners (a “**Participating Public Agency**”) and by using the Master Agreement, any such Participating Public Agency agrees that it is registered with OMNIA Partners, whether pursuant to the terms of a Master Intergovernmental Cooperative Purchasing Agreement, a form of which is attached hereto on Attachment A, or as otherwise agreed to. Attachment A contains additional information about OMNIA Partners and the cooperative purchasing program.

Exhibit A: Section 1.1

**1.1 Requirement**

Cobb County, GA (hereinafter defined and referred to as “**Principal Procurement Agency**”), on behalf of itself and OMNIA Partners, Public Sector, Inc., a Delaware corporation (“**OMNIA Partners**”), is requesting proposals for Human Resource Information Systems and Related Products and Services. The intent of this Request for Proposal is any contract between Principal Procurement Agency and Supplier resulting from this Request for Proposal (“**Master Agreement**”) be made available to other public agencies nationally, including state and local governmental entities, public and private primary, secondary and higher education entities, non-profit entities, and agencies for the public benefit (“**Public Agencies**”), through OMNIA Partners’ cooperative purchasing

program. The Principal Procurement Agency has executed a Principal Procurement Agency Certificate with OMNIA Partners, an example of which is included as Exhibit D, and has agreed to pursue the Master Agreement. Use of the Master Agreement by any Public Agency is preceded by their registration with OMNIA Partners as a Participating Public Agency in OMNIA Partners' cooperative purchasing program. Registration with OMNIA Partners as a Participating Public Agency is accomplished by Public Agencies entering into a Master Intergovernmental Cooperative Purchasing Agreement, an example of which is attached as Exhibit C, and by using the Master Agreement, any such Participating Public Agency agrees that it is registered with OMNIA Partners, whether pursuant to the terms of the Master Intergovernmental Purchasing Cooperative Agreement or as otherwise agreed to. The terms and pricing established in the resulting Master Agreement between the Supplier and the Principal Procurement Agency will be the same as that available to Participating Public Agencies through OMNIA Partners.

Notice of the solicitation was sent to potential offerors, as well as advertised in the following:

- Cobb County, GA website
- OMNIA Partners website
- USA Today, nationwide
- Arizona Business Gazette, AZ
- San Bernardino County Sun, CA
- Honolulu Star-Advertiser, HI
- The Herald-News – Will County (IL)
- The Advocate – New Orleans, LA
- The New Jersey Herald, NJ
- Albany Times Union, NY
- Daily Journal of Commerce, OR
- The State, SC
- Deseret News, UT
- Richmond Times-Dispatch, VA
- Seattle Daily Journal of Commerce, WA
- Helena Independent Record, MT
- Las Vegas Review-Journal
- Kennebec Journal, ME

On August 8<sup>th</sup>, 2024 proposals were received from the following offerors:

- Dayforce
- DLT Solutions
- Inovium
- NEOGOV
- UKG Kronos Systems, LLC

The proposals were evaluated by an evaluation committee. Using the evaluation criteria established in the RFP, the committee elected to enter into negotiations with UKG Kronos Systems, LLC and proceed with contract award(s) upon successful completion of negotiations.

Cobb County, GA, OMNIA Partners and UKG Kronos Systems, LLC successfully negotiated a contract, and the Cobb County, GA executed the agreement with a contract effective date of July 14, 2025.

Contract includes: The suppliers provided federal funds certifications which are available on the OMNIA Partners website for review.

Term:

Initial four-year agreement from July 14, 2025, through July 13, 2029, with the option to renew for three (3) additional one-year periods through July 13, 2032.

Pricing/Discount: Available upon request.



## RENEWAL ORDER FORM

Quote#: Q-322898

Date: 31 Jul, 2025

Customer Legal Name:  
CITY OF SANTA FE

Ship To: City of Santa Fe  
1600 SAINT MICHAELS DR  
SANTA FE, NM 87505-7615 USA

Customer Legal Address:  
2651 SIRINGO RD, BUILDING F, SANTA FE, NM 87504 USA

Bill To: City of Santa Fe  
1600 SAINT MICHAELS DR  
SANTA FE, NM 87505-7615 USA

Bill To Contact:

Payment Terms: Net 30 Days  
Customer PO Number:  
Renewal Term: 12 months  
Billing Frequency: Annual  
Billing Type: Advance

Currency: USD  
Solution ID: 6140062

### Order Notes:

"This Order is subject to the Master Agreement No 24-6833 entered into between Cobb County Board of Commissioner ("Lead Agency") and UKG Kronos Systems, LLC ("UKG") effective as of July 14th, 2025 (the "Omnia Master Agreement No. 24-6833 ") and used by Customer as an Omnia Participating Public Agency."

### Contract Summary

Contract Period Start Date: 7/1/2025 12:00:00 AM

Contract Period End Date: 6/30/2026 12:00:00 AM

Total Price: USD 175,222.54

The Total Price is the total billable amount (pre-tax) for the contract period listed above.

Annualized Contract Value: USD 175,032.00

The Annualized Contract Value is the value of the contract if all services are priced for 365 days. The Annualized Contract Value does not include estimated tax. Please note that this quote may include services priced for prorated periods.

### SaaS Application

Product Name	Duration	Quantity	Monthly Total	Total Price
UKG PRO TIMEKEEPING HOURLY	12	1,700	USD 10,120.97	USD 121,451.64
UKG PRO LEAVE	12	1,700	USD 2,024.19	USD 24,290.33
UKG PRO WORKFORCE MANAGEMENT NON-PROD	12	1,700	USD 397.92	USD 4,775.02



ADDITIONAL TENANT				
UKG PRO WFM INTEGRATION TO UKG TELESTAFF	12	415	USD 0.00	USD 0.00
UKG PRO WORKFORCE MANAGEMENT ANALYTICS	12	1,700	USD 2,058.80	USD 24,705.55
<b>Total Price</b>				<b>USD 175,222.54</b>

**City of Santa Fe**

**UKG Kronos Systems LLC**

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

The monthly price on this Order has been rounded to two decimal places for display purposes. As many as eight decimal places may be present in the actual price. Due to the rounding calculations, the actual price may not display as expected when displayed on your Order. Nonetheless, the actual price on your invoice is the true and binding total for this Order for purposes of amounts owed for the term. If you are tax exempt, please email a copy of your "Tax Exempt Certificate" to [TaxExemption@ukg.com](mailto:TaxExemption@ukg.com) along with the quote number otherwise this order is subject to applicable taxes. The actual tax amount to be paid by Customer will be shown on Customer's invoice.

UKG is aligning our product brand and announcing that the UKG Dimensions® and UKG Pro® solutions will be one product suite under the name UKG Pro. Click here to learn more and view examples of current to future names

<https://www.ukg.com/one-suite#WhatproductnamesarechangingunderUKGDimensions>





Payment Terms: Net 30 Days
Currency: USD
Customer PO Number:

Quote Type: Renewal
Customer: CITY OF SANTA FE
Solution ID: 6140062
Contract #: 1202589 R21-NOV-24
Date: 04-AUG-2025
Prepared by: Jeana Spivak / US PublicSector4

Bill To: CITY OF SANTA FE
2651 SIRINGO RD, BUILDING F
SANTA FE NM 87504
UNITED STATES

Ship To: CITY OF SANTA FE
301 MONTEZUMA
SANTA FE NM 87504
UNITED STATES

Contact: RENEE MARTINEZ 12029 COMMUNICATIONS (ITT)
Email:

CONTRACT SUMMARY

Contract Period: 22-MAR-2025 - 21-MAR-2026

Table with 4 columns: Description, Support Services, Estimated Tax, Subtotal. Row 1: Equipment Support Services, 25,130.08, 1,225.12, 26,355.20. Row 2: Total, 25,130.08, 1,225.12, 26,355.20.

Annualized Contract Value: 25,130.08

The Annualized Contract Value is the value of the contract if all services are priced for 365 days. The Annualized Contract Value does not include estimated tax. Please note that this quote may include services priced for prorated periods.

IMPORTANT NOTES

This Order is subject to the Master Agreement No 24-6833 entered into between Cobb County Board of Commissioner ("Lead Agency") and UKG Kronos Systems, LLC ("UKG") effective as of July 14th, 2025 (the "Omnia Master Agreement No. 24-6833") and used by Customer as an Omnia Participating Public Agency.

Support Services are subject to applicable taxes. The tax amount shown on this quote is only an estimate. The actual tax due will be reflected on the invoice.

CITY OF SANTA FE

UKG KRONOS SYSTEMS LLC

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**Payment Terms:** Net 30 Days  
**Currency:** USD  
**Customer PO Number:**

**Quote Type:** Renewal  
**Customer:** CITY OF SANTA FE  
**Solution ID:** 6140062  
**Contract #:** 1202589 R21-NOV-24  
**Date:**  
**Prepared by:** Jeana Spivak / US PublicSector4

**Bill To:** CITY OF SANTA FE  
 2651 SIRINGO RD, BUILDING F  
 SANTA FE NM 87504  
 UNITED STATES

**Ship To:** CITY OF SANTA FE  
 301 MONTEZUMA  
 SANTA FE NM 87504  
 UNITED STATES

**Contact:** PATRICK BOWKER  
**Email:** prbowker@santafenm.gov

### EQUIPMENT SUPPORT SERVICES

Line	Support Service Level	Covered Product	Quantity	Start Date	End Date	Duration (days)
1	Depot Exchange	Data Collection: InTouch	76	22-MAR-2025	21-MAR-2026	365
2	Depot Exchange	Options: InTouch	88	22-MAR-2025	21-MAR-2026	365

	Support Services	Estimated Tax	Subtotal
Equipment Support Services	25,130.08	1,225.12	26,355.20



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/04/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> MARSH USA, LLC. 99 HIGH STREET BOSTON, MA 02110 Attn: Boston.Certrequest@marsh.com  CN101980216-US-MA-GAWUP-24-	<b>CONTACT NAME:</b> ?	
	<b>PHONE (A/C, No. Ext):</b>	<b>FAX (A/C, No):</b>
<b>E-MAIL ADDRESS:</b>		
<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
<b>INSURER A :</b> Federal Insurance Company		20281
<b>INSURER B :</b> Great Northern Insurance Company		20303
<b>INSURER C :</b> ACE American Insurance Company		22667
<b>INSURER D :</b> Arch Insurance Company		11150
<b>INSURER E :</b>		
<b>INSURER F :</b>		
<b>INSURED</b> UKG Inc. 900 Chelmsford Street Lowell, MA 01851		

**COVERAGES****CERTIFICATE NUMBER:**

NYC-011966145-02

**REVISION NUMBER:** 1

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			3606-40-33	12/01/2024	12/01/2025	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000
							MED EXP (Any one person)	\$ 10,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
B	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			7361-70-85	12/01/2024	12/01/2025	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
A	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			7819-27-57	12/01/2024	12/01/2025	EACH OCCURRENCE	\$ 10,000,000
							AGGREGATE	\$ 10,000,000
								\$
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	7183-44-74	12/01/2024	12/01/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER	
							E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
D	PROF LIAB / TECH E&O / CYBER			NPL0067548-03	12/01/2024	12/01/2025	Limit:	10,000,000
A	COMMERCIAL PROPERTY			3606-40-33	12/01/2024	12/01/2025	ALL RISK	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

**CERTIFICATE HOLDER****CANCELLATION**

City of Santa Fe 200 Lincoln Ave Santa Fe, NM 87501	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE  <i>Marsh USA LLC</i>
-----------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

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# Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.  
**UKG Kronos Systems LLC**

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

Individual/sole proprietor or single-member LLC

C Corporation

S Corporation

Partnership

Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ \_\_\_\_\_

Other (see instructions) ▶ \_\_\_\_\_

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) \_\_\_\_\_

Exemption from FATCA reporting code (if any) \_\_\_\_\_

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.  
**900 Chelmsford Street**

6 City, state, and ZIP code  
**Lowell, MA 01851**

7 List account number(s) here (optional)

Requester's name and address (optional)

Print or type. See Specific Instructions on page 3.

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

			-					
--	--	--	---	--	--	--	--	--

or

Employer identification number

0	4	-	2	6	4	0	9	4	2
---	---	---	---	---	---	---	---	---	---

## Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ▶ *Mia Mae* Date ▶ 2/12/2024

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
  - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
  - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
  - Form 1099-S (proceeds from real estate transactions)
  - Form 1099-K (merchant card and third party network transactions)
  - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
  - Form 1099-C (canceled debt)
  - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

**Signature:** 

**Email:** [xivigil@santafenm.gov](mailto:xivigil@santafenm.gov)

**LINKING AGREEMENT**  
**THE OMNIA MASTER AGREEMENT No. 24-6833**  
**BETWEEN**  
**CITY OF SANTA FE, NEW MEXICO**  
**AND**  
**UKG KRONOS SYSTEMS, LLC**

This Linking Agreement (hereafter the “Linking Agreement”), effective as of the date last signed below (“Effective Date”), to the terms and conditions of the Omnia Master Agreement No. 24-6833 dated July 14, 2025, as amended (the "Omnia Master Agreement"), is entered into by and between UKG Kronos Systems, LLC (hereafter referred to as “UKG”) and the City of Santa Fe, New Mexico (hereafter referred to as "Customer"). In consideration of those mutual undertakings and covenants, the parties agree as follows:

**SECTION I - INTERPRETATION AND INTENT**

All capitalized terms not otherwise defined herein shall have the same meaning as set forth in the Omnia Master Agreement.

The Customer, as an eligible Participating Public Agency, assumes the rights and obligations of the Customer and is subject to the terms and conditions of the Omnia Master Agreement. The terms and conditions of the Omnia Master Agreement, as amended by this Linking Agreement, shall govern when Customer makes purchases of Services under the Omnia Master Agreement. In the event of a conflict between this Linking Agreement and the Omnia Master Agreement, this Linking Agreement shall govern.

The Customer is purchasing and UKG agrees to provide the Services at the price set forth in an applicable Order which is subject to the terms and conditions of the Omnia Master Agreement, as modified by this Linking Agreement.

**SECTION II – COMPENSATION**

The Customer shall pay to UKG in full payment for Services delivered as set forth in this Order and in accordance with the terms of the OMNIA Master Agreement. The total amount payable to UKG under this Order for the first year, including gross receipts tax and expenses, not to exceed two hundred eleven thousand, one hundred fifty-three dollars and ten cents. (\$211,153.10). This amount is a maximum for the first year and not a guarantee that the work assigned to be performed by UKG under this Agreement shall equal the amount stated herein. The Customer shall remit payment in full to UKG on an annual basis in accordance with this Order

**SECTION II - TERM**

The term of this Linking Agreement commences on the Effective Date and shall run co-terminus with the Omnia Master Agreement, unless otherwise terminated in accordance with the Omnia Master Agreement.

## SECTION III – INSURANCE

1. UKG shall procure and maintain, at all times and at its own expense, during the term of the Order entered into between the Customer and UKG, the types of insurance(s) specified below:

**A. Commercial General Liability**

UKG shall provide coverage on a Commercial General Liability Occurrence Coverage Form limits of \$1,000,000.00 each occurrence and \$2,000,000.00 annual aggregate. Limits may be achieved via a combination of primary and umbrella/excess insurance. Customer shall be included as an additional insured via blanket endorsement for General Liability and ongoing operations. Such protection shall be primary and non-contributory with respect to Customer's insurance, but only with respect to UKG's sole negligence. Upon written request, such blanket endorsement shall be provided to Customer.

**B. Workers' Compensation**

UKG shall provide Workers' Compensation Insurance as required by statute.

**C. Umbrella/Excess Liability**

Limits of liability of \$5,000,000 per occurrence.

**D. Automobile Liability**

Limits of liability of at least \$1,000,000 combined single limit, including but not limited to, all owned, hired and non-owned motor vehicles.

**E. Professional Liability/Errors & Omissions/Cyber Risk Liability**

UKG shall maintain coverage on a Professional Liability Form (or equivalent) in the amount of \$5,000,000 per claim with a \$5,000,000 annual aggregate.

**F. All Risk Property Insurance**

UKG shall provide All Risk Property Insurance in an amount not less than the full replacement cost of UKG's property.

**G. Miscellaneous**

UKG shall supply Customer with the above proof of insurance, as required upon the signing of this Agreement. All insurance companies for each of the coverages set forth above must be rated A- or better with a financial rating of VII or better in the most recent A.M. Best's Rating Guide.

## SECTION IV - ADDITIONAL TERMS AND CONDITIONS OF THE CUSTOMER


1. **Records and Audit.** UKG shall maintain, and Customer and its representatives shall have the right to review all invoices associated with any Order incurred for the services under the Agreement, and similar materials relating to work performed for the Customer under this Agreement on file for at least three (3) years following the date of final payment to UKG by Customer. UKG shall maintain all invoices or applicable records for at least three (3) years following the date of final payment to UKG by Customer. Any duly authorized representative(s) of Customer shall have access to such invoices or applicable records upon a 30 day prior request at reasonable times, during usual and customary business hours.


**2. Equal Opportunity Compliance.** UKG maintains its commitment to non-discrimination, providing equal opportunity employment and complying with all such requirements and obligations relating to its employees under Applicable Law. Similarly, UKG adheres to its Code of Conduct, which includes non-discrimination requirements and available on our public website at <https://www.ukg.com/about-us/esg>. If UKG is found not to be in compliance with these requirements during the life of this Agreement, UKG agrees to take appropriate steps to correct these deficiencies.

**3. New Mexico Tort Claims Act.** Any liability incurred by Customer in connection with this Agreement is, to the extent applicable, subject to the immunities and limitations of the New Mexico Tort Claims Act, Section 41-4-1, et. seq. NMSA 1978, as amended.

**4. Governing Law and Venue.** This Agreement is governed by and is to be interpreted solely in accordance with the laws of the State of New Mexico, without regard to any conflict of law provision that would result in the application of a different body of law, and each Party agrees to submit to exclusive venue in a court of competent jurisdiction.

IN WITNESS WHEREOF, the parties hereto have executed this Linking Agreement on the dates subscribed below.

<b>CITY OF SANTA FE, NEW MEXICO</b>
Dated: 09/29/2025
By:  Alan Webber (Sep 29, 2025 16:16:20 MDT)
Name: ALAN WEBBER
Title: MAYOR

<b>UKG KRONOS SYSTEMS, LLC</b>
Dated: 8/28/2025   10:09 AM EDT
By:  Signed by: Fabrice Pajot 7E4599F8AC5945F...
Name: Fabrice Pajot
Title: Sr Mgr. Order Processing

**ATTEST:**

  
ANDREA SALAZAR (Sep 29, 2025 16:18:57 MDT)

ANDREA SALAZAR, CITY CLERK   
GB MTG 09-24-25

**CITY ATTORNEY'S OFFICE:**

  
ASSISTANT CITY ATTORNEY

**APPROVED FOR FINANCES:**

  
EMILY OSTER, FINANCE DIRECTOR



## RENEWAL ORDER FORM

Quote#: Q-323128

Date: 10 Sep, 2025

Customer Legal Name:  
SANTA FE FIRE

Ship To: City of Santa Fe  
1600 SAINT MICHAELS DR  
SANTA FE, NM 87505-7615 USA

Customer Legal Address:  
35 CAMINO JUSTICIA, SANTA FE, NM 87508-8501 USA

Bill To: CITY OF SANTA FE  
1600 SAINT MICHAELS DR  
SANTA FE, NM 87505-7615 USA

Bill To Contact:

Payment Terms: Net 30 Days  
Customer PO Number:  
Renewal Term: 12 months  
Billing Frequency: Monthly  
Billing Type: Arrears

Currency: USD  
Solution ID: 6105679

### Contract Summary

Contract Period Start Date: 7/1/2025 12:00:00 AM

Contract Period End Date: 6/30/2026 12:00:00 AM

Total Price: USD 46,114.80

The Total Price is the total billable amount (pre-tax) for the contract period listed above.

Annualized Contract Value: USD 46,114.80

The Annualized Contract Value is the value of the contract if all services are priced for 365 days. The Annualized Contract Value does not include estimated tax. Please note that this quote may include services priced for prorated periods.

### SaaS Application

Product Name	Duration	Quantity	Monthly Total	Total Price
UKG TELESTAFF CLOUD	12	415	USD 3,842.90	USD 46,114.80
<b>Total Price</b>				<b>USD 46,114.80</b>

**CITY OF SANTA FE**

**UKG Kronos Systems LLC**

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

The monthly price on this Order has been rounded to two decimal places for display purposes. As many as eight decimal places may be present in the actual price. Due to the rounding calculations, the actual price may not display as expected when displayed on your Order. Nonetheless, the actual price on your invoice is the true and binding total for this Order for purposes of amounts owed for the term. If you are tax exempt, please email a copy of your "Tax Exempt Certificate" to [TaxExemption@ukg.com](mailto:TaxExemption@ukg.com) along with the quote number otherwise this order is subject to applicable taxes. The actual tax amount to be paid by Customer will be shown on Customer's invoice.

UKG is aligning our product brand and announcing that the UKG Dimensions® and UKG Pro® solutions will be one product suite under the name UKG Pro. Click here to learn more and view examples of current to future names

<https://www.ukg.com/one-suite#WhatproductnamesarechangingunderUKGDimensions>



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/01/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).**

<b>PRODUCER</b> MARSH USA, LLC. 99 HIGH STREET BOSTON, MA 02110 Attn: Boston.Certrequest@marsh.com  CN101980216-US-MA-GAWUP-25-	<b>CONTACT NAME:</b> ?	<b>PHONE (A/C, No. Ext):</b>	<b>FAX (A/C, No):</b>														
	<b>E-MAIL ADDRESS:</b>																
<b>INSURED</b> UKG Inc. 900 Chelmsford Street Lowell, MA 01851		<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td><b>INSURER A:</b> Federal Insurance Company</td> <td>20281</td> </tr> <tr> <td><b>INSURER B:</b> Great Northern Insurance Company</td> <td>20303</td> </tr> <tr> <td><b>INSURER C:</b> ACE American Insurance Company</td> <td>22667</td> </tr> <tr> <td><b>INSURER D:</b> Arch Insurance Company</td> <td>11150</td> </tr> <tr> <td><b>INSURER E:</b></td> <td></td> </tr> <tr> <td><b>INSURER F:</b></td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	<b>INSURER A:</b> Federal Insurance Company	20281	<b>INSURER B:</b> Great Northern Insurance Company	20303	<b>INSURER C:</b> ACE American Insurance Company	22667	<b>INSURER D:</b> Arch Insurance Company	11150	<b>INSURER E:</b>		<b>INSURER F:</b>	
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<b>INSURER F:</b>																	

**COVERAGES****CERTIFICATE NUMBER:**

NYC-011966145-04

**REVISION NUMBER:** 1

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			3606-40-33	12/01/2025	12/01/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			7361-70-85	12/01/2025	12/01/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			7819-27-57	12/01/2025	12/01/2026	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	7183-44-74	12/01/2025	12/01/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	PROF LIAB / TECH E&O / CYBER			NPL0067548-04	12/01/2025	12/01/2026	Limit: 10,000,000
A	COMMERCIAL PROPERTY			3606-40-33	12/01/2025	12/01/2026	ALL RISK

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

**CERTIFICATE HOLDER****CANCELLATION**

City of Santa Fe 200 Lincoln Ave Santa Fe, NM 87501	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE  <i>Marsh USA LLC</i>
-----------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

© 1988-2016 ACORD CORPORATION. All rights reserved.

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type.  
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>UKG Kronos Systems LLC</b>	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small>  <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____  <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions. <b>900 Chelmsford Street</b>	Requester's name and address (optional)
6 City, state, and ZIP code <b>Lowell, MA 01851</b>	
7 List account number(s) here (optional)	

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>										
or										
<b>Employer identification number</b>										
0	4	-	2	6	4	0	9	4	2	

### Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶ <b>2/12/2024</b>
------------------	----------------------------	-------------------------

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

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  - Form 1099-S (proceeds from real estate transactions)
  - Form 1099-K (merchant card and third party network transactions)
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  - Form 1099-C (canceled debt)
  - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*

# Urgent-GB-350-UKG\_Linking\_Agreement\_Amen dment\_1\_Packet\_-Signed\_ (2)

Interim Agreement Report








2026-01-21

Created:	2026-01-21
By:	ALYSSA PEREZ (aeperez@santafenm.gov)
Status:	Out for Signature
Transaction ID:	CBJCHBCAABAAIq2p_sl9opNI14B39sGVsBREbhx12jLh

## Agreement History

Agreement history is the list of the events that have impacted the status of the agreement prior to the final signature. A final audit report will be generated when the agreement is complete.

## "Urgent-GB-350-UKG\_Linking\_Agreement\_Amendment\_1\_Pack et\_-Signed\_ (2)" History

-  Document created by ALYSSA PEREZ (aeperez@santafenm.gov)  
2026-01-21 - 3:49:24 PM GMT- IP address: 63.232.20.2
-  Document emailed to ajhopkins@santafenm.gov ajhopkins@santafenm.gov (ajhopkins@santafenm.gov) for signature  
2026-01-21 - 3:51:25 PM GMT
-  Email viewed by ajhopkins@santafenm.gov ajhopkins@santafenm.gov (ajhopkins@santafenm.gov)  
2026-01-21 - 7:14:18 PM GMT- IP address: 104.47.64.254
-  Document e-signed by ajhopkins@santafenm.gov ajhopkins@santafenm.gov (ajhopkins@santafenm.gov)  
Signature Date: 2026-01-21 - 8:21:14 PM GMT - Time Source: server- IP address: 63.232.20.129
-  Document sent to JoAnn Lovato (jdlovato@santafenm.gov) and Travis Dutton-Leyda (tkduttonleyda@santafenm.gov) for signature. One of them to sign  
2026-01-21 - 8:21:18 PM GMT
-  Email viewed by Travis Dutton-Leyda (tkduttonleyda@santafenm.gov)  
2026-01-21 - 8:21:24 PM GMT- IP address: 62.10.205.18
-  Email viewed by JoAnn Lovato (jdlovato@santafenm.gov)  
2026-01-21 - 8:40:14 PM GMT- IP address: 73.228.7.52

