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**ATTORNEY GENERAL
DEPARTMENT OF JUSTICE**

33 CAPITOL STREET
CONCORD, NEW HAMPSHIRE 03301-6397

JOSEPH A. FOSTER
ATTORNEY GENERAL



ANN M. RICE
DEPUTY ATTORNEY GENERAL

June 4, 2015

Her Excellency, Governor Margaret Wood Hassan
And the Honorable Council
State House
Concord New Hampshire 03301

REQUESTED ACTION

Authorize the Department of Justice to amend an existing contract with Sophus Consulting Inc., 2795 E. Bidwell Street, Suite 100-166, Folsom CA 95630 (Vendor # 201182-B001, Purchase Order #7001480) approved by the Governor and Executive Council on November 12, 2014, item #58A, by extending the contract end date from June 30, 2015 to December 31, 2015. No additional funding is involved in this time extension. 100% General Funds.

Funding is available in account #02-20-20-200030-79490000, 13-195:X-B-Prolaw Upgrade in the amount of \$300,000 upon the availability and continued appropriation of funds in the future operating budget.

EXPLANATION

The Department of Justice entered into a contract agreement with Sophus Consulting Inc. on November 12, 2014 in order to upgrade the Department's current electronic records and case management system entitled Prolaw. Before this upgrade could take place, the Department needed to upgrade and move their existing network to the Department of Safety in order to be Criminal Justice Information Services (CJIS) compliant.

The new network installation at the Department of Safety has neared completion allowing the Department to move forward with the final stages of the Prolaw upgrade. This upgrade should be completed no later than December 31, 2015.

Your consideration of this request would be most appreciated. Please let me know if you have any questions.

Respectfully submitted,

Joseph A. Foster
Attorney General

#1110145



STATE OF NEW HAMPSHIRE
DEPARTMENT OF INFORMATION TECHNOLOGY

27 Hazen Dr., Concord, NH 03301
Fax: 603-271-1516 TDD Access: 1-800-735-2964
www.nh.gov/doit

Denis Goulet
Commissioner

May 29, 2015

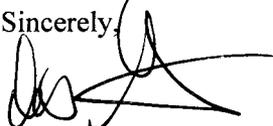
David A. Rienzo
Assistant Attorney General
Department of Justice
33 Capitol Street
Concord, NH 03301

Dear Attorney Rienzo:

This letter represents formal notification that the Department of Information Technology (DoIT) has approved your agency's request to enter into Contract Amendment to upgrade the ProLaw Case Management System with Sophos Consulting of Las Vegas, NV, as described below and referenced as DoIT No. 2015-047A.

This is a request for approval to enter into a contract amendment with Sophos Consulting for upgrading the agency's case management system by installing ProLaw version 2014, cleaning, updating, and migrating the ProLaw database, redesigning forms, and integrating ProLaw software with the Department's network architecture and critical software. The contract will be effective upon Governor and Executive Council approval through December 31, 2015. No additional funds are requested.

A copy of this letter should accompany the Department of Justice's submission to Governor and Executive Council for approval.

Sincerely,

Denis Goulet

DG/mh
RFP 2015-047

cc: Rebecca Bolton, DoIT
Leslie Mason, DoIT

STATE OF NEW HAMPSHIRE
DEPARTMENT OF JUSTICE
CASE MANAGEMENT SYSTEM UPGRADE
CONTRACT 2015-047
CONTRACT AMENDMENT 1

This amendment (hereinafter called the Amendment) is by and between the Department of Justice and Sophus Consulting, Inc. (hereinafter called the Contractor).

WHEREAS, pursuant to an Agreement (hereinafter called the Contract) approved by the Governor and Council on November 17, 2010, item #75B, the Contractor agreed to perform certain services upon the terms and conditions specified in the Contract, and in consideration of payment by the Department of Justice of certain sums specified therein;

WHEREAS, pursuant to the provisions of paragraph 18.8 of the Contract, the Contract may be amended, waived or discharged by written instrument executed by the parties thereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire;

WHEREAS, the Contractor and the Department of Justice have agreed to amend the Contract in certain aspects;

NOW, THEREFORE, in consideration of the foregoing, the covenants and conditions contained in the Contract, and set forth herein, the parties hereto do hereby agree as follows:

1. Amendment and Modification of Contract

The Contract is hereby amended as follows:

- A. Form P-37, General Provisions, Block 1.7 Completion Date: Extend the contracted date of completion from June 30, 2015 to December 31, 2015.
- B. Delete paragraph 19.9.1.1 and replace with the following:
Comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$250,000 per claim and \$1,000,000 per incident and no less than \$1,000,000 in excess/umbrella liability each occurrence; and

2. Effective Date of Amendment

This Amendment shall take effect upon the date of approval by Governor and Council

3. Continuance of Agreement



State of New Hampshire Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that Sophus Consulting doing business in New Hampshire as Sophus Consulting, Inc., a(n) California corporation, is authorized to transact business in New Hampshire and qualified on November 8, 2010. I further certify that all fees and annual reports required by the Secretary of State's office have been received.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 29th day of May, A.D. 2015

A handwritten signature in black ink, appearing to read "William M. Gardner".

William M. Gardner
Secretary of State

**CERTIFICATE OF CORPORATE RESOLUTION
AUTHORIZING CASE MANAGEMENT SYSTEM UPGRADE PROJECT**

I, ANGELO M WHITFIELD, President of SOPHUS CONSULTING, organized and existing under the laws of CALIFORNIA and having its principal place of business at 2795 E BIDWELL ST, STE 100-166, FOLSOM, CA 95630, hereby certify that the following is a true copy of a resolution adopted by the Board of Directors of the Corporation at a meeting convened and held on MAY 23rd, 2015 at which a quorum was present and voting throughout and that such resolution is now in full force and effect and is in accordance with the provisions of the charter and by-laws of the Corporation.

RESOLVED: That the Corporation approves the CASE MANAGEMENT SYSTEM UPGRADE PROJECT as was or will be submitted to THE NEW HAMPSHIRE DEPARTMENT OF JUSTICE;

RESOLVED: That the PRESIDENT of the Corporation is hereby authorized to sign on behalf of the Corporation any contracts or forms for the CASE MANAGEMENT SYSTEM UPGRADE PROJECT;

RESOLVED FURTHER: That the PRESIDENT is hereby authorized and directed to certify to any interested party that this resolution has been duly adopted, is in full force and effect, and is in accordance with the provisions of the charter and by-laws of the Corporation.

I further certify that this Corporation is duly organized and existing, and has the power to take the action called for by the foregoing resolution.

DIRECTORS

| | |
|---------------------------|----------------|
| <u>Angelo M Whitfield</u> | <u>5/23/15</u> |
| President | Date |
| <u>Angelo M Whitfield</u> | <u>5/23/15</u> |
| Secretary | Date |
| <u>Angelo M Whitfield</u> | <u>5/23/15</u> |
| Treasurer | Date |

Witness my hand seal of this corporation on this 23rd day of MAY, 2015.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/22/2015

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 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).

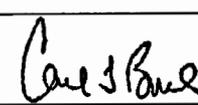
| | | | |
|---|--|--|----------------|
| PRODUCER Hiscox Inc. d/b/a/ Hiscox Insurance Agency in CA 520 Madison Avenue 32nd Floor New York, NY 10022 | CONTACT NAME: PHONE (A/C, No, Ext): (888) 202-3007 | | FAX (A/C, No): |
| | E-MAIL ADDRESS: contact@hiscox.com | | |
| INSURED Sophus Consulting 2795 E Bidwell Street Suite 100-166 Folsom CA 95630 | INSURER(S) AFFORDING COVERAGE | | NAIC # |
| | INSURER A : Hiscox Insurance Company Inc | | 10200 |
| | INSURER B : | | |
| | INSURER C : | | |
| | INSURER D : | | |
| | INSURER E : | | |

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

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"/> COMMERCIAL GENERAL LIABILITY <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: | N | | UDC-1470606-CGL-14 | 07/07/2014 | 07/07/2015 | EACH OCCURRENCE \$ 1,000,000 |
| | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 | | | | | | |
| | | | | | | | MED EXP (Any one person) \$ 5,000 |
| | | | | | | | PERSONAL & ADV INJURY \$ 1,000,000 |
| | | | | | | | GENERAL AGGREGATE \$ 2,000,000 |
| | | | | | | | PRODUCTS - COMP/OP AGG \$ S/T Gen. Agg. |
| | | | | | | | \$ |
| | AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS | | | | | | COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ |
| | UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$ | | | | | | EACH OCCURRENCE \$ AGGREGATE \$ \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | | Y/N | | | | PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$ |

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

| | |
|--|---|
| CERTIFICATE HOLDER The New Hampshire Department of Justice 33 Capital Street Concord, NH 03301 | CANCELLATION 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  |



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/22/2015

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| | | |
|---|---|--|
| PRODUCER Hiscox Inc. d/b/a/ Hiscox Insurance Agency in CA 520 Madison Avenue 32nd Floor New York, NY 10022 | CONTACT NAME: PHONE (A/C, No, Ext): (888) 202-3007 FAX (A/C, No): E-MAIL ADDRESS: contact@hiscox.com | |
| | INSURER(S) AFFORDING COVERAGE NAIC # INSURER A : Hiscox Insurance Company Inc 10200 INSURER B : INSURER C : INSURER D : INSURER E : INSURER F : | |
| INSURED Sophus Consulting 2795 E Bidwell Street Suite 100-166 Folsom CA 95630 | | |

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

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| INSR LTR | TYPE OF INSURANCE | ADDL INSD | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS |
|----------|--|-----------|----------|-------------------|-------------------------|-------------------------|--|
| | COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | | | | | | EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$ |
| | AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS | | | | | | COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ |
| | UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$ | | | | | | EACH OCCURRENCE \$ AGGREGATE \$ \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | <input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$ |
| A | Professional Liability | N | | UDC-1470606-EO-14 | 07/07/2014 | 07/07/2015 | Each Claim: \$ 1,000,000 Aggregate: \$ 1,000,000 |

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

CERTIFICATE HOLDER

The New Hampshire Department of Justice
 33 Capital Street
 Concord, NH 03301

CANCELLATION

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

© 1988-2014 ACORD CORPORATION. All rights reserved.



CERTIFICATE OF LIABILITY INSURANCE

GCS
R022DATE (MM/DD/YYYY)
5/20/2015

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.

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| | | | |
|---|---|-------------------------------|-------|
| PRODUCER VAUGHT WRIGHT & BOND INC/PHS 122004 P:(866) 467-8730 F:(888) 443-6112 PO BOX 33015 SAN ANTONIO TX 78265 | CONTACT NAME: PHONE (A/C, No, Ext): (866) 467-8730 | FAX (A/C, No): (888) 443-6112 | |
| | E-MAIL ADDRESS: | | |
| INSURED SOPHUS CONSULTING 2795 E BIDWELL ST STE 100-106 FOLSOM CA 95630 | INSURER(S) AFFORDING COVERAGE | | NAIC# |
| | INSURER A: Hartford Accident and Indemnity Company | | 22357 |
| | INSURER B: | | |
| | INSURER C: | | |
| | INSURER D: | | |
| | INSURER E: | | |
| INSURER F: | | | |

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

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|----------|--|-----------|----------|---------------|-------------------------|-------------------------|---|
| | COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | | | | | | EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/OP AGG \$ \$ |
| | AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS | | | | | | COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ |
| | UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$ | | | | | | EACH OCCURRENCE \$ AGGREGATE \$ \$ |
| A | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below | | N/A | 57 WEC LN7485 | 07/06/2015 | 07/06/2016 | <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 |

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

Those usual to the Insured's Operations.

CERTIFICATE HOLDER

New Hampshire Department of Justice
 33 Capitol Street
 Concord, NH 03301

CANCELLATION

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

Max Taylor

Original Contract G&C Approval

58A *Beard*

ATTORNEY GENERAL
DEPARTMENT OF JUSTICE

JUN 05 '15 PM 1:24 DAS

33 CAPITOL STREET
CONCORD, NEW HAMPSHIRE 03301-6397

JOSEPH A. FOSTER
ATTORNEY GENERAL



ANN M. RICE
DEPUTY ATTORNEY GENERAL

October 31, 2014

Her Excellency Governor Margaret Wood Hassan
And the Honorable Council
State House
Concord, NH 03301

Your Excellency and Members of the Council:

REQUESTED ACTION

Authorize the Department of Justice to enter into a **sole source** contract with Sophus Consulting, Folsom, CA (vendor #201182-B001) in the amount of \$300,000 for the purpose of upgrading the Department's ProLaw case management system effective with the date of Governor and Council approval through June 30, 2015. 100% Capital Funds *General Funds*

Funding is available in account #02-20-20-200030-79490000, 13-195:X-B - Prolaw Upgrade.

EXPLANATION

In the past, the Department of Justice's (DOJ) electronic records and case management system was put out to bid after extensive work with the Department of Information Technology to specify the work needed. The only response received was from the Sophus Consulting. Therefore, this contract was negotiated with Sophus due to their successful implementation of the past upgrades and their current and extensive knowledge and expertise relating to DOJ's electronic records and case management system (ProLaw). Sophus has extensive experience providing virtually identical services to other state Attorneys General's offices and other similarly-sized government law offices. Sophus is uniquely skilled and knowledgeable regarding the work that needs to be done and has been an excellent vendor-partner in the past.

The Department of Justice uses ProLaw to manage its case records. The current version of ProLaw is no longer supported and is highly susceptible to catastrophic failure. It is critical that we upgrade this software to ensure the ongoing functionality of the system supporting the civil and criminal prosecution functions as well as all other functions of the DOJ.

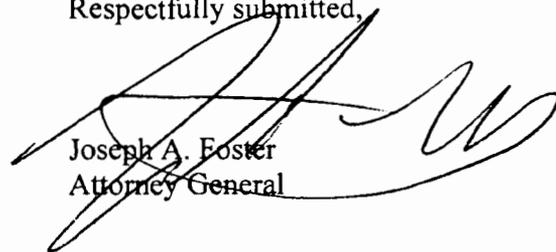
Currently the system is also used for timekeeping by office professionals and is a vital part of our calendaring system which ensures timely court appearances and submissions, and serves as the electronic file cabinet for all our documents. We have well over one million documents in the system and our work generates hundreds of new documents each week. All of the work the DOJ does—civil, criminal, consumer protection and charitable trusts—are totally dependent on ProLaw and this upgrade.

This upgrade will bring ProLaw up to its most recent version. The current version of ProLaw is highly vulnerable to catastrophic failure from which there can be no recovery. The vendor no longer supports this version because of its age. It also does not operate with the current versions of other critical software essential to the work of DOJ such as Microsoft Exchange 2010 and MS Office 2010. The DOJ must upgrade ProLaw to continue to stay current with State standards and take advantage of efficient, lower-cost, centralized alternatives offered through the Department of Information Technology. Funding for this project was approved through the Capital Budget for the 2014 & 2015 Biennium.

Please let me know if you have any questions concerning this request.

Your consideration is greatly appreciated.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Joseph A. Foster', is written over the typed name and title. The signature is fluid and cursive, with a large loop at the end.

Joseph A. Foster
Attorney General

JAF/k
#1110145