

**OFFICE OF STATE COURTS ADMINISTRATOR**

P.O. Box 104480

2112 Industrial Drive

Jefferson City, MO 65110-4480

CONTRACT RENEWAL 002**CONTRACT: OSCA 23-01792-15****TITLE: Drug/Alcohol Testing Equipment,
Monitoring Equipment, & Services****CONTACT: Mitchell Bonine****EMAIL: osca.contracts@courts.mo.gov****PHONE: (573) 522-6766****ISSUE DATE: April 14, 2025****RETURN RENEWAL NO LATER THAN: May 15, 2025**

Proposal submission: Proposals may be sent electronically to osca.contracts@courts.mo.gov. If you would like to submit a written proposal, please print or type the RFP number on the lower left hand corner of the envelope.

(U.S. Mail)

Office of State Courts Administrator Attn:

Contract Unit

PO Box 104480

Jefferson City, MO 65110 - 4480

or

(Courier Service)

Office of State Courts Administrator Attn:

Contract Unit

2112 Industrial Dr.

Jefferson City, MO 65109

CONTRACT PERIOD: July 1, 2025 THROUGH JUNE 30, 2026

**DELIVER SUPPLIES/SERVICES FOB DESTINATION TO THE FOLLOWING ADDRESS: VARIOUS
TREATMENT COURTS THROUGHOUT THE STATE OF MISSOURI**

The offeror hereby declares understanding, agreement and certification of compliance to provide the items and/or services, at the prices quoted, in accordance with all requirements and specifications contained herein and the Terms and Conditions Request for Proposal (RFP). The offeror further agrees that the language of this RFP shall govern in the event of a conflict with his/her proposal. The offeror further agrees that upon receipt of an authorized purchase order from the Office of State Courts Administrator or when this RFP is countersigned by an authorized official of the Office of State Courts Administrator, a binding contract shall exist between the offeror and the Office of State Courts Administrator.

SIGNATURE REQUIRED

AUTHORIZED SIGNATURE <i>Shellie Davis-Ruble</i>		DATE <i>May 7, 2025</i>
PRINTED NAME Shellie Davis-Ruble		TITLE President
COMPANY NAME O.C.C.S. Inc.		
MAILING ADDRESS 215 E. Commercial		
CITY, STATE, ZIP Lebanon, Missouri 65536		
TELEPHONE NUMBER 417-533-3221	EMAIL ADDRESS srubleoccs@gmail.com	

NOTICE OF AWARD (OSCA USE ONLY)

ACCEPTED BY OFFICE OF STATE COURTS ADMINISTRATOR AS FOLLOWS:		
As submitted in its entirety		
CONTRACT NO. 23-01792-15	CONTRACT PERIOD July 1, 2025 through June 30, 2026	
CONTRACTS SECTION <i>Mitchell Bonine</i>	DATE 06/09/25	DEPUTY STATE COURTS ADMINISTRATOR

Pricing Page, continued

COLLECTOR SERVICES PRICING

OFFEROR NAME:

O.C.C.S. Inc

The offeror should quote a price per hour or per test. Only one will be accepted.
The price shall not change during the contract period.

Firm, fixed price for collector services performed: \$ see attached per hour, or\$ see attached per test

For the following county and circuit:

County: LacledeCircuit: 26County: CamdenCircuit: 26County: MillerCircuit: 26County: MorganCircuit: 26County: MonteauCircuit: 26

County: _____

Circuit: _____

Pricing Page, continued

COLLECTOR SERVICES PRICING

OFFEROR NAME: O.C.C.S. Inc

The offeror should quote a price per hour or per test. Only one will be accepted.
The price shall not change during the contract period.

Firm, fixed price for collector services performed: \$ see attached per hour, or
\$ see attached per test

For the following county and circuit:

County: Pulaski Circuit: 2SCounty: Phelps Circuit: 2SCounty: Texas Circuit: 2SCounty: Monroe Circuit: 2S

County: _____ Circuit: _____

County: _____ Circuit: _____

O.C.C.S. Inc.
OUTREACH CONSULTING & COUNSELING SERVICES
www.occsfmissouri.com

215 E Commercial
Lebanon MO 65536

Phone # (417) 533-3221 Ext 102
Fax # (417) 533-7766

OSCA 23-01792-15

Drug/Alcohol Testing Equipment, Monitoring Equipment and Services

Contract Period: July 1, 2025, through June 30, 2026

Redwood Toxicology On-Site Testing:

Multi-Drug 6 Panel Testing \$15.00 fixed price per each unit
(Coc/M-Amp/THC/OPI/OXY/BZO)

Multi-Drug 13 Panel Testing \$20.00 fixed price per each unit
(ETG/FTY/TRA/AMP/BUP/BZO/COC/MET
MDMA/MTO/OPI300/OXY/THC)

Slim Cup 20 (AMP/BAR/BUP/BZO/COC \$20.00 fixed price per each unit
ETG/FTY/Syn CAN/KET/KRA/HER/MDMA/
METH/MTO/Methadone/OXY/PCP/TRI Anti/
THC/TRAM)

Oral Fluid Rapid Click Cube 16 Drugs \$20.00 fixed price per each unit

(Alco .02%/AMP/BAR/BUP/BZO/COC
COT/FTY/KET/K2/MET/MTD/OPI/OXY
PCP/THC)

*Cut offs vary among each different testing
Instrument.

Emerging Rapid Cup

\$25.00 fixed price per each unit

12 panel ~ Methylenedioxypseudoephedrine (MDPV aka Bath Salts), Fentanyl (FTY), Gabapentin (GAB), Ketamine (KET), Kratom (KRA), Lysergic Acid Diethylamide (LSD), N-dimethyltryptamine (DMT), Nitazene (NTZ), Psilocybin (PY), Synthetic Marijuana (K2), Tianeptine (TIA aka Gas Station Herion), Xylazine (XYL).

Confirmation for Emerging Rapid Cup:

Confirmation for Ketamine	\$45.00 fixed price per each unit
Confirmation for Tianeptine	\$50.00 fixed price per each unit
Confirmation for Xylazine	\$40.00 fixed price per each unit
Confirmation for Hallucinogens Panel	\$220.00 fixed price per each unit

DMT (Ayahuasca)

LSD (Lysergic Acid)

Psilocin/Psilocybins (Magic Mushrooms)

Redwood Confirmation for Substances:

Confirmation per each drug (unit) (Delta 8/THC/AMP/METH/BZO/BUP/ COC/ETG/OPI/Methadone/PHEN/TRA)	\$30.00 fixed price per each unit
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Confirmation for Fentanyl	\$45.00 fixed price per each unit
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Confirmation for Mitragynine (Kratom)	\$45.00 fixed price per each unit
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Confirmation for Designer Stimulants Premium	\$75.00 fixed price per each unit
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Confirmation for Designer Stimulants Standard	\$70.00 fixed price per each unit
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Confirmation for Designer Cannabinoids Premium	\$65.00 fixed price per each unit
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H58 Confirmation	\$70.00 fixed price per each unit
M29 Confirmation	\$75.00 fixed price per each unit
Confirmation for T-Cube Testing	\$30.00 per each drug to confirm Fixed per each unit
Confirmation for T-Cube Fentanyl	\$45.00 fixed price per each unit

PHARM CHEM DRUG PATCH:

Patch and Confirmation Standard Panel (AMP/METH/OPI/COC/PCP/THC)	\$75.00 fixed price per each unit
Add on for Fentanyl/Nor Fentanyl	\$15.00 fixed price per each unit
Add on for Opiate Expanded	\$30.00 fixed price per each unit

Collector Services Pricing:

Collecting Specimen	\$11.00 fixed per price each unit
Prepare for Lab Confirmation	\$ 9.00 fixed per price each unit

*Tests provided for office performing collections.

Monitoring Equipment:

BI – Soberlink 3:

\$ 7.50 per day fixed
\$50.00 Enrollment fee

*Replacement cost of lost or damaged: \$850.00 fixed per unit
*Charger \$ 25.00 fixed per unit
*Case \$ 15.00 fixed per unit

Features: Handheld Breathalyzer, customized alcohol testing schedule, facial recognition technology, embedded cellular and GPS tamper detection.

BI – LOC8 XT:

\$11.50 per day fixed
\$50.00 Enrollment fee

*Replacement cost of damaged or lost \$2500.00 fixed per unit
*Strap \$ 10.00 fixed per unit
*Battery \$ 125.00 fixed per unit
*Charger \$ 125.00 fixed per unit

Features: Small ankle bracelet, quick recharge time, up to 60 hours battery life on single charge cordless battery charging, enhanced tamer detection including proximity tamper, flash memory to preserve data, even if battery is depleted. Vibration pulse notifications for hearing impaired users.

BI – TAD Ankle Bracelet:

\$ 11.50 per day fixed
\$ 50.00 Enrollment fee fixed

*Replacement Costs of damaged or lost \$1500.00 fixed per unit
*Strap \$ 10.00 fixed per unit
*Charger \$ 50.00 fixed per unit

Features: Continuous Transdermal Alcohol Detection. Meets the Daubert Standard for the Courts, multiple tamper-resistant features.

BI - Veri Watch:

\$ 11.00 per day fixed
\$ 50.00 Enrollment fee fixed

*Replacement fee if damaged or lost	\$800.00 per fixed unit
*Protective Cover	\$ 10.00 per fixed unit
*Charging Cable and Plug	\$ 60.00 per fixed unit
*Strap	\$ 30.00 per fixed unit

Features: Biometric authentication, device removal detection algorithm utilizes proximity and other sensors Liveness Detection, Custom Operating System, Cordless battery charging, GPS and multiple constellation tracking; Wi-fi indoor/secondary location tracking, High frequency pursuit mode to find clients on the move, LCS touch screen, speaker and audible alarm with client acknowledgment, available in English and Spanish, LTE cellular connectivity with multiple carriers, Stores location points for 7 days without cell connectivity.

VCheck24

Vcheck Daily Phone Application Monitoring	\$1.50 Per day fixed
VCheck Enrollment fee	\$25.00 One-Time fee
VCheck Brac (Monitoring and Brac testing) (Phone monitoring and Brac monitoring)	\$3.00 Per day fixed

USDTL
United States Drug Testing Laboratories, Inc.
Pricing Page

Hair/Nail Testing ~ 5 Drug Panel	\$145.00
Hair/Nail testing ~ 7 Drug Panel	\$165.00
Hair/Nail testing ~ 9 Drug Panel	\$220.00
Hair/Nail testing ~ 10 Drug Panel (Oxycodone)	\$250.00
Hair/Nail Testing ~ 12 Drug Panel (Meperidine & Tramadol)	\$320.00
Hair/Nail Testing ~ 14 Drug Panel (Fentanyl & Sufentanil)	\$335.00
Hair/Nail Testing ~ 15 Drug Panel (Ketamine)	\$440.00
Hair/Nail Testing ~ 16 Drug Panel (Buprenorphine)	\$450.00
Hair/Nail Testing ~ Drug Panel (Zolpidem)	\$495.00
Hair/Nail Testing ~ 18 Drug Panel (Mitragynine aka Kratom)	\$515.00
Hair/Nail Testing ~ 19 Drug Panel (Gabapentin)	\$560.00
Environmental Exposure (Child Guard) 5 Drug Panel	\$155.00
Environmental Exposure (Child Guard) 7 Drug Panel	\$195.00
Environmental Exposure (Child Guard) 9 Drug Panel	\$235.00
Environmental Exposure (Child Guard) 13 Drug Panel	\$400.00
Stand Alone ~ Kratom	\$260.00
Stand Alone ~ Gabapentin	\$260.00

*Stand alone can be combined with another test, but added together.

Available to serve the following Counties and circuit:

Pulaski County	25 th Circuit
Phelps County	25 th Circuit
Texas County	25 th Circuit
Maries County	25 th Circuit

Laclede County	26 th Circuit
Camden County	26 th Circuit
Miller County	26 th Circuit
Morgan County	26 th Circuit
Moniteau County	26 th Circuit

*Would be available to discuss serving other counties per discussion with Treatment Courts.

*Addresses and phone numbers of all office locations can be located at:
www.occsfmissouri.com

EXHIBIT A

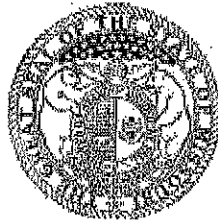
OFFEROR NAME:

O.C.C.S. Inc

OSCA 23-01792

Collector Guideline Acceptance Form

Office of State Courts Administrator



I verify I have read and will abide by the Missouri Collector Guidelines. I further understand failure to follow these guidelines may result in the termination of my contract with the Office of State Courts Administrator and the court.

- ☐ I am a commissioned law enforcement officer by the state of Missouri.
- ☐ I understand that I will provide a copy of my POST certification to verify my law enforcement commission in the state of Missouri.
- ☒ I am not a commissioned officer.
- ☒ I have provided a completed background check, and
- ☒ I have registered with the Family Care Safety Registry (FCSR), and I have provided a copy of the results of the FCSR background screening results.

Brooklyn Stampler

Collector Printed name

Signature

5-21-2024

Date

The treatment court approves this person as a collector for our circuit. This approval does not mean the Judiciary shall be liable for their actions in performance of these duties.

[Signature]

Drug Court Judge/Coordinator

26

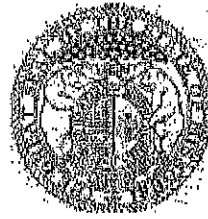
Circuit

5.21.24

Date

OCCS Inc.

Office of State Courts Administrator



Collector Guideline Acceptance Form OSCA 14-042

I verify I have read and will abide by the Missouri Collector Guidelines. I further understand failure to follow these guidelines may result in the termination of my contract with the Office of State Courts Administrator and the court.

I understand I will provide a completed background check at my expense, which shall include, but may not be limited to: employment history and references, fingerprint checks for open and closed federal and state criminal records and Sex Offender Registry. I will also register with the Family Care Safety Registry.

Ryan Scanlan
Collector Printed name

Ryan Scanlan
Signature

12-31-2024
Date

The treatment court approves this person as a collector for our circuit. This approval does not mean the judiciary shall be liable for their actions in performance of these duties.

RC

Drug Court Judge/Coordinator

26th

Circuit

1/22/2025

Date

OSCA 14-042 Treatment Court Specialized Service Providers

Office of State Courts Administrator



Collector Guideline Acceptance Form OSCA 14-042

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Brittany Fouts

Collector Printed name

Signature

Date

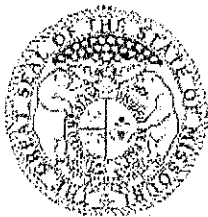
The treatment court approves this person as a collector for our circuit. This approval does not mean the judiciary shall be liable for their actions in performance of these duties.

Drug Court Judge/Coordinator

Circuit

Date

Office of State Courts Administrator



Collector Guideline Acceptance Form OSCA 14-042

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Emmalee Yackle _____ 4-1-2025
Collector Printed name Signature Date

The treatment court approves this person as a collector for our circuit. This approval does not mean the judiciary shall be liable for their actions in performance of these duties.

_____ 26th 4-4-25
Drug Court Judge/Coodinator Circuit Date

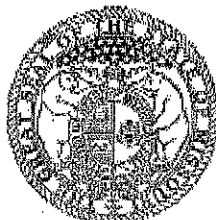
EXHIBIT A

OFFEROR NAME:

O.C.C.S. Inc.

OSCA 23-01792

Collector Guideline Acceptance Form

Office of State Courts Administrator

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- ☒ I have registered with the Family Care Safety Registry (FCSR), and I have provided a copy of the results of the FCSR background screening results.

Randall Smith

Collector Printed name

[Signature]

Signature

5.21.24

Date

The treatment court approves this person as a collector for our circuit. This approval does not mean the Judiciary shall be liable for their actions in performance of these duties.

[Signature]

Drug Court Judge/Coordinator

26

Circuit

5.21.24

Date

OCCS Inc

OSCA 14-042 Treatment Court Specialized Service Providers

Office of State Courts Administrator



Collector Guideline Acceptance Form OSCA 14-042

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Nora Ramsey Nora Ramsey July 31, 2023
Collector Printed name Signature Date

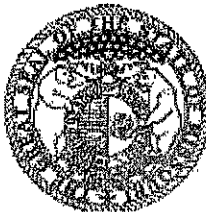
The treatment court approves this person as a collector for our circuit. This approval does not mean the judiciary shall be liable for their actions in performance of these duties.

[Signature] 25th 7-31-23
Drug Court Judge/Coordinator Circuit Date

OFFEROR NAME: O.C.C.S. Inc

OSCA 18-007
Collector Guideline Acceptance Form

Office of State Courts Administrator



I verify I have read and will abide by the Missouri Collector Guidelines. I further understand failure to follow these guidelines may result in the termination of my contract with the Office of State Courts Administrator and the court.

☐ I am a commissioned law enforcement officer by the state of Missouri.

☐ I understand that I will provide a copy of my POST certification to verify my law enforcement commission in the state of Missouri.

☐ I am not a commissioned officer.

☐ I have provided a completed background check, and

☐ I have registered with the Family Care Safety Registry (FCSR), and I have provided a copy of the results of the FCSR background screening results

Jessica Reid

Collector Printed name

Jessica Reid

Signature

6/29/22

Date

The treatment court approves this person as a collector for our circuit. This approval does not mean the judiciary shall be liable for their actions in performance of these duties.

[Signature]

Drug Court Judge/Coordinator

25 PHELPS

Circuit

7/18/2022

Date

OCCS Inc

OSCA 18-007-05, Contract Renewal 001, Drug/Alcohol Testing Equipment, Monitoring Equipment, & Services

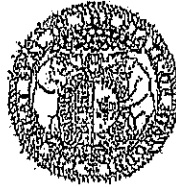
Exhibit A

CONTRACTOR NAME:

O.C.C.S. Inc.

OSCA 18-007-05

Collector Guideline Acceptance Form

Office of State Courts Administrator

I verify I have read and will abide by the Missouri Collector Guidelines. I further understand failure to follow these guidelines may result in the termination of my contract with the Office of State Courts Administrator and the court.

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☐ I understand that I will provide a copy of my POST certification to verify my law enforcement commission in the state of Missouri.

☒ I am not a commissioned officer.

☒ I have provided a completed background check, and ✓

☒ I have registered with the Family Care Safety Registry (FCSR), and I have provided a copy of the results of the FCSR background screening results ✓

Kirsten Dunn

Collector Printed name

Signature

0/24/18

Date

The treatment court approves this person as a collector for our circuit. This approval does not mean the judiciary shall be liable for their actions in performance of these duties.

Drug Court Judge/Coordinator

26th

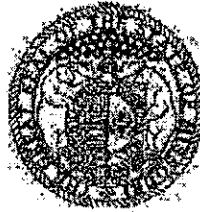
Circuit

Jun 1, 2018

Date

OCCS Inc.

Office of State Courts Administrator



Collector Guideline Acceptance Form OSCA 14-042

I verify I have read and will abide by the Missouri Collector Guidelines. I further understand failure to follow these guidelines may result in the termination of my contract with the Office of State Courts Administrator and the court.

I understand I will provide a completed background check at my expense, which shall include, but may not be limited to: employment history and references, fingerprint checks for open and closed federal and state criminal records and Sex Offender Registry. I will also register with the Family Care Safety Registry.

Kerri Heilig

Collector Printed name

Kerri Heilig

Signature

9/25/23

Date

The treatment court approves this person as a collector for our circuit. This approval does not mean the judiciary shall be liable for their actions in performance of these duties.

[Signature]

Drug Court Judge/Coordinator

26th

Circuit

9/29/23

Date

Office of State Courts Administrator



Collector Guideline Acceptance Form OSCA 14-042

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I understand I will provide a completed background check at my expense, which shall include, but may not be limited to: employment history and references, fingerprint checks for open and closed federal and state criminal records and Sex Offender Registry. I will also register with the Family Care Safety Registry.

Haley Manning
Collector Printed name

Haley Manning
Signature

Date 5-20-25

The treatment court approves this person as a collector for our circuit. This approval does not mean the judiciary shall be liable for their actions in performance of these duties.

[Signature]

Drug Court Judge/Coordinator

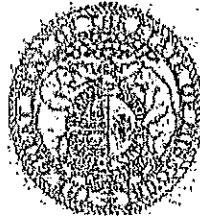
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Circuit

5/27/25

Date

Office of State Courts Administrator



Collector Guideline Acceptance Form OSCA 14-042

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Haley Manning
Collector Printed name

Haley Manning
Signature

Date 5-20-25

The treatment court approves this person as a collector for our circuit. This approval does not mean the judiciary shall be liable for their actions in performance of these duties.

[Signature]

2L

Drug Court Judge/Coordinator

Circuit

Date



Missouri Department of Health and Senior Services

P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010
RELAY MISSOURI for Hearing and Speech Impaired and Voice dial: 711



Sarah Willson
Director

Mike Kehoe
Governor

05/16/2025

OUTREACH CONSULTING & COUNSELING SERVICES

ATTN: SHELLIE DAVIS
215 E COMMERCIAL ST
LEBANON, MO 65536

FAMILY CARE SAFETY REGISTRY
Background Screening Results - Inquirer
Registrant: CARREL, JENNIFER
Registrant Number: 66773289

The Family Care Safety Registry (FCSR) received your request for a background screening on 05/16/2025. The background screening, confirmation #117821850945, conducted on 05/16/2025, indicated the following:

No finding reported in the background screening.

The results above were confirmed by searching the following state databases that contain Missouri data only, using the above registrant's name, date of birth and Social Security number:

- Criminal history records maintained by the MO State Highway Patrol
- Sex Offender Registry records maintained by the MO State Highway Patrol
- Child abuse/neglect records maintained by the MO Department of Social Services
- Foster parent licensure records maintained by the MO Department of Social Services
- Child care licensure records maintained by the MO Department of Elementary and Secondary Education
- Employee Disqualification List maintained by the MO Department of Health and Senior Services
- Employee Disqualification Registry maintained by the MO Department of Mental Health

A copy of this background screening has been provided to the individual registrant. If finding(s) were indicated, you may obtain specific information about these results by submitting your request in writing to the Missouri Department of Health and Senior Services, Family Care Safety Registry, PO Box 570, Jefferson City, MO, 65102. The request must be signed and must include your name, address, telephone number, the reason for requesting the information, the registrant's full name and Social Security number, and the confirmation number from the first paragraph above.

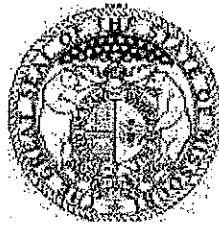
The FCSR provides background screening information for employment purposes only. Any person who uses the information obtained from the registry for any purpose other than that specifically provided for in sections 210.900 to 210.936 is guilty of a class B misdemeanor, RSMo §210.921.3. The FCSR bases criminal history identification on the name, Social Security number and date of birth provided by the inquirer, not by the use of fingerprints. Please be advised that you must contact your licensing representative or other agency contact to determine whether this background screening meets state agency requirements for licensure, certification or registration. If you have questions or need assistance, you may contact the FCSR's toll free call center at 866-422-6872, or visit our Internet site at <http://health.mo.gov/safety/fcsr/>.



PROMOTING HEALTH AND SAFETY

The Missouri Department of Health and Senior Services' vision is optimal health and safety for all Missourians, in all communities, for life.

Office of State Courts Administrator

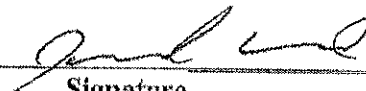


Collector Guideline Acceptance Form OSCA 14-042

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JENNIFER CARREL
Collector Printed name


Signature

5/12/25
Date

The treatment court approves this person as a collector for our circuit. This approval does not mean the judiciary shall be liable for their actions in performance of these duties.



Drug Court Judge/Coordinator

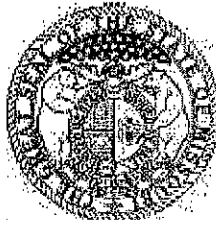
25

Circuit

5/30/25

Date

Office of State Courts Administrator



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JENNIFER CARREL [Signature] 5/12/25
Collector Printed name Signature Date

The treatment court approves this person as a collector for our circuit. This approval does not mean the judiciary shall be liable for their actions in performance of these duties.

[Signature] 26 5/29/25
Drug Court Judge/Coordinator Circuit Date

OFFEROR NAME:

OCCS Inc

OSCA 23-01792

Collector Guideline Acceptance Form

Office of State Courts Administrator



I verify I have read and will abide by the Missouri Collector Guidelines. I further understand failure to follow these guidelines may result in the termination of my contract with the Office of State Courts Administrator and the court.

- ☐ I am a commissioned law enforcement officer by the state of Missouri.
- ☐ I understand that I will provide a copy of my POST certification to verify my law enforcement commission in the state of Missouri.
- ☐ I am not a commissioned officer.
- ☒ I have provided a completed background check, and
- ☒ I have registered with the Family Care Safety Registry (FCSR), and I have provided a copy of the results of the FCSR background screening results

Kaden Scanlan

Kaden Scanlan

5-5-26

Collector Printed name

Signature

Date

The treatment court approves this person as a collector for our circuit. This approval does not mean the judiciary shall be liable for their actions in performance of these duties.

RC

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Drug Court Judge/Coordinator

Circuit

Date