

MEMORANDUM

TO: NWABSD Board of Education
Members

DATE: August 28, 2026

NUMBER: 27-013

FR: Office of the Superintendent

SUBJECT: Meraki Purchase

STRATEGIC PLAN/BOARD GOAL:

Goal 2: Operational Improvement

ABSTRACT:

Board approval is required for services that exceed \$50,000.

ISSUE:

At issue is for the Board to approve the purchase of Meraki licensing from Intellitech for a total amount not to exceed \$60,916.00.

BACKGROUND AND/OR PERTINENT INFORMATION:

Renewing all Meraki licensing from September 2026- September 2027 and it's for all the access points

These items have been budgeted using the Technology General funds.

ALTERNATIVES:

1. Approve the purchase of Meraki licensing from Intellitech for a total amount not to exceed \$60,916.00 as presented;
2. Do not approve the purchase of Meraki licensing as presented;
3. Take no final action.

ADMINISTRATION'S RECOMMENDATION:

The administration recommends Board approval of Meraki licensing from Intellitech for a total amount not to exceed \$60,916.00 as presented.

QUOTE

1652 Yeager Avenue
La Verne, CA 91750
(909) 394-5188
fax (909) 394-5190



fax (909) 394-5190				DATE	QUOTATION NO.	
				08/10/26	PW081026A-SP	
CONTACT		BILLING		ACCOUNT REP		
PAUL WOOD pwood@nwarctic.org 907-442-1830		Northwest Arctic School District 744 Third Ave /PO BOX 51 Kotzebue, AK 99752 Attn: Account Payable		Samantha Pilcher 909-480-4459 samantha@intelli-tech.com		
RFQ #		SHIP		PURCHASE ORDER NO		TERMS
		Northwest Arctic School District 744 Third Ave / PO BOX 51 Kotzebue, AK 99752 Attn: PAUL WOOD /AMY EAKIN				NET 30
				DEPARTMENT		FOB
						EMAIL
#	Qty	Part No.		ETA	Price	Extended
1	290	LIC-ENT-1YR		EMAIL	\$ 102.00	\$ 29,580.00
POP SEPT 2026-SEPT 2027						

NOTE: PRICING AND AVAILABILITY IS SUBJECT TO CHANGE WITHOUT NOTICE

Sub-total	\$ 29,580.00
Sales Tax	\$ -
Estimated Freight	N/C
E-Waste Fee	\$ -
Grand Total	\$ 29,580.00

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				PURCHASE ORDER NO	TERMS
					NET 30
				DEPARTMENT	FOB
					EMAIL

#	Qty	Part No.		ETA	Price	Extended
1	51	LIC-MS120-48FP-1YR	Meraki MS120-48FP Enterprise License and Support, 1 Year	EMAIL	\$ 147.00	\$ 7,497.00
2	14	LIC-MS220-48FP-1YR	Meraki MS220-48FP Enterprise License and Support, 1YR	EMAIL	\$ 229.00	\$ 3,206.00
3	1	LIC-MS225-24P-1YR	Meraki MS225-24P Enterprise License and Support, 1YR	EMAIL	\$ 175.00	\$ 175.00
4	40	LIC-MS225-48FP-1YR	Meraki MS225-48FP Enterprise License and Support, 1YR	EMAIL	\$ 275.00	\$ 11,000.00
5	2	LIC-MS250-48FP-1YR	Meraki MS250-48FP Enterprise License and Support, 1YR	EMAIL	\$ 375.00	\$ 750.00
6	1	LIC-MS320-24P-1YR	Meraki MS320-24P Enterprise License and Support, 1YR	EMAIL	\$ 191.00	\$ 191.00
7	9	LIC-MS320-48FP-1YR	Meraki MS320-48FP Enterprise License and Support, 1YR	EMAIL	\$ 327.00	\$ 2,943.00
8	1	LIC-MS350-48FP-1YR	Meraki MS350-48FP Enterprise License and Support, 1YR	EMAIL	\$ 410.00	\$ 410.00
9	1	LIC-MS350-48LP-1YR	Meraki MS350-48LP Enterprise License and Support, 1YR	EMAIL	\$ 365.00	\$ 365.00
10	1	LIC-MX250-ENT-1YR	Meraki MX250 Enterprise License and Support, 1YR	EMAIL	\$ 2,894.00	\$ 2,894.00
11	1	LIC-MX75-ENT-1Y	Meraki MX75 Enterprise License and Support, 1YR	EMAIL	\$ 458.00	\$ 458.00
12	1	LIC-MX95-ENT-1Y	Meraki MX95 Enterprise License and Support, 1YR	EMAIL	\$ 1,447.00	\$ 1,447.00
POP SEPT 2026-SEPT 2027						

NOTE: PRICING AND AVAILABILITY IS SUBJECT TO CHANGE WITHOUT NOTICE

Sub-total	\$ 31,336.00
Sales Tax	\$ -
Estimated Freight	N/C
E-Waste Fee	\$ -
Grand Total	\$ 31,336.00

Northwest Arctic Borough School District

P. O. Box 51 Kotzebue, AK 99752

MEMORANDUM OF AGREEMENT (MOA)

MOA's for more than \$50,000 must be approved by the School Board prior to start of Contract

In a fiscal year MOA's to the same Contractor totaling more than \$50,000 must be approved by the School Board prior to start of Contract

Remember to follow federal procurement regulations when using federal funds to support the MOA

TAB BETWEEN FIELDS

Contractor: INTELLI-TECH

Name of Company

MOA Control #:

Contact Brad Eisel for #

Address: 1652 Yeager Avenue

Street or POB

Lo Verne

City

CA

State

91750

Zip + four

909

394-5188

Phone #

909-394-

5190

Fax #

Samantha@intelli-tech.com

E-mail Address

Federal ID #:

Enter without Dashes

Or

Soc. Sec. #:

Enter without Dashes

Alaska Business License #:

09/01/2026

Start Date (mmddyy)

09/01/2027

End Date (mmddyy)

☐ W-9 Attached

☐ W-9 Submitted Previously

Verify with Brad Eisel

Contractor Agrees To: These are Meraki supports for 290 access points and 123 enterprise switches. This is a 1-year license that will need to be renewed every year.

If additional space is needed, indicate here ☐ **See attachment**

District Contact Person: Savio Dias

Phone #: 907-442-1830

Ext

Email Address: sdias@nwarctic.org

Fax #: (907)

District Agrees To:

If additional space is needed, indicate here ☐ **See attachment**

Payment Terms:

If additional space is needed, indicate here ☐ **See attachment**

Enter Account Code as: XXX.XXX.XXX.XXX.410

Amount

Account #: 100.099.360.000.450

\$ 29,580.00

Account #: 100.099.360.000.450

\$ 31,336.00

Total:

\$ 60,916.00

Additional Conditions/Provisions

A - GENERAL INFORMATION

1. All associated costs, not limited to fees and reimbursables, must be included in the MOA. All MOA's for more than \$50,000 require prior School Board approval before Contractor provides any service. (BP 3312)
2. The account to be charged must be determined and approved by the individual with budget authority prior to submission of the MOA to Brad Eisel. It is important to verify funds are available before submitting.
3. Prior to the starting date of the contracted services and/or activities, the Contractor and NWABSD must sign the MOA. The Contractor is not to be given a notice to proceed unless all the appropriate parties have approved and signed the MOA.
4. The District Contact Person will be responsible for obtaining the Contractor's signature and submitting the original MOA to Brad Eisel along with a W-9 for tax purposes.
5. The District Contact Person must approve for payment all Contractor invoices and verify receipts and backup documentation prior to submission for payment to the Accounting Department.
6. The Contractor must pay all expenses, and submit receipts for reimbursement, (airline receipt, hotel receipt, other travel related expenses). Mileage tickets are not eligible for reimbursement.
7. MOA's cannot be used for employee contracts or work agreements.
8. Any NWABSD employee who authorizes services prior to the required approvals may be subject to disciplinary action up to and including termination. (BP 4118, 4218)

B - CONTRACTOR RESPONSIBILITIES

1. Check the MOA for contents and completeness. If the terms are agreeable, sign the agreement and return to the individual named as the Contact Person.
2. In accordance with the payment terms set forth on page 1, the Contractor shall submit a detailed invoice with the dates the services were provided and the appropriate documentation (copies of itineraries, airline tickets, hotel bills, ground transportation, etc.) to the District Contact Person for approval of payment. This **MOA Control #:** _____ must be on the invoice.
3. As a condition of performance, the Contractor must pay all federal, state, and local taxes incurred by the Contractor.
4. A W-9 must be on file with the NWABSD or submitted with this MOA.
5. The Contractor must provide proof of any liability insurance coverage required on page 1 of this MOA.
6. To the extent allowed by law, the Contractor shall indemnify, defend, and hold the NWABSD harmless from any liability resulting from or arising out of the acts of the Contractor in the performance of this MOA.
7. This contract may be terminated by either party with a 30-day written notice.

I HEREBY ACCEPT THIS MOA AND THE CONDITIONS/PROVISIONS CONTAINED HEREIN.

Any changes in the terms of this MOA must be on an ADDENDUM FORM prior to any services being performed. The ADDENDUM FORM must be approved by all parties.

Natalie Dickey

Director of Administrative Services – Fiscal Approval

Director's Signature

Date (mm/dd/yy)

Terri Walker

Superintendent –Authorized Signer NWABSD

Superintendent's Signature

Date (mm/dd/yy)

Samantha Leskosky

Contractor

Contractor's Signature

Date (mm/dd/yy)