



COMMISSIONERS COURT  
COMMUNICATION

COURT ORDER NUMBER 144851

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DATE: 3/11/2025

SUBJECT: **APPROVAL OF INVOICE PAYMENT - TEST DEVELOPMENT SERVICE -  
COMMUNITY SUPERVISION CORRECTIONS DEPARTMENT -  
TAPDANCE LIVE, LLC**

**COMMISSIONERS COURT ACTION REQUESTED**

It is requested that the Commissioners Court approve invoice payment for Test Development Service, for Community Supervision Corrections Department, to Tapdance Live, LLC. for \$2,000.00.

**BACKGROUND**

On January 31, 2025, Community Supervision Corrections Department (CSCD) notified Purchasing that vendor, Tapdance Live, LLC, had performed services before a purchase order was issued.

The department has been advised that a purchase order is required for these services. In a letter sent on February 6, 2025, the vendor has been advised to not fill orders without first receiving a purchase order.

**FISCAL IMPACT**

Funding in the amount of \$2,000.00 is available in account C0010-2004 GCJAD-Basic Supervision/2510500000 CSCD/569011 Professional Services.

SUBMITTED BY	Purchasing	PREPARED BY:	Kehinde Olugbile
		APPROVED BY:	Christopher Lax, CPSM, CPSD, CPCP

**ESTIMATE**

Tapdance Live LLC  
PO Box 5262  
Aiken, SC 29804

donna.duquette@tapdancelive.com  
(800) 569-7371  
www.tapdancelive.com



**Bill to**  
Robert Burger  
Tarrant County CSCD  
200 W. Belknap Street  
Fort Worth, TX 76102

**Ship to**  
Robert Burger  
Tarrant County CSCD  
200 W. Belknap Street  
Fort Worth, TX 76102

**Estimate details**

Estimate no.: 1139  
Estimate date: 01/30/2025  
Expiration date: 02/28/2025

#	Date	Product or service	Description	Qty	Rate	Amount
1.		<b>Test Development Service</b>	Development of Essay Questionnaires for Counselor and Officer Roles	1	\$2,000.00	\$2,000.00
					<b>Total</b>	<b>\$2,000.00</b>
					Expiry date	02/28/2025

**Accepted date**

**Accepted by**



## TAKINGS IMPACT ASSESSMENT CHECKLIST

Complete this form for any county action that involves the adoption of a regulation, policy, guideline, court resolution, or order.

Project/Regulation Name: Approval of Invoice Payment - Test Development Service - Community Supervision Corrections Department - Tapdance Live, LLC

County Department: PURCHASING

Contact Person: Melissa Lee, C.P.M., A.P.P.

Phone Number for Contact Person: (817) 884-3245

Type of TIA Performed: SHORT TIA or FULL TIA. Circle one after answering the questions in Sections II and III below.

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### I. Stated Purpose

Attach to this checklist an explanation of the purpose of the regulation, policy, guideline, court resolution, or order.

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**Note: The remainder of this Takings Impact Assessment Checklist should be completed in consultation with the Criminal District Attorney's Office.**

### II. Potential Effect on Private Real Property

1. Does the county action require a physical invasion, occupation, or dedication of real property?

Yes \_\_\_\_\_ No √

2. Does the county action limit or restrict a real property right, even partially, or temporarily?

Yes \_\_\_\_\_ No √

If you answered yes to either question, go to Section III. If you answered no to both, STOP HERE and circle SHORT TIA at the top of the form.

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