

**Request for Taxpayer
Identification Number and Certification**

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

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Donald Keith Williams

2 Business name/disregarded entity name, if different from above
Cleveland Trophy & Award

3 Check appropriate box for federal tax classification; 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) ▶ _____
Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.
☐ 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.)
120 N. Sharpe Ave

6 City, state, and ZIP code
Cleveland, MS 38732

7 List account number(s) here (optional)

Requester's name and address (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 Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number								
			-					

or

Employer identification number								
4	6	-	3	2	2	5	3	6 1

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 and 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 on page 3.

Sign Here **Signature of U.S. person** ▶ *Donald Keith Williams* **Date** ▶ *7-28-17*

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

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:

- Form 1099-INT (interest earned or paid)

on stocks or mutual funds)
prizes, awards, or gross proceeds)
and certain other transactions by

actions)
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?* on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

DATE: 7/19/2017

Page 6

INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00120254

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			TWO (2) YEAR CONTRACT FOR AWARD PLAQUES TO BE ORDERED ON AN AS-NEEDED BASIS FOR THE JEFFERSON PARISH DEPARTMENT OF PARKS AND RECREATION		
1	7,000.00	EA	0010 - Plaque 5 inch by 7 inch	6.50	45,500
2	200.00	EA	0020 Plaque 7 inch by 9 inch	10.10	2,020
3	800.00	EA	0030 Plaque 8 inch by 10 inch	12.60	10,080
4	10.00	EA	0040 Plaque 9 inch by 12 inch	16.30	163
5	10.00	EA	0050 Plaque 10 inch by 14 inch	19.85	198.50
6	175.00	EA	0060 Plaque- Cost of each additional letter and or number above 50 letters	Ø	Ø
			included on each plaque for item numbers 0010 through 0050.		
7	400.00	EA	0070 Plaque 5 inch by 7 inch	6.50	2,600
8	150.00	EA	0080 Plaque 8 inch by 10 inch	12.60	1,890
9	10.00	EA	0090 Plaque 9 inch by 12 inch	16.30	163
10	10.00	EA	0100 Plaque 10 inch by 14 inch	19.85	198.50
11	175.00	EA	0110 Plaque - Cost of additional letter on each plaque for item numbers 0070 through 0100.	Ø	Ø
					<u>\$ 62,813</u>

REJECTED
ALL BID REQUIREMENTS NOT MET

**Insurance Declaration Affidavit
Worker's Compensation**

AFFIDAVIT

STATE OF Mississippi
PARISH/COUNTY OF Bolivar

BEFORE ME, the undersigned authority, personally came and appeared,
Keith Williams, (Affiant) who after being duly sworn, deposed and said that he/she
is the fully authorized Agent of Cleveland Trophy (Entity), the
party who submitted a Proposal/Contract/Bid/RFP/SOQ No. 50-00120554 to Jefferson Parish.

Affiant further said:

- (1) That affiant has no employees in which Worker's Compensation Insurance is required pursuant to state law.
- (2) That if affiant hires employees such that they would be required under state law to obtain Worker's Compensation Insurance, affiant will notify Jefferson Parish and obtain the proper coverage.

Keith Williams
Signature of Affiant

Keith Williams
Printed Name of Affiant

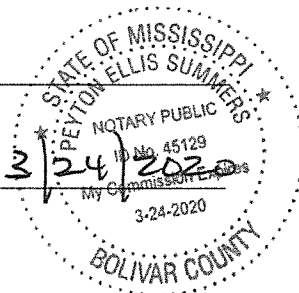
SWORN AND SUBSCRIBED TO BEFORE ME
ON THE 27 DAY OF July, 2017.

Payton Ellis Summers
Notary Public

Payton Ellis Summers
Printed Name of Notary

45129
Notary/Bar Roll Number

My commission expires



REJECTED
ALL BID REQUIREMENTS NOT MET

**Insurance Declaration Affidavit
Automotive**

AFFIDAVIT

STATE OF Mississippi
PARISH/COUNTY OF Bolivar

BEFORE ME, the undersigned authority, personally came and appeared,
Keith Williams, (Affiant) who after being duly sworn, deposed and said that he/she
is the fully authorized Agent of Cleveland Trophy (Entity), the
party who submitted a Proposal/Contract/Bid/RFP/SOQ No. 50-00120-254, to Jefferson Parish.

Affiant further said:

- (1) That entity does not own automobiles or use automobiles in the furtherance of the services provided under the contract.
- (2) That if the entity obtains automobiles or begins to use automobiles in the furtherance of the services provided under the contract, affiant will notify Jefferson Parish and obtain the proper coverage.

Keith Williams
Signature of Affiant

Keith Williams
Printed Name of Affiant

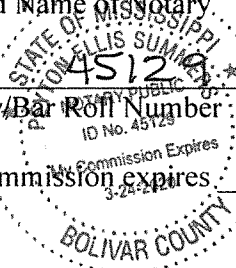
SWORN AND SUBSCRIBED TO BEFORE ME
ON THE 27 DAY OF July, 2017.

Peyton Ellis Summers
Notary Public

Peyton Ellis Summers
Printed Name of Notary

Notary Bar Roll Number

My commission expires



3/24/2020

Non-Public Works Bid

AFFIDAVIT

STATE OF Mississippi

PARISH/COUNTY OF Bolivar

BEFORE ME, the undersigned authority, personally came and appeared: Keith Williams, (Affiant) who after being by me duly sworn, deposed and said that he/she is the fully authorized Agent of Cleveland Township (Entity), the party who submitted a bid in response to Bid Number 50-0012015 to the Parish of Jefferson.

Affiant further said:

Campaign Contribution Disclosures

(Choose A or B, if option A is indicated please include the required attachment):

Choice A _____ Attached hereto is a list of all campaign contributions, including the date and amount of each contribution, made to current or former elected officials of the Parish of Jefferson by Entity, Affiant, and/or officers, directors and owners, including employees, owning 25% or more of the Entity during the two-year period immediately preceding the date of this affidavit or the current term of the elected official, whichever is greater. Further, Entity, Affiant, and/or Entity Owners have not made any contributions to or in support of current or former members of the Jefferson Parish Council or the Jefferson Parish President through or in the name of another person or legal entity, either directly or indirectly.

Choice B X there are NO campaign contributions made which would require disclosure under Choice A of this section.

Debt Disclosures

(Choose A or B, if option A is indicated please include the required attachment):

Choice A _____ Attached hereto is a list of all debts owed by the affiant to any elected or appointed official of the Parish of Jefferson, and any and all debts owed by any elected or appointed official of the Parish to the Affiant.

Choice B X There are **NO** debts which would require disclosure under Choice A of this section.

Affiant further said:

That Affiant has employed no person, corporation, firm, association, or other organization, either directly or indirectly, to secure the public contract under which he received payment, other than persons regularly employed by the Affiant whose services in connection with the construction, alteration or demolition of the public building or project or in securing the public contract were in the regular course of their duties for Affiant; and

[The remainder of this page is intentionally left blank.]

That no part of the contract price received by Affiant was paid or will be paid to any person, corporation, firm, association, or other organization for soliciting the contract, other than the payment of their normal compensation to persons regularly employed by the Affiant whose services in connection with the construction, alteration or demolition of the public building or project were in the regular course of their duties for Affiant.

Kent Williams
Signature of Affiant

Kent Williams
Printed Name of Affiant

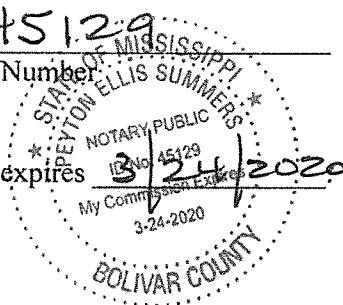
SWORN AND SUBSCRIBED TO BEFORE ME
ON THE 27 DAY OF July, 2017

Peyton Ellis Summers
Notary Public

Peyton Ellis Summers
Printed Name of Notary

45129
Notary/Bar Roll Number

My commission expires 3/24/2020



Notice: Jefferson Parish logo will be much more crisp after we receive a high resolution image.



REJECTED
ALL BID REQUIREMENTS NOT MET

Bid Number 50 - 00120254

**TWO (2) YEAR CONTRACT FOR SUPPLY OF AWARD PLAQUES FOR THE
JEFFERSON PARISH DEPARTMENT OF PARKS AND RECREATION**

August 3, 2017 at 2:00 pm

ATTENTION VENDORS!!!

**Please review all pages and respond accordingly, complying with all provisions
in the technical specifications and Jefferson Parish Instructions for Bidders and
General Terms and Conditions. All bids must be received in the Purchasing
Department by the bid due date and time.**

**Jefferson Parish Purchasing Department
200 Derbigny Street
General Government Building, Suite 4400
Gretna, LA 70053
Buyer Name: Ms. Sidney Duffy, Buyer II
Buyer Email: sduffy@jeffparish.net
Buyer Phone: 504.364.2682**

DATE: 7/19/2017

Page: 5

BID NO.: 50-00120254

BID FORM
Non Public Works

All Public Work Projects are required to use the Louisiana Uniform Public Work Bid Form

All prices must be held firm unless an escalation provision is requested in this bid. Jefferson Parish will allow one escalation during the term of the contract, which may not exceed the U.S. Bureau of Labor Statistics National Index for all Urban Consumers, unadjusted 12 month figure. The most recently published figure issued at the time an adjustment is requested will be used. A request must be made in writing by the vendor, and the escalation will only be applied to purchases made after the request is made.

Are you requesting an escalation provision?

YES _____ NO _____

MAXIMUM ESCALATION PERCENTAGE REQUESTED _____ %

INITIAL BID PRICES WILL REMAIN FIRM THROUGH THE DATE OF _____

For the purposes of comparison of bids when an escalation provision is requested, Jefferson Parish will apply the maximum escalation percentage quoted by the bidder to the period to which it is applied in the bid. The initial price and the escalation will be used to calculate the total bid price. It will be assumed, for comparison of prices only, that an equal amount of material or labor is purchased each month throughout the entire contract.

DELIVERY: FOB JEFFERSON PARISH

INDICATE DELIVERY DATE ON EQUIPMENT AND SUPPLIES

10 Days

LOUISIANA CONTRACTOR'S LICENSE NO.: (if applicable) _____

THIS SECTION MUST BE COMPLETED BY BIDDER:

FIRM NAME: AAA TRUPHIES

ADDRESS: 3813 Florida Ave

CITY, STATE: Kenner LA ZIP: 70065

TELEPHONE: (504) 467-7384 FAX: 504 467-3932

EMAIL ADDRESS: 674 Willie@Gmail.com

In the event that addenda are issued with this bid, bidders MUST acknowledge all addenda on the bid form. Bidder must acknowledge receipt of an addendum on the bid form as indicated. Failure to acknowledge any addendum on the bid form will result in bid rejection.

Acknowledge Receipt of Addenda: NUMBER: _____

NUMBER: _____

NUMBER: _____

NUMBER: _____

REJECTED
ALL BID REQUIREMENTS NOT MET

TOTAL PRICE OF ALL BID ITEMS: \$ 30,352.00

AUTHORIZED SIGNATURE: ~~\$30,352.00~~ Johnnie Sullivan

Johnnie Sullivan
Printed Name

TITLE: owner.

SIGNING INDICATES YOU HAVE READ AND COMPLY WITH THE INSTRUCTIONS AND CONDITIONS.

NOTE: All bids should be returned with the BID NUMBER and BID OPENING DATE indicated on the outside of the envelope submitted to the Purchasing Department.

INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00120254

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			TWO (2) YEAR CONTRACT FOR AWARD PLAQUES TO BE ORDERED ON AN AS-NEEDED BASIS FOR THE JEFFERSON PARISH DEPARTMENT OF PARKS AND RECREATION		
1	7,000.00	EA	0010 - Plaque 5 inch by 7 inch	3.15	22,050.00
2	200.00	EA	0020 Plaque 7 inch by 9 inch	5.45	1,090.00
3	800.00	EA	0030 Plaque 8 inch by 10 inch	6.00	4,800.00
4	10.00	EA	0040 Plaque 9 inch by 12 inch	6.25	62.50
5	10.00	EA	0050 Plaque 10 inch by 14 inch	6.35	63.50
6	175.00	EA	0060 Plaque- Cost of each additional letter and or number above 50 letters included on each plaque for item numbers 0010 through 0050.	0	0
7	400.00	EA	0070 Plaque 5 inch by 7 inch	3.15	1,260.00
8	150.00	EA	0080 Plaque 8 inch by 10 inch	6.00	900.00
9	10.00	EA	0090 Plaque 9 inch by 12 inch	6.25	62.50
10	10.00	EA	0100 Plaque 10 inch by 14 inch	6.35	63.50
11	175.00	EA	0110 Plaque - Cost of additional letter on each plaque for item numbers 0070 through 0100.	0	0

CORPORATE RESOLUTION

Sole Proprietor

EXCERPT FROM MINUTES OF MEETING OF THE BOARD OF DIRECTORS OF

INCORPORATED.

AT THE MEETING OF DIRECTORS OF _____
INCORPORATED, DULY NOTICED AND HELD ON _____,
A QUORUM BEING THERE PRESENT, ON MOTION DULY MADE AND SECONDED. IT
WAS:

RESOLVED THAT _____, BE AND IS HEREBY
APPOINTED, CONSTITUTED AND DESIGNATED AS AGENT AND ATTORNEY-IN-
FACT OF THE CORPORATION WITH FULL POWER AND AUTHORITY TO ACT ON
BEHALF OF THIS CORPORATION IN ALL NEGOTIATIONS, BIDDING, CONCERNS
AND TRANSACTIONS WITH THE PARISH OF JEFFERSON OR ANY OF ITS AGENCIES,
DEPARTMENTS, EMPLOYEES OR AGENTS, INCLUDING BUT NOT LIMITED TO, THE
EXECUTION OF ALL BIDS, PAPERS, DOCUMENTS, AFFIDAVITS, BONDS, SURETIES,
CONTRACTS AND ACTS AND TO RECEIVE ALL PURCHASE ORDERS AND NOTICES
ISSUED PURSUANT TO THE PROVISIONS OF ANY SUCH BID OR CONTRACT, THIS
CORPORATION HEREBY RATIFYING, APPROVING, CONFIRMING, AND ACCEPTING
EACH AND EVERY SUCH ACT PERFORMED BY SAID AGENT AND ATTORNEY-IN-
FACT.

I HEREBY CERTIFY THE FOREGOING TO BE
A TRUE AND CORRECT COPY OF AN
EXCERPT OF THE MINUTES OF THE ABOVE
DATED MEETING OF THE BOARD OF
DIRECTORS OF SAID CORPORATION, AND
THE SAME HAS NOT BEEN REVOKED OR
RESCINDED.

John L. Sullivan

~~SECRETARY-TREASURER~~

7/31/17

DATE

**Insurance Declaration Affidavit
Worker's Compensation**

AFFIDAVIT

STATE OF LA

PARISH/COUNTY OF Jefferson

BEFORE ME, the undersigned authority, personally came and appeared, _____, (Affiant) who after being duly sworn, deposed and said that he/she is the fully authorized Johnie Sullivan of AAA Trophy (Entity), the party who submitted a Proposal/Contract/Bid/RFP/SOQ No. SO-00120254, to Jefferson Parish.

Affiant further said:

- (1) That affiant has no employees in which Worker's Compensation Insurance is required pursuant to state law.
- (2) That if affiant hires employees such that they would be required under state law to obtain Worker's Compensation Insurance, affiant will notify Jefferson Parish and obtain the proper coverage.

Johnie R. Sullivan
Signature of Affiant

JOHNIE L SULLIVAN
Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

ON THE 31ST DAY OF JULY, 2017.

[Signature]
Notary Public

VERNON J. WATKINS II
Printed Name of Notary

JP 761
Notary/Bar Roll Number

My commission expires March 2021

**Insurance Declaration Affidavit
Automotive**

AFFIDAVIT

STATE OF LA

PARISH/COUNTY OF JEFFERSON

BEFORE ME, the undersigned authority, personally came and appeared, _____, (Affiant) who after being duly sworn, deposed and said that he/she is the fully authorized Johnie Sullivan of AAATrophies (Entity), the party who submitted a Proposal/Contract/Bid/RFP/SOQ No. SO-00120254, to Jefferson Parish.

Affiant further said:

- (1) That entity does not own automobiles or use automobiles in the furtherance of the services provided under the contract.
- (2) That if the entity obtains automobiles or begins to use automobiles in the furtherance of the services provided under the contract, affiant will notify Jefferson Parish and obtain the proper coverage.

Johnie R. Sullivan
Signature of Affiant

Johnie R. Sullivan
Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

ON THE 31ST DAY OF JULY, 2017.

[Signature]
Notary Public

[Signature]
Printed Name of Notary

JP 96-1
Notary/Bar Roll Number

My commission expires 11/1/2019

Non-Public Works Bid

AFFIDAVIT

STATE OF LA

PARISH/COUNTY OF JEFFERSON

BEFORE ME, the undersigned authority, personally came and appeared: _____
_____, (Affiant) who after being by me duly sworn, deposed and said that
he/she is the fully authorized Johnie Sullivan of MM Trophies (Entity),
the party who submitted a bid in response to Bid Number 56-00120254, to the Parish of
Jefferson.

Affiant further said:

Campaign Contribution Disclosures

(Choose A or B, if option A is indicated please include the required attachment):

Choice A _____ Attached hereto is a list of all campaign contributions, including the date and amount of each contribution, made to current or former elected officials of the Parish of Jefferson by Entity, Affiant, and/or officers, directors and owners, including employees, owning 25% or more of the Entity during the two-year period immediately preceding the date of this affidavit or the current term of the elected official, whichever is greater. Further, Entity, Affiant, and/or Entity Owners have not made any contributions to or in support of current or former members of the Jefferson Parish Council or the Jefferson Parish President through or in the name of another person or legal entity, either directly or indirectly.

Choice B ☒ there are NO campaign contributions made which would require disclosure under Choice A of this section.

Debt Disclosures

(Choose A or B, if option A is indicated please include the required attachment):

Choice A _____ Attached hereto is a list of all debts owed by the affiant to any elected or appointed official of the Parish of Jefferson, and any and all debts owed by any elected or appointed official of the Parish to the Affiant.

Choice B _____ There are NO debts which would require disclosure under Choice A of this section.

Affiant further said:

That Affiant has employed no person, corporation, firm, association, or other organization, either directly or indirectly, to secure the public contract under which he received payment, other than persons regularly employed by the Affiant whose services in connection with the construction, alteration or demolition of the public building or project or in securing the public contract were in the regular course of their duties for Affiant; and

[The remainder of this page is intentionally left blank.]

That no part of the contract price received by Affiant was paid or will be paid to any person, corporation, firm, association, or other organization for soliciting the contract, other than the payment of their normal compensation to persons regularly employed by the Affiant whose services in connection with the construction, alteration or demolition of the public building or project were in the regular course of their duties for Affiant.

John R. Sullivan
Signature of Affiant

John R. Sullivan
Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

ON THE 31ST DAY OF JULY, 2017.

[Signature]
Notary Public

VERNA J. WATKINS
Printed Name of Notary

JP-76-1
Notary/Bar Roll Number

My commission expires March 2021.

USAA GENERAL INDEMNITY COMPANY

(A Stock Insurance Company)

9800 Fredericksburg - San Antonio, Texas 78288

LOUISIANA AUTO POLICY

RENEWAL DECLARATIONS

RENEWAL DECLARATIONS
(ATTACH TO PREVIOUS POLICY)

Named Insured and Address

JOHNIE L SULLIVAN
3813 FLORIDA AVE
KENNER LA 70065-3033

ADDL INFO ON NEXT PAGE MAIL MCH-M-I

State	02 03	Veh	POLICY NUMBER
LA	072072	Terr	03860 06 20G 7101 9
POLICY PERIOD: (12:01 A.M. standard time)			
EFFECTIVE JUL 07 2017 TO JAN 07 2018			

01 JOHNNIE L SULLIVAN OPERATORS

Description of Vehicle(s)

VEH	YEAR	TRADE NAME	MODEL	BODY TYPE	ANNUAL MILEAGE	IDENTIFICATION NUMBER	VEH USE*	WORK/SCHOOL	
							SYM	Miles One Way	Day Per Week
02	95	GMC	1500 EXT CAB	2+ DOOR	10000	2GTEC19ZXS1589215		P	
03	16	SUBARU	OUTBACK	SW	3000	4S4BSBLC4G3320429		P	

The Vehicle(s) described herein is principally garaged at the above address unless otherwise stated. *W/C=Work/School; B=Business; F=Farm; P=Pleasure

VEH 02 KENNER LA 70065-3033

VEH 03 KENNER LA 70065-3033

This policy provides ONLY those coverages where a premium is shown below. The limits shown may be reduced by policy provisions and may not be combined regardless of the number of vehicles for which a premium is listed unless specifically authorized elsewhere in this policy.

COVERAGES		LIMITS OF LIABILITY ("ACV" MEANS ACTUAL CASH VALUE)		VEH 02 6-MONTH D=DED AMOUNT	PREMIUM \$	VEH 03 6-MONTH D=DED AMOUNT	PREMIUM \$	VEH D=DED AMOUNT	PREMIUM \$	VEH D=DED AMOUNT	PREMIUM \$
PART A - LIABILITY											
BODILY INJURY		EA PER \$	100,000								
		EA ACC \$	200,000		154.30		165.49				
PROPERTY DAMAGE		EA ACC \$	50,000		60.93		63.57				
PART B - MEDICAL PAYMENTS											
		EA PER \$	10,000		10.07		20.30				
EXTENDED BENEFITS											
WAGE EARNER DISAB		\$1,000 PER 30-DAY	PERIOD								
ESSENTIAL SVCS DISAB		\$45 WK			4.57		6.17				
PART C - UNINSURED MOTORISTS											
BODILY INJURY		EA PER \$	100,000								
		EA ACC \$	200,000		56.54		51.45				
PROPERTY DAMAGE		EA ACC \$	25,000	D 250	12.28						
PART D - PHYSICAL DAMAGE COVERAGE											
COMPREHENSIVE LOSS		ACV LESS				D1000	21.67				
COLLISION LOSS		ACV LESS				D1000	130.02				
RENTAL REIMBURSEMENT											
STANDARD CLASS							26.61				
TOWING AND LABOR							7.26				

TOTAL PREMIUM - SEE FOLLOWING PAGE(S)

NDORSEMENTS: ADDED 07-07-17 - RSGPCW(01)
EMAIN IN EFFECT(REFER TO PREVIOUS POLICY)- ACCFOR(01) A099(01) A402LA(01)
5100LA(02)

INFORMATION FORMS: UW126R(05) IIRSGPCW(01) LAMIL(05) USAAGRP(04)

21

[illegible]

N WITNESS WHEREOF, we have caused this policy to be signed by our President and Secretary at San Antonio, Texas,
on this date MAY 31, 2017

Deneen Donnelly *S. Wayne Peacock*
Deneen Donnelly, Secretary S. Wayne Peacock, President



LOUISIANA
INSURANCE IDENTIFICATION CARD

18600

La. R.S. 32:863.1 requires that an operator of a motor vehicle produce upon demand by a law enforcement officer documentation of motor vehicle security which is required to be maintained within the vehicle at all times. Failure to comply may result in fines, revocation of registration privileges, and block against the renewal or issuance of a driver's license. Examine policy exclusions carefully. This form does not constitute any part of your insurance policy. THIS CARD MUST BE CARRIED IN THE VEHICLE AT ALL TIMES AS EVIDENCE OF INSURANCE.

Name JOHNIE L SULLIVAN

Policy Number 03860 06 20G7101 9

Effective Date 07/07/17

Expiration Date 01/07/18

EXCLUDED DRIVERS:

Year Make

NONE

1995 GMC

Vehicle Identification Number

2GTEC19ZXS1589215

USAA GENERAL INDEMNITY COMPANY

CONTACT US: 210-531-USAA(8722)

AGENT: N/A

OR 800-531-USAA

9800 Fredericksburg Road

San Antonio, Texas 78288

Additional copies available at usaa.com

Automobile Insurance Identification Card

We've issued an identification card as evidence of liability insurance for your vehicle(s). This card is valid only as long as liability insurance remains in force.

You may be required to produce your identification card at vehicle registration or inspection, when applying for a driver's license, following an accident or upon a law enforcement officer's request.

Keep a copy of the ID card in your vehicle at all times.

For your convenience, additional copies are available on usaa.com.

53LA2 Rev. 06-13

55059-0513__03

05/31/17



LOUISIANA
INSURANCE IDENTIFICATION CARD

18600

La. R.S. 32:863.1 requires that an operator of a motor vehicle produce upon demand by a law enforcement officer documentation of motor vehicle security which is required to be maintained within the vehicle at all times. Failure to comply may result in fines, revocation of registration privileges, and block against the renewal or issuance of a driver's license. Examine policy exclusions carefully. This form does not constitute any part of your insurance policy. THIS CARD MUST BE CARRIED IN TH VEHICLE AT ALL TIMES AS EVIDENCE OF INSURANCE.

Name JOHNIE L SULLIVAN

Policy Number 03860 06 20G7101 9

Effective Date 07/07/17

Expiration Date 01/07/18

EXCLUDED DRIVERS:

Year Make

NONE

2016 SUBARU

Vehicle Identification Number

4S4BSBLC4G3320429

USAA GENERAL INDEMNITY COMPANY

CONTACT US: 210-531-USAA(8722)

AGENT: N/A

OR 800-531-USAA

9800 Fredericksburg Road

San Antonio, Texas 78288

Additional copies available at usaa.com



CENTRALBIDDING
FROM CENTRAL AUCTION HOUSE

5000120254 AWARD PLAQUES, TWO YEAR CONTRACT
Jefferson Parish Government

Project documents obtained from www.CentralBidding.com

25-Jul-2017 09:31:35 AM

REJECTED
ALL BID REQUIREMENTS NOT MET



Bid Number 50 - 00120254

**TWO (2) YEAR CONTRACT FOR SUPPLY OF AWARD PLAQUES FOR THE
JEFFERSON PARISH DEPARTMENT OF PARKS AND RECREATION**

August 3, 2017 at 2:00 pm

ATTENTION VENDORS!!!

**Please review all pages and respond accordingly, complying with all provisions
in the technical specifications and Jefferson Parish Instructions for Bidders and
General Terms and Conditions. All bids must be received in the Purchasing
Department by the bid due date and time.**

**Jefferson Parish Purchasing Department
200 Derbigny Street
General Government Building, Suite 4400
Gretna, LA 70053
Buyer Name: Ms. Sidney Duffy, Buyer II
Buyer Email: sduffy@jeffparish.net
Buyer Phone: 504.364.2682**

BID #50-00120254 SPECIFICATIONS

TWO YEAR CONTRACT FOR SUPPLY OF AWARD PLAQUES FOR THE JEFFERSON PARISH DEPARTMENT OF PARKS AND RECREATION

The following specifications are applicable to Items 0010 through 0060 listed within this bid.

GENERAL SPECIFICATIONS:

The vendor shall supply all tools, materials, and equipment to provide awards as per specifications listed below.

Vendor shall provide delivery service of all awards and or plaques to an appropriate site as designated by the Department of Parks and Recreation, 6921 Saints Drive, Metairie, LA 70003 or 7437 Lapalco Blvd., Marrero, LA 70072.

Vendor will box all awards by teams for easy access, and to avoid problems of sorting.

Delivery will be made within two weeks of issuance of order. Orders are to be in written form only and from the Main Business Office of the Department of Parks and Recreation.

AWARDS SPECIFICATIONS:

All awards will be on plaques made of legen wood, or equal. Legen Wood is imitation wood with cherry wood finish. Plaques shall be completely finished, front, back, and sides with wood grain finish. Plaque size will vary. All plaques must be five eights inch thick.

METAL MATERIALS:

Vendor shall supply aluminum plating adjusted according to size of the individual plaque as ordered, to be no less than one half inch smaller than the wood grain base. Two different colors of metal plates shall be supplied. One shall be silver aluminum, and the other shall be gold aluminum. Plates will be attached via appropriate decorative type fasteners, either nail and or screw. No glue shall be acceptable as a fastening device. All corners on metal plate shall be crimped for appearance purposes.

The Department of Parks and Recreation will provide different types of logos. Each will be black on white for vendors use. It shall be the responsibility of the vendor at his expense to expand and/or reduce the logo based on the size of the plaque as indicated in the order by the Department of Parks and Recreation.

Logo and lettering shall be applied by one of the following processes. Electric heat press system, engraving or photo lathe engraving. Lettering shall be at the discretion of the Department of Parks and Recreation corresponding to the size of the plaque. All lettering shall be provided as per the request. No abbreviations will be allowed for any reason.

Lettering shall be of the highest clarity. Hazy or fuzzy lettering is not acceptable.

Each award shall be composed of a minimum of approximately 50 letters which shall be included in the base bid. Each additional letter and/or number shall be bid independently with a flat cost established for each letter and or number in excess of 50 as mentioned above.

Each award shall be wrapped with a clear plastic material to prevent scratching and other damage prior to delivery.

BID #50-00120254 SPECIFICATIONS

Within ten (10) days from notification after bid opening date all proposed vendors may be required to submit a sample of a five inch by seven inch size plaque showing the designated logo along with the following information for inspection purposes:

DIXIE YOUTH RUNNER UP

This shall be at the expense of the vendor. Failure to submit sample shall be cause to reject bid.

Sample Logo Design is included.



BID #50-00120254 SPECIFICATIONS

TWO YEAR CONTRACT FOR SUPPLY OF AWARD PLAQUES FOR THE JEFFERSON PARISH DEPARTMENT OF PARKS AND RECREATION

The following specifications are applicable to items 0070 through 0110 listed within this bid.

GENERAL SPECIFICATIONS:

The vendor shall supply all tools, materials, and equipment to provide awards as per specifications listed below.

Vendor shall provide delivery service of all awards and or plaques to an appropriate site as designated by the Department of Parks and Recreation, 6921 Saints Drive, Metairie, LA 70003 or 7437 Lapalco Blvd., Marrero, LA 70072.

Vendor will box all awards by teams for easy access, and to avoid problems of sorting.

Delivery will be made within two weeks of issuance of order. Orders are to be in written form only and from the Main Business Office of the Department of Parks and Recreation.

AWARDS SPECIFICATIONS:

All awards will be on plaques made of legen wood, or equal. Legen wood is imitation wood with cherry wood finish. Plaques shall be completely finished, front, back, and sides with wood grain finish. Plaque size will vary. All plaques must be five eights inch thick.

METAL MATERIALS:

Vendor shall supply aluminum plating adjusted according to size of the individual plaque as ordered, to be no less than one half inch smaller than the wood grain base. Five different colors of metal plates shall be supplied. They shall be silver aluminum, gold aluminum, blue aluminum, red aluminum, and black aluminum. Plates will be attached via appropriate decorative type fasteners, either nail and or screw. No glue shall be acceptable as a fastening device. All corners on metal plate shall be crimped for appearance purposes.

The Department of Parks and Recreation will provide different types of logos. Each will be balck on white for vendors use. It shall be the responsibility of the vendor at his expense to expand and/or reduce the logo based on the size of the plaque as indicated in the order by the Department of Parks and Recreation.

Logo and lettering shall be applied by one of the following processes. Electric heat process system, engraving or photo lathe engraving. Lettering shall be at the discretion of the Department of Parks and Recreation corresponding to the size of the plaque. All lettering shall be provided upon request, colors coordinating with the silver aluminum plating, gold aluminum plating, blue aluminum plating, red aluminum plating, and black aluminum plating. No abbreviations will be allowed for any reason.

Lettering shall be of the highest clarity. Hazy or fuzzy lettering is not acceptable.

Each award shall be composed of a minimum of approximately 50 letters which shall be included in the base bid. Each additional letter and/or number shall be bid independently with a flat cost established for each letter and or number in excess of 50 as mentioned above.

Each award shall be wrapped with a clear plastic material to prevent scratching and other damage prior to delivery.

BID #50-00120254 SPECIFICATIONS

Within ten (10) days from notification after bid opening date all proposed vendors may be required to submit a sample of a five inch by seven inch size plaque showing the designated logo along with the following information for inspection purposes:

DIXIE YOUTH RUNNER UP

This shall be at the expense of the vendor. Failure to submit sample shall be cause to reject bid.

Sample Logo Design is included.





DATE: 7/19/2017

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INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00120254

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			TWO (2) YEAR CONTRACT FOR AWARD PLAQUES TO BE ORDERED ON AN AS-NEEDED BASIS FOR THE JEFFERSON PARISH DEPARTMENT OF PARKS AND RECREATION		
1	7,000.00	EA	0010 - Plaque 5 inch by 7 inch	\$3.07	\$21,490.00
2	200.00	EA	0020 Plaque 7 inch by 9 inch	\$4.97	\$994.00
3	800.00	EA	0030 Plaque 8 inch by 10 inch	\$5.87	\$4696.00
4	10.00	EA	0040 Plaque 9 inch by 12 inch	\$5.97	\$59.70
5	10.00	EA	0050 Plaque 10 inch by 14 inch	\$6.19	\$61.90
6	175.00	EA	0060 Plaque- Cost of each additional letter and or number above 50 letters	0	0
			included on each plaque for item numbers 0010 through 0050.		
7	400.00	EA	0070 Plaque 5 inch by 7 inch	\$3.07	\$1228.00
8	150.00	EA	0080 Plaque 8 inch by 10 inch	\$5.87	\$880.50
9	10.00	EA	0090 Plaque 9 inch by 12 inch	\$5.97	\$59.70
10	10.00	EA	0100 Plaque 10 inch by 14 inch	\$6.19	\$61.90
11	175.00	EA	0110 Plaque - Cost of additional letter on each plaque for item numbers 0070 through 0100.	0	0

DATE: 7/19/2017
BID NO.: 50-00120254

INVITATION TO BID
THIS IS NOT AN ORDER

Page: 1

JEFFERSON PARISH

PURCHASING DEPARTMENT
P.O. BOX 9
GRETNA, LA. 70054-0009
504-364-2678

BUYER: SDUFFY@jeffparish.net

BIDS WILL BE RECEIVED IN THE WEST BANK PURCHASING DEPT, SUITE 4400, JEFFERSON PARISH GENERAL GOVERNMENT BUILDING, 200 DERBIGNY STREET, GRETNA, LA 70053 UNTIL 2:00 PM, 8/03/2017 AND PUBLICLY OPENED THEREAFTER.

For convenience, bidders may also submit bids in the East Bank Purchasing Department, Suite 404, Jefferson Parish Joseph S. Yenni Building, 1221 Elmwood Park Blvd., Jefferson LA 70123. However, if submitting bids on the day of bid opening, bidders must submit at the West Bank location only. All bids will be publicly opened at the West Bank location.

At no charge, bidders may also submit via Jefferson Parish's electronic procurement page by visiting www.jeffparishbids.net to register for this free site. Additional instructions are included in the text box highlighting electronic procurement.

LATE BIDS WILL NOT BE ACCEPTED

Unless submitting via online (see Page 3), each bid must be submitted in a sealed envelope bearing on the outside; the name of the Bidder, his address, and the name of the project for which the bid is submitted and the bid number.

NOTE: ONLY BIDS WRITTEN IN INK OR TYPEWRITTEN, AND PROPERLY SIGNED BY A MEMBER OF THE FIRM OR AUTHORIZED REPRESENTATIVE, WILL BE ACCEPTED. PENCIL AND/OR PHOTOSTATIC FIGURES OR SIGNATURES SHALL RESULT IN BID REJECTION.

INSTRUCTIONS FOR BIDDERS AND GENERAL CONDITIONS

THE FOLLOWING INSTRUCTIONS APPLY TO ALL BIDS

All bids submitted are subject to these instructions and general conditions and any special conditions and specifications contained herein, all of which are made part of this bid proposal reference. By submitting a bid, vendor agrees to comply with all provisions of Louisiana Law as well be in compliance with the Jefferson Parish Code of Ordinances, Louisiana Code of Ethics, applicable Jefferson Parish ethical standards and Jefferson Parish Resolution No. 113646 and/or Resolution No. 113647.

All vendors submitting bids should register as a Jefferson Parish vendor if not already yet registered. Registration forms may be downloaded from <http://purchasing.jeffparish.net> and by clicking on Vendor Information. Current W-9 forms with respective Tax Identification numbers and vendor applications may be submitted at any time; however, if your company is not registered and/or a current W-9 form is not on file, vendor registration is mandatory. Further, a current W-9 form and respective Tax Identification number must be supplied upon contract execution, should you be awarded a contract and/or issued purchase order. Failure to do so may result in delay of payment.

All quotations shall be based on F.O.B. Agency warehouse or job site, anywhere within the Parish as designated by the Purchasing Department. This provision does not apply to public works projects

JEFFERSON PARISH requires all products to be new (current) and all work must be performed according to standard practices for the project. Unless otherwise specified, no aftermarket parts will be accepted. Unless otherwise specified, all workmanship and materials must have at least one (1) year guaranty, in writing, from the date of delivery and/or acceptance of the project. Any deviations or alterations from the specifications must be indicated and/or supporting documentation supplied with bid submission.

Bidders should submit all questions in writing and fax them to the Purchasing Department at (504) 364-2693 no later than FIVE (5) working days prior to bid opening. Bid numbers should be mentioned in all requests. Questions may also be emailed to the buyer for this bid at the email address listed above. If submitting online, vendors may send questions via the E-Procurement site no later than Five (5) working days prior to the bid opening.

If this bid requires a pre-bid conference (see Additional Requirements section), bidders are advised that such conference will be held to allow bidders the opportunity to identify any discrepancies in the bid specifications and seek further clarification regarding instructions. The Purchasing Department will issue a written response to bidders' questions in the form of an Addendum. Please note that all official communication will be expressed in the form of an addendum.

All formal Addenda require written acknowledgement on the bid form by the bidder. Failure to acknowledge an Addendum on the bid form shall cause the bid to be rejected. JEFFERSON PARISH reserves the right to award bid to next lowest responsive and responsible bidder in this event.

The purpose and intention of this invitation to bid is to afford all suppliers an equal opportunity to bid on all construction, maintenance, repair, operating supplies and/or equipment listed in this bid proposal. JEFFERSON PARISH WILL ACCEPT ONE BID ONLY FROM EACH VENDOR. Items bid must meet specifications.

Visit our website at [HTTP://PURCHASING.JEFFPARISH.NET](http://PURCHASING.JEFFPARISH.NET)

JEFFERSON PARISH will accept one price for each item unless otherwise indicated. Two or more prices for one item will result in bid rejection. Bidders are required to complete, sign and return the bid form and/or complete and return the associated line item pricing forms as indicated. Vendors must not alter the bid forms. Doing so will cause the bid to be rejected.

A corporate resolution or written evidence of the individual signing the bid having such authority must be submitted with the bid. Failure to comply will cause bid to be rejected. For corporate entities, such written evidence may be a printout of the Louisiana Secretary of State's website listing the signatory as an officer. Such printout shall be included with the bid submission. Bids submitted by Owners or Sole Proprietorships must include certification that he or she owns the entity for which the bid is signed. This documentation must be submitted with the bid. Failure to do so will result in bid rejection.

NOTE: A sample corporate resolution can be downloaded from our website <http://purchasing.jeffparish.net> or you may provide your own document. A sample certification of sole proprietorship can also be downloaded from our website <http://purchasing.jeffparish.net> or you may provide your own document.

INSTRUCTIONS FOR BIDDERS AND GENERAL CONDITIONS

A. AWARD OF CONTRACT: JEFFERSON PARISH reserves the right to award contracts or place orders on a lump sum or individual item basis, or such combination, as shall in its judgment be in the best interest of JEFFERSON PARISH. Every contract or order shall be awarded to the LOWEST RESPONSIVE and RESPONSIBLE BIDDER, taking into consideration the CONFORMITY WITH THE SPECIFICATIONS and the DELIVERY AND/OR COMPLETION DATE. SPLIT AWARDS MADE TO SEVERAL VENDORS WILL ONLY BE GRANTED TO THOSE DEEMED RESPONSIVE AND RESPONSIBLE.

All bid prices shall remain valid for 45 days. Jefferson Parish and the lowest responsive and responsible bidder(s) by mutual written consent may mutually agree to extend the deadline for award by one (1) or more extensions of thirty (30) calendar days.

PROTESTS: Only those vendors that submitted a bid in response to this solicitation may submit a protest in writing to the Director of the Purchasing within 48 hours of bid opening. The Purchasing Director will review it in connection with the Parish Attorney's Office which will then respond in writing as soon as possible.

PREFERENCE: Unless federal funding is directly spent by Jefferson Parish for this purchase, preference is hereby given to materials, supplies, and provisions produced, manufactured or grown in Louisiana, quality being equal to articles offered by competitors outside the state. "LSA - R.S. 38:2251-2261"

B. USE OF BRAND NAMES AND STOCK NUMBERS: Where brand names and stock numbers are specified, it is for the purpose of establishing certain minimum standards of quality. Bids may be submitted for products of equal quality, provided brand names and stock numbers are specified. Complete product data may be required prior to award.

C. CANCELLATION OF CONTRACT: JEFFERSON PARISH reserves the right to cancel all or any part if not shipped promptly. No charges will be allowed for parking or cartage unless specified in quotation. The order must not be filled at a higher price than quoted. JEFFERSON PARISH reserves the right to cancel any contract at anytime and for any reason by issuing a THIRTY (30) day written notice to the contractor.

For good cause and as consideration for executing a contract with Jefferson Parish, vendor conveys, sells, assigns and transfers to Jefferson Parish or its assigns all rights, title and interest in and to all causes of action it may now or hereafter acquire under the antitrust laws of the United States and the State of Louisiana, relating to the particular good or services purchased or acquired by Jefferson Parish.

D. PRICES: Jefferson Parish is exempt from paying sales tax under LSA-R.S. 47:301 (8)(c). All prices for purchases by Jefferson Parish of supplies and materials shall be quoted in the unit of measure specified and unless otherwise specified, shall be exclusive of state and Parish taxes. The price quoted for work shall be stated in figures. In the event there is a difference in unit prices and totals, the unit price shall prevail.

Quantities listed are for bidding purposes only. Actual requirements may be more or less than quantities listed.

Bidders are not to exclude from participation in, deny the benefits of, or subject to discrimination under any program or activity, any person in the United States on the grounds of race, color, national origin, or sex; nor discriminate on the basis of age under the Age Discrimination Act of 1975, or with respect to an otherwise qualified handicapped individual as provided in Section 504 of the Rehabilitation Act of 1973, or on the basis of religion, except that any exemption from such prohibition against discrimination on the basis of religion as provided in the Civil Rights Act of 1964, or Title VI and VII of the Act of April 11, 1968, shall also apply. This assurance includes compliance with the administrative requirements of the Revenue Sharing final handicapped discrimination provisions contained in Section 51.55 (c), (d), (e), and (k)(5) of the Regulations. New construction or renovation projects must comply with Section 504 of the 1973 Rehabilitation Act, as amended, in accordance with the American National Standard Institute's specifications (ANSI A17.1-1961).

Jefferson Parish and its partners as the recipients of federal funds are fully committed to awarding a contract(s) to firm(s) that will provide high quality services and that are dedicated to diversity and to containing costs. Thus, Jefferson Parish strongly encourages the involvement of minority and/or woman-owned business enterprises (DBE's, including MBE's, WBE's and SBE's) to stimulate participation in procurement and assistance programs.

INSTRUCTIONS FOR BIDDERS AND GENERAL CONDITIONS

Advertised bids will be tabulated and a copy of the tabulation will be forwarded to each responding bidder.

IN ACCORDANCE WITH STATE REGULATIONS JEFFERSON PARISH OFFERS ELECTRONIC PROCUREMENT TO ALL VENDORS

This electronic procurement system allows vendors the convenience of reviewing and submitting bids online. This is a secure site and authorized personnel have limited read access only. Bidders are encouraged to submit electronically using this free service; while the website accepts various file types, one single PDF file containing all appropriate and required bid documents is preferred. Bidders submitting uploaded images of bid responses are solely responsible for clarity. If uploaded images/documents are not legible, then bidder's submission will be rejected. Please note all requirements contained in this bid package for electronic bid submission.

Please visit our E-Procurement Page at www.jeffparishbids.net to register and view Jefferson Parish solicitations. For more information, please visit the Purchasing Department page at <http://purchasing.jeffparish.net>.

The general specifications for construction projects and the purchase of materials, services and/or supplies are those adopted by the JEFFERSON PARISH Council by Resolution No. 113646 or 113647 dated 12/09/09. The general conditions adopted by this resolution shall be considered as much a part of this document as if they were written wholly herein. A copy may be obtained from the Office of the Parish Clerk, Suite 6700, Jefferson Parish General Government Building, 200 Derbigny Street, Gretna, LA 70053. You may also obtain a copy by visiting the Purchasing Department webpage at <http://purchasing.jeffparish.net> and clicking on Online Forms.

ADDITIONAL REQUIREMENTS FOR THIS BID

PLEASE MATCH THE NUMBERS PRINTED IN THIS BOX WITH THE
CORRESPONDING INSTRUCTIONS BELOW.

10,12,13,15

1. All bidders must attend the MANDATORY pre-bid conference and will be required to sign in and out as evidence of attendance. In accordance with LSA R.S. 38:2212(I), all prospective bidders shall be present at the beginning of the MANDATORY pre-bid conference and shall remain in attendance for the duration of the conference. Any prospective bidder who fails to attend the conference or remain for the duration shall be prohibited from submitting a bid for the project.
2. Attendance to this pre-bid conference is optional. However, failure to attend the pre-bid conference shall not relieve the bidder of responsibility for information discussed at the conference. Furthermore, failure to attend the pre-bid conference and inspection does not relieve the successful bidder from the necessity of furnishing materials or performing any work that may be required to complete the work in accordance with the specification with no additional cost to the owner.
3. Contractor must hold current applicable JEFFERSON PARISH licenses with the Department of Inspection and Code Enforcement. Contractor shall obtain any and all permits required by the JEFFERSON PARISH Department of Inspection and Code Enforcement. The contractor shall be responsible for the payment of these permits. All permits must be obtained prior to the start of the project. Contractor must also hold any and all applicable Federal and State licenses. Contractor shall be responsible for the payment of these permits and shall obtain them prior to the start of the project.
4. A LA State Contractor's License will be required in accordance with LSA R.S. 37-2150 et. seq. and such license number will be shown on the outside of the bid envelope. Failure to comply will cause the bid to be rejected. Additionally if submitting the bid electronically, then the license number must be entered in the appropriate field in the Electronic Procurement system. Failure to comply will cause the bid to be rejected.
5. It is the bidder's responsibility to visit the job site and evaluate the job before submitting a bid.
6. Job site must be clean and free of all litter and debris daily and upon completion of the contract. Passageways must be kept clean and free of material, equipment, and debris at all times. Flammable material must be removed from the job site daily because storage will not be permitted on the premises. Precautions must be exercised at all times to safeguard the welfare of JEFFERSON PARISH and the general public.

INSTRUCTIONS FOR BIDDERS AND GENERAL CONDITIONS

7. **PUBLIC WORKS BIDS:** All awards for public works in excess of \$5,000.00 will be reduced to a formal contract which shall be recorded at the contractor's expense with the Clerk of Court and Ex-Officio Recorder of Mortgages for the Parish of Jefferson. A price list of recordation costs may be obtained from the Clerk of Court and Ex-Officio Recorder of Mortgages for the Parish of Jefferson. All awards in excess of \$25,000.00 will require both a performance and a payment bond. Unless otherwise stated in the bid specifications, the performance bond requirements shall be 100% of the contract price. Unless otherwise stated in the bid specifications, the payment bond requirements shall be 100% of the contract price. Both bonds shall be supplied at the signing of the contract.
8. **NON-PUBLIC WORKS BIDS:** A performance bond will be required for this bid. The amount of the bond will be 100% of the contract price unless otherwise indicated in the specifications. The performance bond shall be supplied at the signing of the contract.
9. **NON-PUBLIC WORKS BIDS:** A payment bond will be required for this bid. The amount of the bond will be 100% of the contract price unless otherwise indicated in the specifications. The payment bond shall be supplied at the signing of the contract.
10. Unless otherwise stated in the bid specifications, the successful bidder will be required to procure standard insurance policies evidencing Parish-mandated insurance requirements as indicated on the attached "insurance requirements" sheet. All bidders must comply with the instructions in this sheet. Failure to comply will cause bid to be rejected.
11. A bid bond will be required with bid submission in the amount of 5% of the total bid, unless otherwise stated in the bid specifications. Acceptable forms shall be limited to cashier's check, certified check, or surety bid bond. All sureties must be in original format (no copies). If submitting a bid online, vendors must submit an electronic bid bond through the respective online clearinghouse bond management system(s) as indicated in the electronic bid solicitation on Central Auction House. No scanned paper copies of any bid bond will be accepted as part of the electronic bid submission.
12. This is a requirements contract to be provided on an as needed basis. JEFFERSON PARISH makes no representations or warranties with regard to minimum guaranteed quantities unless otherwise stated in the bid specifications.
13. Freight charges should be included in total cost when quoting. If not quoted FOB DELIVERED, freight must be quoted as a separate item. Bid may be rejected if not quoted FOB DELIVERED or if freight charges are not indicated on bid form.
14. **PUBLIC WORKS BIDS - Completed, Signed and Properly Notarized Affidavits Required;** This applies to all solicitations for construction, alteration or demolition of public buildings or projects, in conformity with the provisions contained in LSA-RS 38:2212.9, LSA-RS 38:2212.10, LSA-RS 38:2224, and Sec 2-923.1 of the Jefferson Parish Code of Ordinances. For bidding purposes, all bidders must submit with bid submission COMPLETED, SIGNED and PROPERLY NOTARIZED Affidavits, including: Non-Conviction Affidavit, Non-Collusion Affidavit, Campaign Contribution Affidavit, Debt Disclosures Affidavit and E-Verify Affidavit. For the convenience of vendors, all affidavits have been combined into one form entitled PUBLIC WORKS BID AFFIDAVIT. This affidavit must be submitted in its original format, and without material alteration, in order to be compliant and for the bid to be considered responsive. A scanned copy of the completed, signed and properly notarized affidavit may be submitted with the bid, however, the successful bidder must submit the original affidavit in its original format and without material alteration upon contract execution. Failure to comply will result in the bid submission being rejected as non-responsive. The Parish reserves the right to award bid to the next lowest responsive and responsible bidder in this event.
15. **NON PUBLIC WORK BIDS - Completed, Signed and Properly Notarized Affidavits Required** in conformity with the provisions contained in LSA - RS 38:2224 and Sec 2-923.1 of the Jefferson Parish Code of Ordinances. For bidding purposes, all bidders must submit with bid submission COMPLETED, SIGNED and PROPERLY NOTARIZED Affidavits, including: Non-Collusion Affidavit, Debt Disclosures Affidavit and Campaign Contribution Affidavit. For the convenience of vendors, all affidavits have been combined into one form entitled NON PUBLIC WORKS BID AFFIDAVIT. This affidavit must be submitted in its original format, and without material alteration, in order to be compliant and for the bid to be considered responsive. A scanned copy of the completed, signed and properly notarized affidavit may be submitted with the bid, however, the successful bidder must submit the original affidavit in its original format and without material alteration upon contract execution. Failure to comply will result in the bid submission being rejected as non-responsive. The Parish reserves the right to award bid to the next lowest responsive and responsible bidder in this event.
16. The ensuing contract for this bid solicitation may be eligible for FEMA reimbursement and/or Federal funding/reimbursement. As such, the referenced appendix will be applicable accordingly and shall be considered a part of the bid documents. All applicable certifications must be duly completed, signed and submitted with bid submission. Failure to submit applicable certifications with bid submission will result in bid rejection.
17. For this project, the Contractor shall not pay any state or local sales or use taxes on materials and equipment which are affixed and made part of the immovable property of the project or which permanently incorporated in the project (hereinafter referred to as "applicable materials and equipment"). All purchases of applicable materials or equipment shall be made by the contractor on behalf of and as the agent of Jefferson Parish (Owner), a political subdivision of the State of Louisiana. No state and local sales and use taxes are owed on applicable materials and equipment under the provisions of Act 1029 of the 1991 Regular Session - Louisiana Revised Statute 47:301(8)(c). Owner will furnish contractor a certificate form which certifies that Owner is not required to pay such state or local sales and use taxes, and contractor shall furnish a copy of such certificate to all vendors or suppliers of the applicable materials and equipment.

It shall be the duty of every parish officer, employee, department, agency, special district, board, and commission; and the duty of every contractor, subcontractor, and licensee of the parish, and the duty of every applicant for certification of eligibility for a parish contract or program, to cooperate with the Inspector General in any investigation, audit, inspection, performance review, or hearing pursuant to Jefferson Parish Code of Ordinances Section 2-155.10(19). By submitting a bid, vendor acknowledges this and will abide by all provisions of the referenced Jefferson Parish Code of Ordinances.

DATE: 7/19/2017

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BID NO.: 50-00120254

BID FORM
Non Public Works

All Public Work Projects are required to use the Louisiana Uniform Public Work Bid Form

All prices must be held firm unless an escalation provision is requested in this bid. Jefferson Parish will allow one escalation during the term of the contract, which may not exceed the U.S. Bureau of Labor Statistics National Index for all Urban Consumers, unadjusted 12 month figure. The most recently published figure issued at the time an adjustment is requested will be used. A request must be made in writing by the vendor, and the escalation will only be applied to purchases made after the request is made.

Are you requesting an escalation provision?

YES _____ NO X

MAXIMUM ESCALATION PERCENTAGE REQUESTED 0 %

INITIAL BID PRICES WILL REMAIN FIRM THROUGH THE DATE OF 1/1/2020.

For the purposes of comparison of bids when an escalation provision is requested, Jefferson Parish will apply the maximum escalation percentage quoted by the bidder to the period to which it is applied in the bid. The initial price and the escalation will be used to calculate the total bid price. It will be assumed, for comparison of prices only, that an equal amount of material or labor is purchased each month throughout the entire contract.

DELIVERY: FOB JEFFERSON PARISH

INDICATE DELIVERY DATE ON EQUIPMENT AND SUPPLIES

As Needed

LOUISIANA CONTRACTOR'S LICENSE NO.: (if applicable) _____

THIS SECTION MUST BE COMPLETED BY BIDDER:

FIRM NAME: Monarch Trophy Studio

ADDRESS: 16227 San Pedro Ave

CITY, STATE: San Antonio Texas ZIP: 78232

TELEPHONE: (210) 344 3777 FAX: (210) 341 4906

EMAIL ADDRESS: Sales@MTSawards.com

In the event that addenda are issued with this bid, bidders MUST acknowledge all addenda on the bid form. Bidder must acknowledge receipt of an addendum on the bid form as indicated. Failure to acknowledge any addendum on the bid form will result in bid rejection.

Acknowledge Receipt of Addenda: NUMBER: _____

NUMBER: _____

NUMBER: _____

NUMBER: _____

REJECTED
ALL BID REQUIREMENTS NOT MET

TOTAL PRICE OF ALL BID ITEMS: \$ _____

AUTHORIZED SIGNATURE: Charles Drago

TITLE: Partner

Charles Drago
Printed Name

SIGNING INDICATES YOU HAVE READ AND COMPLY WITH THE INSTRUCTIONS AND CONDITIONS.

NOTE: All bids should be returned with the BID NUMBER and BID OPENING DATE indicated on the outside of the envelope submitted to the Purchasing Department.

Non-Public Works Bid

AFFIDAVIT

STATE OF Texas

PARISH/COUNTY OF Bexar

BEFORE ME, the undersigned authority, personally came and appeared: Charles Drago, (Affiant) who after being by me duly sworn, deposed and said that he/she is the fully authorized Partner of Monarch Trophy Studio (Entity), the party who submitted a bid in response to Bid Number 50001202⁵⁴, to the Parish of Jefferson.

Affiant further said:

Campaign Contribution Disclosures

(Choose A or B, if option A is indicated please include the required attachment):

Choice A _____ Attached hereto is a list of all campaign contributions, including the date and amount of each contribution, made to current or former elected officials of the Parish of Jefferson by Entity, Affiant, and/or officers, directors and owners, including employees, owning 25% or more of the Entity during the two-year period immediately preceding the date of this affidavit or the current term of the elected official, whichever is greater. Further, Entity, Affiant, and/or Entity Owners have not made any contributions to or in support of current or former members of the Jefferson Parish Council or the Jefferson Parish President through or in the name of another person or legal entity, either directly or indirectly.

Choice B X there are **NO** campaign contributions made which would require disclosure under Choice A of this section.

Debt Disclosures

(Choose A or B, if option A is indicated please include the required attachment):

Choice A _____ Attached hereto is a list of all debts owed by the affiant to any elected or appointed official of the Parish of Jefferson, and any and all debts owed by any elected or appointed official of the Parish to the Affiant.

Choice B X There are **NO** debts which would require disclosure under Choice A of this section.

Affiant further said:

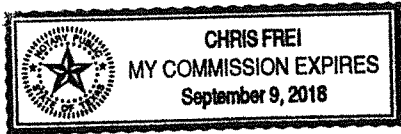
That Affiant has employed no person, corporation, firm, association, or other organization, either directly or indirectly, to secure the public contract under which he received payment, other than persons regularly employed by the Affiant whose services in connection with the construction, alteration or demolition of the public building or project or in securing the public contract were in the regular course of their duties for Affiant; and

[The remainder of this page is intentionally left blank.]

That no part of the contract price received by Affiant was paid or will be paid to any person, corporation, firm, association, or other organization for soliciting the contract, other than the payment of their normal compensation to persons regularly employed by the Affiant whose services in connection with the construction, alteration or demolition of the public building or project were in the regular course of their duties for Affiant.

Charles Drago
Signature of Affiant

Charles Drago
Printed Name of Affiant



SWORN AND SUBSCRIBED TO BEFORE ME
ON THE 25TH DAY OF JULY, 2017.

TEXAS
Notary Public

CHRIS FREI
Printed Name of Notary

129950757
Notary/Bar Roll Number

My commission expires 9/9/18.

STANDARD INSURANCE REQUIREMENTS – PUBLICLY ADVERTISED BIDS

All required insurance under this bid shall conform to Jefferson Parish Resolution No. 113646 or No. 113647, as applicable. Contractors may not commence any work under any ensuing contract unless and until all required insurance and associated evidentiary requirements thereto have been met, along with any additional specifications contained in the advertised bid. Except as where otherwise precluded by law, the Parish Attorney or his designee, with the concurrence of the Director of Risk Management or his designee, may agree on a case-by-case basis, to deviate from Jefferson Parish's standard insurance requirements, as provided in this Section. Vendors requesting deviation therefrom shall submit such requests in writing, along with compelling substantiation, to the Purchasing Department prior to the bid's due date. Any changes to the insurance requirements will be reflected in the bid specifications and addenda. Prior to contract execution and at all times thereafter during the term of such contract, contractors must provide and continuously maintain all coverages as required by the foregoing Resolutions, and the contract documents. Failure to do so shall be grounds for suspension, discontinuation or termination of the contract.

For bidding purposes, bidders must submit with bid submission a current (valid) insurance certificate evidencing the required coverages. Failure to comply will cause bid to be rejected. The current insurance certificate will be used for proof of insurance at time of evaluation. Thereafter, and prior to contract execution, the low bidder will be required to provide final insurance certificates to the Parish which shall name **the Jefferson Parish, its Districts Departments and Agencies under the direction of the Parish President and the Parish Council** as additional insureds regarding negligence by the contractor for the Commercial General Liability, Workmen's Compensation Insurance and the Comprehensive Automobile Liability policies. Additionally, said certificates should reflect the name of the Parish Department receiving goods and services and reference the respective Jefferson Parish bid number.

JEFFERSON PARISH REQUIRED STANDARD INSURANCE

☒ WORKER'S COMPENSATION INSURANCE

As required by Louisiana State Statute, exception; Employer's Liability, Section B shall be \$1,000,000 per occurrence when Work is to be over water and involves maritime exposures to cover all employees not covered under the State Worker's Compensation Act, otherwise this limit shall be no less than \$500,000 per occurrence.

Note: If your company is not required by law to carry workmen's compensation insurance, i.e. not a Louisiana company, sole employee of the company, then bidders must request a workmen's compensation insurance declaration affidavit prior to the bid opening date. This insurance declaration affidavit must be fully completed, signed, properly notarized and submitted with the bid. A scanned copy may be submitted with the bid; however, the successful bidder must submit the original affidavit in its original format and without material alteration upon contract execution. Failure to comply will result in the bid submission being rejected as non-responsive. The Parish reserves the right to award bid to the next lowest responsive and responsible bidder in this event.

☒ **COMMERCIAL GENERAL LIABILITY**

Shall provide limits not less than the following: \$1,000,000.00 Combined Single Limit per Occurrence for bodily injury and property damage.

☒ **COMPREHENSIVE AUTOMOBILE LIABILITY**

Bodily injury liability \$1,000,000.00 each person; \$1,000,000.00 each occurrence.
Property Damage Liability \$1,000,000.00 each occurrence.

Note: This category may be omitted if bidders do not/will not utilize company vehicles for the project or do not possess company vehicles. Bidder must request an automobile insurance declaration affidavit prior to the bid opening date. This insurance declaration affidavit must be fully completed, signed, properly notarized and submitted with the bid. A scanned copy of the completed, signed and properly notarized affidavit may be submitted with the bid; however, the successful bidder must submit the original affidavit in its original format and without material alteration upon contract execution. Failure to comply will result in the bid submission being rejected as non-responsive. The Parish reserves the right to award bid to the next lowest responsive and responsible bidder in this event.

DEDUCTIBLES

No insurance required shall include a deductible not greater than \$10,000.00. The cost of the deductible shall be borne by the contractor.

NOTE: If the vendor requires a change in deductibles, the request must be submitted in writing to the Purchasing Department prior to the due date of the bid. Such request shall be reviewed by the Parish Attorney's Office with the concurrence of the Director of Risk Management.

UMBRELLA LIABILITY COVERAGE

An umbrella policy or excess may be used to meet minimum requirements.

FOR CONSTRUCTION AND RENOVATION PROJECTS:

The following are required unless otherwise specified in the bid. Such insurance is due upon contract execution.

1) OWNER'S PROTECTIVE LIABILITY

To be for the same limits of liability for bodily injury and property damage liability established for commercial general liability.

2) BUILDER'S RISK INSURANCE

The contractor shall maintain Builder's Risk Insurance at his own expense to insure both the owner (Parish of Jefferson) and contractor as their interest may appear.

42115000 N
BR04

Policy Number: EIG 2184169 02

EMPLOYERS
7110 North Fresno Street, Suite 250
Fresno, CA 93720-2999

DRAGO INVESTMENTS LTD
16227 SAN PEDRO AVE
SAN ANTONIO TX 78232

Drago Investments LTD
DBA/ Monarch Trophy Studio
Workers Comp.



POLICY INFORMATION PAGE ENDORSEMENT

This endorsement changes the policy to which it is attached effective on the inception date of the policy unless a different date is indicated below.

This endorsement, effective on **03/07/2017** at 12:01 A.M. standard time, forms a part of
(DATE)

Policy No. **EIG 2184169 02**
of the **EMPLOYERS PREFERRED INS. CO.**
issued to **DRAGO INVESTMENTS LTD**
16227 SAN PEDRO AVE
SAN ANTONIO TX 78232

Endorsement No. 001

Authorized Representative

The following item(s)

- | | |
|--|--|
| <input type="checkbox"/> Insured's Name WC990629 | <input type="checkbox"/> Item 3.A. States WC990629 |
| <input type="checkbox"/> Policy Number WC990629 | <input type="checkbox"/> Item 3.B. Limits WC990629 |
| <input type="checkbox"/> Effective Date WC990629 | <input type="checkbox"/> Item 3.C. States WC990629 |
| <input type="checkbox"/> Expiration Date WC990629 | <input type="checkbox"/> Item 3.D. Endorsement Numbers WC990633 |
| <input type="checkbox"/> Insured's Mailing Address WC990629 | <input checked="" type="checkbox"/> Item 4.* Class, Rate, Other WC990630 |
| <input type="checkbox"/> Experience Modification WC990630 | <input type="checkbox"/> Interim Adjustment of Premium WC990630 |
| <input type="checkbox"/> Producer's Name WC990629 | <input type="checkbox"/> Carrier Servicing Office WC990629 |
| <input type="checkbox"/> Change in Workplace of Insured WC990631 | <input type="checkbox"/> Interstate/Intrastate Risk I.D. Number WC990629 |
| <input type="checkbox"/> Insured's Legal Status WC990629 | <input type="checkbox"/> Carrier Number WC990629 |

is changed to read:

EFFECTIVE 03/07/17 ADD \$1000 DEDUCTIBLE

*Item 4. Changed To: Item 4 is amended per the attached extension schedules & installment schedule

Classifications	Code No.	Premium Basis Total Estimated Annual Remuneration	Rate Per \$100 of Remuneration	Estimated Annual Premium

Total Estimated Annual Premium \$9,132

Minimum Premium \$ N/A

Deposit Premium \$ N/A

Issued Date: 03/09/17

4211500 INSURANCE ONE AGENCY, LLC

WC 99 06 28 (Ed. 5/98)

Policy Number	From	Policy Period To
EIG 2184169 02	03/07/2017	03/07/2018
12:01 A.M. Standard Time at the address of the insured as stated herein		

Transaction				
AMENDED DECLARATIONS		Effective: 03/07/2017		
NCCI Carrier #	31283	WCIRB CARRIER#	PRIOR POLICY NUMBER	EIG218416901
1. Named Insured and Address		Agent		
DRAGO INVESTMENTS LTD DBA MONARCH TROPHY STUDIO 16227 SAN PEDRO AVE SAN ANTONIO TX 78232		INSURANCE ONE AGENCY, LLC 601 EMBASSY OAKS, SUITE 101 SAN ANTONIO, TX 78216 4211500 Telephone: 2104020288		
Customer #	Carrier #	FEIN #	Risk ID #	Entity of Insured
	31283	742994264	421465738	LIMITED PARTNERSHIP

Additional Locations:

2. The Policy Period is from 03/07/2017 to 03/07/2018 12:01 a.m. Standard Time at the Insured's mailing address.
3. A. Workers Compensation Insurance: Part ONE of the policy applies to the Workers Compensation Law of the states listed here: TX
- B. Employers Liability Insurance: Part TWO of the policy applies to work in each state listed in Item 3A.
The limits of our liability under Part TWO are:
- | | | | |
|---------------------------|----|-----------|---------------|
| Bodily Injury by Accident | \$ | 1,000,000 | each accident |
| Bodily Injury by Disease | \$ | 1,000,000 | policy limit |
| Bodily Injury by Disease | \$ | 1,000,000 | each employee |
- C. Other States Insurance: Part THREE of the policy applies to the states, if any, listed here:
All states except ND, OH, WA, WY, AK, DE, HI, LA, ME, NH, RI, SD, VT, WV and states listed in item 3.A.
- D. This policy includes these endorsements and schedules: See attached schedule.
4. The premium for this policy will be determined by our Manuals of Rules, Classifications, Rates, and Rating Plans.
All information required below is subject to verification and change by audit.

SEE EXTENSION OF INFORMATION PAGE

Minimum Premium \$ 250

Expense Constant \$ 220
Premium Discount \$ -376

Assessments and Taxes \$

Total Estimated Annual Premium \$ 9,132

☐ This is a Three Year Fixed Rate PolicyPremium Adjustment Period: ☒ Annual; ☐ Semiannual; ☐ Quarterly; ☐ Monthly

Countersigned this Day of ,

Issued Date: 03/09/2017

Issuing Office **EMPLOYERS PREFERRED INS. CO.**
7110 NORTH FRESNO STREET, SUITE 250
FRESNO, CA 93720-2999
Authorized Representative



EMPLOYERS PREFERRED INS. CO.
A Stock Company
 7110 NORTH FRESNO STREET, SUITE 250
 FRESNO, CA 93720-2999

**WORKERS' COMPENSATION AND EMPLOYERS
 LIABILITY INSURANCE POLICY**

Policy Number:	EIG 2184169 02
Named Insured:	DRAGO INVESTMENTS LTD
Agent:	INSURANCE ONE AGENCY, LLC 4211500

EXTENSION OF INFORMATION PAGE

CLASSIFICATION OF OPERATIONS

Code No.	Classification Description	Premium Basis Total Est. Annual Remuneration	Rate Per \$100 of Remuneration	Estimated Annual Premium
Texas				
Rating Period: 03/07/2017 through 03/07/2018				
Site 00001				
8017	TROPHY STORES - RETAIL - & DRIVERS	1,377,550	1.020000	14,051.00
8742	SALESPERSONS, COLLECTORS OR MESSENGERS - OUTSIDE	55,900	0.170000	95.00
8810	CLERICAL OFFICE EMPLOYEES NOC	272,036	0.100000	272.00
Site 00001 Total				\$ 14,418.00
Total of Sites for Rating Period				\$ 14,418.00
Rating Period Total				\$ 14,418.00
Rating Period: 03/07/2017 through 03/07/2018				
9812	INCREASED COVERAGE II	14,418	0.014000	202.00
9898	EXPERIENCE MODIFICATION	14,620	0.930000	-1,023.00
9887	SCHEDULE CREDIT	13,597	0.300000	-4,079.00
9663	DEDUCTIBLE	9,518	0.060000	-571.00
0063	PREMIUM DISCOUNT	8,947	0.042000	-376.00
0900	EXPENSE CONSTANT			220.00
9740	TERRORISM PREMIUM	1,705,486	0.020000	341.00
Rating Period Total				\$ 5,286.00-
State Total				\$ 9,132.00
Policy Total				\$ 9,132.00



EMPLOYERS PREFERRED INS. CO.
A Stock Company
7110 NORTH FRESNO STREET, SUITE 250
FRESNO, CA 93720-2999

WORKERS' COMPENSATION AND EMPLOYERS
LIABILITY INSURANCE POLICY

Policy Number: EIG 2184169 02

Named Insured: DRAGO INVESTMENTS LTD

Agent: INSURANCE ONE AGENCY, LLC 4211500

SITE LOCATION SCHEDULE

State TX

1

DRAGO INVESTMENTS LTD
16227 SAN PEDRO AVE
SAN ANTONIO TX 78232



EMPLOYERS PREFERRED INS. CO.

A Stock Company

7110 NORTH FRESNO STREET, SUITE 250
FRESNO, CA 93720-2999

WORKERS' COMPENSATION AND EMPLOYERS
LIABILITY INSURANCE POLICY

Policy Number: EIG 2184169 02

Named Insured: DRAGO INVESTMENTS LTD

Agent: INSURANCE ONE AGENCY, LLC 4211500

NAMED INSURED SCHEDULE

<u>LOC</u>	<u>Name and Address</u>	<u>DBA</u>	<u>FEIN</u>
00001	DRAGO REAL ESTATE LLC 16227 SAN PEDRO AVE SAN ANTONIO TX 78232		204350973



EMPLOYERS PREFERRED INS. CO.
A Stock Company
7110 NORTH FRESNO STREET, SUITE 250
FRESNO, CA 93720-2999

WORKERS' COMPENSATION AND EMPLOYERS
LIABILITY INSURANCE POLICY

Policy Number: EIG 2184169 02

Named Insured: DRAGO INVESTMENTS LTD

Agent: INSURANCE ONE AGENCY, LLC 4211500

NAMED INSURED SCHEDULE

<u>LOC</u>	<u>Name and Address</u>	<u>DBA</u>	<u>FEIN</u>
00001	DRAGO REAL ESTATE LLC 16227 SAN PEDRO AVE SAN ANTONIO TX 78232 ENTITY TYPE - LIM LIABILITY CO		



EMPLOYERS PREFERRED INS. CO.
A Stock Company
7110 NORTH FRESNO STREET, SUITE 250
FRESNO, CA 93720-2999

WORKERS' COMPENSATION AND EMPLOYERS
LIABILITY INSURANCE POLICY

Policy Number:	EIG 2184169 02
Named Insured:	DRAGO INVESTMENTS LTD
Agent:	INSURANCE ONE AGENCY, LLC 4211500

ENDORSEMENT SCHEDULE

State	Form Nbr.	Ed. Date	Description
TX	WC420602A	(6/14)	TX ACCIDENT DEDUCTIBLE ENDT
TX	WC990405A	(3/07)	INSTALLMENT PAYMENT ENDORSE

TEXAS ACCIDENT DEDUCTIBLE ENDORSEMENT

This endorsement applies only to the insurance provided by Part One (Workers Compensation Insurance) because Texas is shown in Item 3.A. of the Information Page.

1. Part One (Workers Compensation Insurance) applies only to benefits in excess of the deductible amount shown in the Schedule below. This deductible applies separately to all bodily injuries arising out of one accident covered under the policy, regardless of the number of employees involved in the accident.
2. We will pay the deductible amount for you, but you must reimburse us within 30 days after we send you notice that payment is due. We will send you notice that payment is due on a periodic basis, but not more frequently than on a monthly basis unless both parties agree to a more frequent reimbursement. If you fail to fully reimburse us when due, we may cancel the policy for nonpayment of premium. We may keep the amount of unearned premium that will reimburse us for the payments we made. These rights are in addition to other rights we have to be reimbursed.

Schedule

Per-Accident Deductible Amount

\$1,000.00

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.
(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

This endorsement, effective 03/07/2017 at 12:01 AM standard time, forms a part of

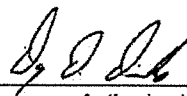
Policy No. EIG 2184169 02 Of the

Carrier Code 31283

Issued to DRAGO INVESTMENTS LTD

Endorsement No.

Premium \$9,132

Countersigned at _____ on _____ By:  _____

Authorized Representative

WC 42 06 02 A

(Ed. 6-14)

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INSTALLMENT PAYMENT ENDORSEMENT

In addition to the deposit premium shown below as Installment 01, you agree to make the following installment payments on the date specified (if any).

These payments may be revised pursuant to a mid-term analysis of premium based on payrolls which you may be asked to submit to us.

Installment Number	Date Due	Amount
01	03/07/2017	\$913.20
02	04/07/2017	\$913.20
03	05/07/2017	\$913.20
04	06/07/2017	\$913.20
05	07/07/2017	\$913.20
06	08/07/2017	\$913.20
07	09/07/2017	\$913.20
08	10/07/2017	\$913.20
09	11/07/2017	\$913.20
10	12/07/2017	\$913.20

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.
(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

This endorsement, effective 03/07/2017 at 12:01 AM standard time, forms a part of

Policy No. EIG 2184169 02 Of the EMPLOYERS PREFERRED INS. CO.

Carrier Code 31283

Issued to DRAGO INVESTMENTS LTD

Endorsement No.

Premium \$9,132

Countersigned at _____ on _____ By:  _____

Authorized Representative

Insurance for

Drago Investments LTD

DBA/ Monarch Trophy Studio



The
Hanover
Insurance Group..

OLD D109962

1604038

DRAGO INVESTMENTS LTD
16227 SAN PEDRO AVE
SAN ANTONIO, TX 78232

DRAGO INVESTMENTS LTD
16227 SAN PEDRO AVE
SAN ANTONIO, TX 78232

DRAGO INVESTMENTS LTD
16227 SAN PEDRO AVE
SAN ANTONIO, TX 78232

BUSINESSOWNERS DECLARATION

BUSINESSOWNERS AMENDED DECLARATIONS EFFECTIVE 12/02/2016 NUMBER 01

13

SUPERSEDES ANY PREVIOUS DECLARATIONS BEARING THE SAME NO. FOR THIS POLICY PERIOD
ADDED ADDITIONAL INSURED & WOS

Policy Number	From	Policy Period To	Coverage is Provided in the	Agency Code
OLD-D109962-00	12/02/2016	12/02/2017	HANOVER LLOYDS INSURANCE COMPANY	160403800

Named Insured and Address

DRAGO INVESTMENTS LTD
16227 SAN PEDRO AVE
SAN ANTONIO, TX 78232

Agent

210-402-0288
INSURANCE ONE AGENCY, LC
SUITE 101
601 EMBASSY OAKS
SAN ANTONIO, TX 78216

Policy Period: Beginning and Ending at 12:01 a.m. Standard Time at the Location of the Described Premises.

Business Type: CORPORATION (SINGLE).

Mortgagee/Loss Payable:

Business of the Named Insured:

RETAILER.

In consideration of the premium, insurance is provided the Named Insured with respect to those premises described in the Schedule below and with respect to those coverages and kinds of property for which a specific Limit of Insurance is shown, subject to all of the terms of this policy including forms and endorsements made a part hereof:

LOCATION SCHEDULE

Described Premises:

NO. 001 001 2121 NW MILITARY HWY, SAN ANTONIO, TX 78213
NO. 002 001 16227 SAN PEDRO AVE, SAN ANTONIO, TX 78232

SECTION I - PROPERTY	LIMITS OF INSURANCE					
	Loc No 001	Bldg No 001	Loc No 002	Bldg No 001	Loc No	Bldg No
Deductible Amount	\$ 1,000		\$ 1,000		\$	
Building Amount Valuation	NOT COVERED		\$ 3,295,448 RC			
Business Personal Property Valuation	\$ 1,040 RC		\$ 736,915 RC			
Business Income	ACTUAL BUSINESS LOSS SUSTAINED NOT EXCEEDING 12 CONSECUTIVE MONTHS					
Business Income Waiting Period	Excluded / None / 24 hours / 48 hours / 72 hours 48 HOURS					
SECTION II - LIABILITY	LIMITS OF INSURANCE					
Liability and Medical Expenses Limits of Insurance: Except for Damage to Premises Rented to You, each paid claim for the following coverages reduce the Amount of Insurance we provide during the applicable annual period. Please refer to SECTION II - LIABILITY, D. LIABILITY AND MEDICAL EXPENSES LIMITS OF INSURANCE , paragraph.4. of the Businessowners Coverage Form.						
Liability and Medical Expenses Limit	\$ 1,000,000		Per Occurrence	\$ 2,000,000		Aggregate
Medical Expenses	\$ 10,000		Each Person			
Damage to Premises Rented to You	\$ 1,000,000		All Perils			

Date Issued: 01/20/2017

ORIGINAL/INSURED

Payment Type: DIRECT BILL

BUSINESSOWNERS DECLARATION

BUSINESSOWNERS AMENDED DECLARATIONS EFFECTIVE 12/02/2016 NUMBER 01

13

SUPERSEDES ANY PREVIOUS DECLARATIONS BEARING THE SAME NO. FOR THIS POLICY PERIOD
ADDED ADDITIONAL INSURED & WOS

Policy Number	Policy Period From To	Coverage is Provided in the	Agency Code
OLD-D109962-00	12/02/2016 12/02/2017	HANOVER LLOYDS INSURANCE COMPANY	160403800

Named Insured and Address

DRAGO INVESTMENTS LTD
16227 SAN PEDRO AVE
SAN ANTONIO, TX 78232

Agent

210-402-0288
INSURANCE ONE AGENCY, LC
SUITE 101
601 EMBASSY OAKS
SAN ANTONIO, TX 78216

Additional Property Coverages and Extensions:

See attached Schedule for Additional Coverages provided for under this Policy.

Audit Frequency: Annual

Additional Liability Coverages: General Liability Broadening Endorsement

General Liability Class: 85152

Description: TROPHY STORES

Liability Exposure: \$3,200,000 SALES

Policy Forms, Endorsements and Optional Coverages Attached:

See Forms and Endorsements Schedule

PREVIOUS PREMIUM IS:	\$ 8,622
NET PREMIUM CHANGE IS:	\$ 96
TOTAL BOP COVERAGE PREMIUM:	\$8,318.00
BOP TERRORISM COVG (INCLUDED IN TOTAL POLICY PREMIUM)	\$ 444.00
OTHER THAN FIRE FOLLOWING	\$ 444.00
FIRE FOLLOWING	\$000.00
TOTAL UMBRELLA COVERAGE PREMIUM:	\$400.00
UMB TERRORISM COVG (INCLUDED IN TOTAL POLICY PREMIUM)	\$ 25.00
DEPOSIT PREMIUM:	\$8,718.00
THE TOTAL ACTUAL PREMIUM:	\$8,718.00

Countersigned this ____ Day of _____

Authorized Representative

**This Declarations Page with the Policy Contract, Forms and Endorsements, if any,
Complete the Policy.**

Date Issued: 01/20/2017

ORIGINAL/INSURED

Payment Type: DIRECT BILL

391-1002 08 16

Page 2 of 2

ADDITIONAL PROPERTY COVERAGES AND EXTENSIONS

BUSINESSOWNERS AMENDED DECLARATIONS EFFECTIVE 12/02/2016 NUMBER 01

13 SUPERSEDES ANY PREVIOUS DECLARATIONS BEARING THE SAME NO. FOR THIS POLICY PERIOD
ADDED ADDITIONAL INSURED & WOS

Policy Number	Policy Period From To	Coverage is Provided in the	Agency Code
OLD-D109962-00	12/02/2016 12/02/2017	HANOVER LLOYDS INSURANCE COMPANY	160403800

Named Insured and Address

DRAGO INVESTMENTS LTD
16227 SAN PEDRO AVE
SAN ANTONIO, TX 78232

Agent

210-402-0288
INSURANCE ONE AGENCY, LC
SUITE 101
601 EMBASSY OAKS
SAN ANTONIO, TX 78216

Additional Property Coverages & Extensions	Deductible	Amount Included	Additional Amount Increase	Total Limit
DEBRIS REMOVAL	NONE	\$25,000	N/A	\$25,000
PRESERVATION OF PROPERTY	NONE	90 DAYS	N/A	90 DAYS
FIRE DEPARTMENT SERVICE CHARGE	NONE	\$25,000	N/A	\$25,000
POLLUTANT CLEAN-UP AND REMOVAL	NONE	\$25,000	N/A	\$25,000
MONEY ORDERS AND COUNTERFEIT MONEY	\$500	\$5,000	N/A	\$5,000
FORGERY OR ALTERATION	\$500	\$25,000	N/A	\$25,000
GLASS EXPENSES	\$250	INCLUDED	N/A	INCLUDED
REWARDS ARSON, THEFT AND VANDALISM	NONE	\$10,000	N/A	\$10,000
TENANT SIGNS	\$500	\$5,000	N/A	\$5,000
FIRE PROTECTION EQUIPMENT RECHARGE	NONE	\$25,000	N/A	\$25,000
INSTALLATION FLOATER	\$1,000	\$5,000	N/A	\$5,000
FINE ARTS	\$500	\$10,000	N/A	\$10,000
FENCE AND WALLS	SEE BUILDING AND CONTENTS DEDUCTIBLE	INCLUDED	N/A	INCLUDED
SALES REPRESENTATIVE SAMPLES	\$1,000	\$5,000	N/A	\$5,000
LEASEHOLD INTEREST (TENANT'S ONLY)	NONE	\$10,000	N/A	\$10,000
UNAUTHORIZED BUSINESS CREDIT CARD USE	NONE	\$5,000	N/A	\$5,000
UTILITY SERVICES			N/A	
DIRECT DAMAGE	\$500	\$10,000	N/A	\$10,000
BUSINESS INCOME	24 HOURS	\$5,000	N/A	\$5,000
DEFERRED PAYMENTS	NONE	\$5,000	N/A	\$5,000
NEWLY ACQUIRED OR CONSTRUCTED PROPERTY		180 DAYS	N/A	180 DAYS
BUILDINGS	\$500	\$1,000,000	N/A	\$1,000,000
PERSONAL PROPERTY	\$500	\$500,000	N/A	\$500,000
BUSINESS INCOME AND EXTRA EXPENSE	SEE WAITING PERIOD	\$250,000	N/A	\$250,000
OUTDOOR PROPERTY - TREES, SHRUBS AND PLANTS-\$1,000 EACH ITEM	\$500	\$10,000	N/A	\$10,000

ADDITIONAL PROPERTY COVERAGES AND EXTENSIONS

BUSINESSOWNERS AMENDED DECLARATIONS EFFECTIVE 12/02/2016 NUMBER 01

13

SUPERSEDES ANY PREVIOUS DECLARATIONS BEARING THE SAME NO. FOR THIS POLICY PERIOD

ADDED ADDITIONAL INSURED & WOS

Policy Number	Policy Period From To	Coverage is Provided in the	Agency Code
OLD-D109962-00	12/02/2016 12/02/2017	HANOVER LLOYDS INSURANCE COMPANY	160403800

Named Insured and Address

DRAGO INVESTMENTS LTD
16227 SAN PEDRO AVE
SAN ANTONIO, TX 78232

Agent

210-402-0288
INSURANCE ONE AGENCY, LC
SUITE 101
601 EMBASSY OAKS
SAN ANTONIO, TX 78216

Additional Property Coverages & Extensions	Deductible	Amount Included	Additional Amount Increase	Total Limit
PERSONAL EFFECTS	\$500	\$10,000	N/A	\$10,000
INVENTORY AND LOSS APPRAISAL	NONE	\$10,000	N/A	\$10,000
KEY REPLACEMENT AND LOCK REPAIR	NONE	\$1,000	N/A	\$1,000
APPURTENANT STRUCTURE	\$500	\$50,000	N/A	\$50,000
PERSONAL PROPERTY IN TRANSIT	\$1,000	\$10,000	N/A	\$10,000
EXTENDED BUSINESS INCOME		30 DAYS	N/A	30 DAYS
EMPLOYEE THEFT INCLUDING ERISA COMPLIANCE	\$1,000	\$10,000	N/A	\$10,000
COMMERCIAL TOOLS AND SMALL EQUIP	\$500	\$5,000	N/A	\$5,000
PERSONAL PROPERTY OFF PREMISES	\$1,000	\$50,000	N/A	\$50,000
BUSINESS INCOME FROM DEPENDENT PROPERTIES	72 HOURS	\$5,000	N/A	\$5,000
TERRORISM	SEE BUILDING AND CONTENTS DEDUCTIBLE	SAME AS PROPERTY LIMITS OF INSURANCE IF COVERED	N/A	SAME AS PROPERTY LIMITS OF INSURANCE IF COVERED
INTERRUPTION OF COMPUTER OPERATIONS	SEE WAITING PERIOD	\$10,000	N/A	\$10,000
BUSINESS PERSONAL PROPERTY TEMPORARILY IN PORTABLE STORAGE UNITS	\$500	\$25,000	N/A	\$25,000
CIVIL AUTHORITY	72 HOURS	4 WEEKS	N/A	4 WEEKS
COMPUTER AND FUNDS TRANSFER FRAUD	\$500	\$5,000	N/A	\$5,000
LIMITED COVERAGE FOR FUNGI, WET ROT, OR DRY ROT	\$500	\$50,000	N/A	\$50,000
PAVED SURFACES	\$500	\$25,000	N/A	\$25,000
TENANT BUILDING COVERAGE - REQUIRED BY LEASE	\$500	\$25,000	N/A	\$25,000
TENANT BUSINESS PERSONAL PROPERTY COVERAGE - REQUIRED BY LEASE	\$500	\$25,000	N/A	\$25,000

ADDITIONAL PROPERTY COVERAGES AND EXTENSIONS

BUSINESSOWNERS AMENDED DECLARATIONS EFFECTIVE 12/02/2016 NUMBER 01

SUPERSEDES ANY PREVIOUS DECLARATIONS BEARING THE SAME NO. FOR THIS POLICY PERIOD

ADDED ADDITIONAL INSURED & WOS

13

Policy Number	Policy Period		Coverage is Provided in the	Agency Code
	From	To		
OLD-D109962-00	12/02/2016	12/02/2017	HANOVER LLOYDS INSURANCE COMPANY	160403800

Named Insured and Address

DRAGO INVESTMENTS LTD
16227 SAN PEDRO AVE
SAN ANTONIO, TX 78232

Agent

210-402-0288
INSURANCE ONE AGENCY, LC
SUITE 101
601 EMBASSY OAKS
SAN ANTONIO, TX 78216

**Additional Property
Coverages & Extensions**

Deductible

**Amount
Included**

**Additional
Amount
Increase**

**Total
Limit**

THEFT OF TELEPHONIC SERVICES	\$500	\$25,000	N/A	\$25,000
UNDERGROUND PIPES	\$500	INCLUDED	N/A	INCLUDED

ADDITIONAL PROPERTY COVERAGES AND EXTENSIONS

BUSINESSOWNERS AMENDED DECLARATIONS EFFECTIVE 12/02/2016 NUMBER 01

13 SUPERSEDES ANY PREVIOUS DECLARATIONS BEARING THE SAME NO. FOR THIS POLICY PERIOD
ADDED ADDITIONAL INSURED & WOS

Policy Number	Policy Period		Coverage is Provided in the	Agency Code
	From	To		
OLD-D109962-00	12/02/2016	12/02/2017	HANOVER LLOYDS INSURANCE COMPANY	160403800

Named Insured and Address

DRAGO INVESTMENTS LTD
16227 SAN PEDRO AVE
SAN ANTONIO, TX 78232

Agent

210-402-0288
INSURANCE ONE AGENCY, LC
SUITE 101
601 EMBASSY OAKS
SAN ANTONIO, TX 78216

Additional Property Coverages & Extensions	Loc. No.	Bldg. No.	Deductible Amount	Amount Included	Additional Amount	Total Limit
ORDINANCE OR LAW	001	001	NONE	\$5,000	N/A	\$5,000
COMPUTER EQUIPMENT			\$500	\$35,000	N/A	\$35,000
COMPUTER EQUIPMENT EXTRA EXPENSE			NONE	\$5,000	N/A	\$5,000
ELECTRONIC VANDALISM			\$500			
OCCURRENCE LIMIT				\$10,000	N/A	\$10,000
AGGREGATE LIMIT				\$10,000	N/A	\$10,000
VALUABLE PAPERS AND RECORDS (OTHER THAN ELECTRONIC DATA)			\$1,000			
ON PREMISES				\$25,000	N/A	\$25,000
OFF PREMISES				\$25,000	N/A	\$25,000
ACCOUNTS RECEIVABLE			\$1,000			
ON PREMISES				\$25,000	N/A	\$25,000
OFF PREMISES				\$25,000	N/A	\$25,000
MONEY AND SECURITIES			\$500			
ON PREMISES				\$10,000	N/A	\$10,000
OFF PREMISES				\$5,000	N/A	\$5,000
EQUIPMENT BREAKDOWN			\$1,000	INCLUDED	N/A	INCLUDED
PROTECTIVE DEVICES CREDIT						
AUTOMATIC SPRINKLER SYSTEM				NO		
AUTOMATIC FIRE ALARM				NO		
CENTRAL STATION SECURITY				NO		
COLLAPSE			\$500	INCLUDED	N/A	INCLUDED
UTILITY SERVICES						
DIRECT DAMAGE			\$500	\$25,000	N/A	\$25,000
TIME-ELEMENT			24 HOURS	\$25,000	N/A	\$25,000

Form 391-1018A (9-04)

Date Issued: 01/20/2017

ORIGINAL/INSURED

ADDITIONAL PROPERTY COVERAGES AND EXTENSIONS

BUSINESSOWNERS AMENDED DECLARATIONS EFFECTIVE 12/02/2016 NUMBER 01

13 SUPERSEDES ANY PREVIOUS DECLARATIONS BEARING THE SAME NO. FOR THIS POLICY PERIOD
ADDED ADDITIONAL INSURED & WOS

Policy Number	From	Policy Period To	Coverage Is Provided in the	Agency Code
OLD-D109962-00	12/02/2016	12/02/2017	HANOVER LLOYDS INSURANCE COMPANY	160403800

Named Insured and Address

DRAGO INVESTMENTS LTD
16227 SAN PEDRO AVE
SAN ANTONIO, TX 78232

Agent

210-402-0288
INSURANCE ONE AGENCY, LC
SUITE 101
601 EMBASSY OAKS
SAN ANTONIO, TX 78216

Additional Property Coverages & Extensions	Loc. No.	Bldg. No.	Deductible Amount	Amount Included	Additional Amount	Total Limit
ORDINANCE OR LAW	002	001	NONE	\$5,000	N/A	\$5,000
COMPUTER EQUIPMENT			\$500	\$35,000	N/A	\$35,000
COMPUTER EQUIPMENT EXTRA EXPENSE			NONE	\$5,000	N/A	\$5,000
ELECTRONIC VANDALISM			\$500			
OCCURRENCE LIMIT				\$10,000	N/A	\$10,000
AGGREGATE LIMIT				\$10,000	N/A	\$10,000
VALUABLE PAPERS AND RECORDS (OTHER THAN ELECTRONIC DATA)			\$1,000			
ON PREMISES				\$25,000	N/A	\$25,000
OFF PREMISES				\$25,000	N/A	\$25,000
ACCOUNTS RECEIVABLE			\$1,000			
ON PREMISES				\$25,000	N/A	\$25,000
OFF PREMISES				\$25,000	N/A	\$25,000
MONEY AND SECURITIES			\$500			
ON PREMISES				\$10,000	N/A	\$10,000
OFF PREMISES				\$5,000	N/A	\$5,000
EQUIPMENT BREAKDOWN			\$1,000	INCLUDED	N/A	INCLUDED
PROTECTIVE DEVICES CREDIT						
AUTOMATIC SPRINKLER SYSTEM				NO		
AUTOMATIC FIRE ALARM				YES		
CENTRAL STATION SECURITY				YES		
COLLAPSE			\$500	INCLUDED	N/A	INCLUDED
UTILITY SERVICES						
DIRECT DAMAGE			\$500	\$25,000	N/A	\$25,000
TIME-ELEMENT			24 HOURS	\$25,000	N/A	\$25,000

Form 391-1018A (9-04)

Date Issued: 01/20/2017

ORIGINAL/INSURED

BUSINESSOWNERS DECLARATION**BUSINESSOWNERS AMENDED DECLARATIONS EFFECTIVE 12/02/2016 NUMBER 01**

13

COMPLEX

SUPERSEDES ANY PREVIOUS DECLARATIONS BEARING THE SAME NO. FOR THIS POLICY PERIOD
ADDED ADDITIONAL INSURED & WOS

Policy Number	Policy Period		Coverage Is Provided in the	Agency Code
	From	To		
OLD-D109962-00	12/02/2016	12/02/2017	HANOVER LLOYDS INSURANCE COMPANY	160403800

Named Insured and AddressDRAGO INVESTMENTS LTD
16227 SAN PEDRO AVE
SAN ANTONIO, TX 78232**Agent**210-402-0288
INSURANCE ONE AGENCY, LC
SUITE 101
601 EMBASSY OAKS
SAN ANTONIO, TX 78216**NAMED INSURED ENDORSEMENT**DRAGO INVESTMENTS LTD
MONARCH TROPHY STUDIO

BUSINESSOWNERS DECLARATION

BUSINESSOWNERS AMENDED DECLARATIONS EFFECTIVE 12/02/2016 NUMBER 01

13

SUPERSEDES ANY PREVIOUS DECLARATIONS BEARING THE SAME NO. FOR THIS POLICY PERIOD
ADDED ADDITIONAL INSURED & WOS

Policy Number	From	Policy Period To	Coverage is Provided in the	Agency Code
OLD-D109962-00	12/02/2016	12/02/2017	HANOVER LLOYDS INSURANCE COMPANY	160403800

Named Insured and Address

DRAGO INVESTMENTS LTD
16227 SAN PEDRO AVE
SAN ANTONIO, TX 78232

Agent

210-402-0288
INSURANCE ONE AGENCY, LC
SUITE 101
601 EMBASSY OAKS
SAN ANTONIO, TX 78216

Forms and Endorsements Schedule

Form Number	Edition Date	Description
391-1403	08/16	DELUXE BRONZE BROADENING
BP0404	01/10	HIRED AUTO NON-OWNED AUTO LIAB
401-1127	01/15	TERRORISM ACCEPTANCE OF COVG
391-1114	01/15	CAP ON LOSSES FROM TERRORISM
391-1313	01/15	EXCLUSION OF PUNITIVE DAMAGES
391-1006	08/16	LIABILITY SPECIAL BROADENING
391-1003	08/16	BUSINESSOWNERS COVERAGE FORM
BP0417	01/10	EMPLOYMT RELATED PRACTICES EXCL
231-0475	06/89	PILR NOTICE
421-0022	07/02	ASBESTOS EXCLUSION
391-1150	07/02	TEXAS CHANGES
391-1102	08/16	EXCL - FUNGI OR BACTERIA LIAB
391-1375	01/10	AMEND LIMITS PERSONAL AND ADV
401-1122	02/14	TEXAS POLICY HOLDER NOTICE
391-1054	08/16	TEXAS CHANGES
401-1374	01/15	DISCLOSURE PURSUANT TO TRIA
391-1209	03/06	EPLI INSURANCE CVG ENDR
391-1206	06/06	EPLI IMPORTANT NOTICE
391-1208	03/06	EPLI SUPPLEMENTAL DEC
391-1413	08/16	EMPLOYEE BENEFITS LIABILITY
* 391-1941	08/16	AI DESIGNATED PER OR ORG
* BP0497	07/02	WAIVER OF TRANSFER OF RIGHTS

**COMMERCIAL EMPLOYMENT PRACTICES
LIABILITY INSURANCE COVERAGE ENDORSEMENT
SUPPLEMENTAL DECLARATIONS**



Policy Number: OLD D109962 00
Account Number: 1512474888
Named Insured: DRAGO INVESTMENTS LTD

Agent: 1604038

NOTICE

- EXCEPT TO SUCH EXTENT AS MAY OTHERWISE BE PROVIDED HEREIN, THE COVERAGE OF THIS COVERAGE ENDORSEMENT IS LIMITED TO LIABILITY FOR ONLY THOSE CLAIMS OR SUITS THAT ARE FIRST MADE AGAINST THE INSUREDS DURING THE EPL COVERAGE PERIOD AND REPORTED IN WRITING TO THE INSURER PURSUANT TO THE TERMS HEREIN. VARIOUS PROVISIONS IN THIS COVERAGE ENDORSEMENT RESTRICT COVERAGE. PLEASE READ THE ENTIRE COVERAGE ENDORSEMENT CAREFULLY TO DETERMINE RIGHTS, DUTIES AND WHAT IS AND IS NOT COVERED.
- THE LIMIT OF LIABILITY AVAILABLE TO PAY JUDGEMENTS OR SETTLEMENTS UNDER THIS COVERAGE ENDORSEMENT SHALL BE REDUCED BY AMOUNTS INCURRED FOR LEGAL DEFENSE. AMOUNTS INCURRED FOR LEGAL DEFENSE SHALL BE APPLIED AGAINST THE DEDUCTIBLE AMOUNT.

EPL Coverage Period:	From: 12/02/2016 To: 12/02/2017	At 12:01 A.M. Standard Time at your mailing address shown on the Declarations page of this policy.
EPL Aggregate Limit of Liability:	\$ 25,000.00	Aggregate for all "loss" combined, including "defense costs".
EPL Deductible Amount:	\$ 5,000.00	For "loss" arising from claims or suits alleging the same "wrongful employment act" or "related wrongful employment acts".
EPL Original Inception Date:	12/02/2016	(Enter "original inception date") If no date is shown, "we" will consider the "original inception date" to be the same as the beginning of this coverage endorsement.

This insurance does not apply to "loss" arising out of a "wrongful employment act" that: (1) commences on or takes place prior to the "original inception date" shown here, or (2) arises out of incidents or circumstance of which "you" had knowledge prior to the "original inception date" shown.

EPL COVERAGE PREMIUM:	\$ 339.00
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NEW BUSINESS POLICY

COMMERCIAL UMBRELLA POLICY

THESE DECLARATIONS TOGETHER WITH THE COMMON POLICY CONDITIONS AND COVERAGE FORM(S) COMPLETE THE BELOW NUMBERED POLICY

POLICY NUMBER: OLD-D109962-00

DECLARATIONS

Named Insured and Address (No., Street, Town, County, State)	Agent
DRAGO INVESTMENTS LTD 16227 SAN PEDRO AVE SAN ANTONIO, TX 78232	160403800 INSURANCE ONE AGENCY, LC SUITE 101 601 EMBASSY OAKS SAN ANTONIO, TX 78216

Policy Period: (Month, Day, Year)

From 12/02/2016 To 12/02/2017

12:01 AM, standard time at the address of the Named Insured as stated herein.

Form of Business:

- ☐ Individual
 ☐ Partnership
 ☒ Corporation
 ☐ Limited Liability Company
☐ Organization (Other than Partnership, Joint Venture, or Limited Liability Company)

Business Description:

RETAILER.

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY. THIS PREMIUM MAY BE SUBJECT TO AUDIT.

Limit of Liability (Section III)

Each Occurrence Limit	\$ 1,000,000
General Aggregate Limit	\$ 1,000,000
Product Completed Operations Aggregate Limit	\$ 1,000,000

Retained Limit	Self-Insured Retention	\$ NIL
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Premium Computation

Annual Premium	\$ 400.00
Advance Premium	\$ 400.00

Endorsements:

CU2130	01/15	CU2136	01/15	CU0403	12/07	473-0004	10/05	CU2186	05/14	473-0016	10/05
473-0023	10/05	473-0040	10/05	473-0085	04/06	CU0001	12/07	473-2194	08/16	CU2123	02/02
CU2125	12/01	CU0155	06/06	CU2127	12/04	CU2150	03/05	IL0017	11/98	CU2436	12/05
IL0275	09/07	CU0004	05/09	473-1125	02/09						

- ☐ PRE PAID - the total annual premium is due at inception.
☐ HANOCASH - the annual premium is payable according to the term of the Hanocash endorsement attachment
☐ ACCOUNT BILL
 ☒ DIRECT BILL
 ☐ Annual
 ☐ Semi-Annual
 ☐ Other
 Audit period: Non Auditable Unless indicated by ☐ Annual ☐ Semi-Annual ☐ Other
 If you cancel this policy, we shall receive and retain not less than \$ as a policy minimum premium.

SCHEDULE A - SCHEDULE OF UNDERLYING POLICIES

Insured: DRAGO INVESTMENTS LTD

Effective on and after: 12/02/2016 , 12:01 AM Standard Time

This schedule is part of Policy Number: OLD-D109962-00

CARRIER, POLICY NUMBER & PERIOD

CARRIER, POLICY NUMBER & PERIOD	TYPE OF POLICY	APPLICABLE LIMITS OR AMOUNT OF INSURANCE
a)Carrier: HANOVER LLOYDS INSURANCE COMPANY Policy Number: OLD-D109962-00 Policy Period: 12/02/2016 TO 12/02/2017	Commercial General Liability <input checked="" type="checkbox"/> Non-owned & Hired Autos	\$ 1,000,000 Each Occurrence \$ 2,000,000 General Aggregate \$ 2,000,000 Product/Compl etc Operations Aggregate

(b) Carrier: Policy Number: Policy Period:	Comprehensive Automobile Liability	Bodily Injury and Property Damage Liability Combined \$ Each Accident Bodily Injury \$ Each Person \$ Each Accident Property Damage \$ Each Accident
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(c)Carrier: EMPLOYERS PREFERRED INSURANCE CO Policy Number: EIG 2184169 01 Policy Period: 03/07/2016 TO 03/07/2017	Standard Workers Compensation & Employers Liability Please Note: The Umbrella Coverage for Workers Compensation and Employers Liability is not applicable in situations where an employee is subject to the New York Workers Compensation Law.	Coverage B - Employers Liability Bodily Injury by Accident \$ 1,000,000 Each Accident Bodily Injury by Disease \$ 1,000,000 Aggregate \$ 1,000,000 Each Employee
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(d)Carrier: Policy Number: Policy Period:	Liquor Liability	\$ Limit of Liability
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(e)Carrier: Policy Number: Policy Period:	Professional Liability	\$ Limit of Liability
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An "X" marked in the box provided indicates these broadening or optional coverages are provided in the Underlying Insurance

(f) Carrier: Policy Number: Policy Period:	Directors & Officers Liability	\$ Limit of Liability
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(g) Carrier: HANOVER LLOYDS INSURANCE COMPANY Policy Number: OLD-D109962-00 Policy Period: 12/02/2016 TO 12/02/2017	Employee Benefits Liability	\$ 1,000,000 Limit of Liability
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Countersigned By:

Date:

Authorized Representative of the Company

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS COVERAGE FORM

SCHEDULE

Name of Person or Organization:

LEARFIELD LICENSING PARTNERS, LLC ALL INSTITUTIONS
REPRESENTED BY LEARFIELD LICENSING FOR WHICH THE INSURED IS
LICENSED AND THEIR RESPECTIVE AGENTS, OFFICERS AND EMPLOYEES

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

For the purpose of coverage provided by this endorsement, the following changes are made to **SECTION II - LIABILITY**:

A. The following is added to SECTION II - LIABILITY, C. Who is an Insured:

Any person or organization shown in the Schedule above is also an additional insured, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf in the performance of your ongoing operations or in connection with your premises owned by or rented to you.

However:

- a. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- b. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. The following is added to SECTION II - LIABILITY, D. Liability and Medical Expenses Limits of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- a. Required by the contract or agreement; or
- b. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

ALL OTHER TERMS, CONDITIONS, AND EXCLUSIONS REMAIN UNCHANGED.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**WAIVER OF TRANSFER OF RIGHTS OF RECOVERY
AGAINST OTHERS TO US**

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS COVERAGE FORM

SCHEDULE*

Name Of Person Or Organization:

LEARFIELD LICENSING PARTNERS, LLC ALL INSTITUTIONS
REPRESENTED BY LEARFIELD LICENSING FOR WHICH THE
INSURED IS LICENSED, AND THEIR RESPECTIVE AGENTS, OFFICERS
AND EMPLOYEES

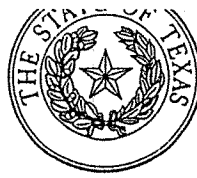
* Information required to complete this Schedule, if not shown on this endorsement, will be shown in the
Declarations.

**Paragraph K. Transfer Of Rights Of Recovery
Against Others To Us in Section III - Common Pol-
icy** Conditions is amended by the addition of the
following:

We waive any right of recovery we may have
against the person or organization shown in the
Schedule above because of payments we make for
injury or damage arising out of your ongoing op-
erations or "your work" done under a contract with
that person or organization and included in the
"products-completed operations hazard". This
waiver applies only to the person or organization
shown in the Schedule above.

Organization of Drago Investments Partnership
DBA showing that Drago Investments operates
as Monarch Trophy Studio.

Showing Charles Drago as Partner so he
can sign Bid as Partner



The State of Texas
Secretary of State

CERTIFICATE OF ORGANIZATION
OF

DRAGO INVESTMENTS GP, LLC

FILING NUMBER 07084867

THE UNDERSIGNED, AS SECRETARY OF STATE OF THE STATE OF TEXAS,
HEREBY CERTIFIES THAT THE ATTACHED ARTICLES OF ORGANIZATION FOR THE
ABOVE NAMED COMPANY HAVE BEEN RECEIVED IN THIS OFFICE AND HAVE BEEN
FOUND TO CONFORM TO LAW.

ACCORDINGLY, THE UNDERSIGNED, AS SECRETARY OF STATE, AND BY VIRTUE
OF THE AUTHORITY VESTED IN THE SECRETARY BY LAW, HEREBY ISSUES THIS
CERTIFICATE OF ORGANIZATION.

ISSUANCE OF THIS CERTIFICATE OF ORGANIZATION DOES NOT AUTHORIZE
THE USE OF A COMPANY NAME IN THIS STATE IN VIOLATION OF THE RIGHTS OF
ANOTHER ENTITY UNDER THE FEDERAL TRADEMARK ACT OF 1946, THE TEXAS TRADEMARK
LAW, THE ASSUMED BUSINESS OR PROFESSIONAL NAME ACT OR THE COMMON LAW.

DATED MAR. 1, 2001

EFFECTIVE MAR. 1, 2001



Henry Cuellar

Henry Cuellar, Secretary of State

CERTIFICATE OF LIMITED PARTNERSHIP

MAR 1 2001

Corporations Section

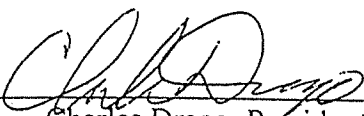
This Certificate of Limited Partnership is being filed pursuant to the provisions of the Texas Revised Limited Partnership Act (the "Act").

1. The name of the limited partnership is Drago Investments, Ltd.
2. The address of the limited partnership's registered office is 4 Inwood Mist, San Antonio, Texas 78248, and the name and address of the registered agent for service of process required to be maintained by Section 1.06 of the Act are Charles Drago, 4 Inwood Mist, San Antonio, Texas 78248.
3. The address of the principal office in the United States where records are to be kept or made available under Section 1.07 of the Act is 4 Inwood Mist, San Antonio, Texas 78248.
4. The name and mailing address (which is the same as the street address) of the sole general partner are Drago Investments GP, LLC, a Texas limited liability company, 4 Inwood Mist, San Antonio, Texas 78248.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Limited Partnership as of the 1st day of March, 2001.

DRAGO INVESTMENTS, LTD, a Texas Limited Partnership

By: DRAGO INVESTMENTS GP, LLC, a Texas Limited Liability Company, General Partner

By: 
Charles Drago, President

ASSUMED NAME CERTIFICATE


This Assumed Name Certificate is being filed pursuant to the provisions of Section 36.11 of the Texas Business and Commerce Code:

1. The assumed name under which business shall be conducted is "Monarch Trophy Studio."
2. The name of the registrant limited partnership, as stated in its Certificate of Limited Partnership, is "Drago Investments, Ltd."
3. The registrant partnership was formed under the laws of the State of Texas, and the address of its registered office is 2121 N.W. Military Highway, San Antonio, Texas 78213.
4. The period during which the foregoing assumed name will be used is the full ten-year period allowed by law.
5. The registrant limited partnership is a Texas limited partnership.
6. The address of the registrant limited partnership's registered office is 2121 N.W. Military Highway, San Antonio, Texas 78213, and the name of its registered agent at such address is Charles Drago. The address of the registrant limited partnership's principal office in Texas is the same as the address of its registered office.
7. The counties within the State of Texas where business is to be conducted by the registrant limited partnership under the foregoing assumed name shall be all counties within the State of Texas.

IN WITNESS WHEREOF, the undersigned has executed this Assumed Name Certificate as of the 21st day of November, 2002.

DRAGO INVESTMENTS, LTD.,
a Texas limited partnership

By: DRAGO INVESTMENTS GP, LLC,
a Texas limited liability company, Sole General Partner

By: 
Charles Drago, President

Request for Taxpayer Identification Number and Certification

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

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Drago Investments LTD	
	2 Business name/disregarded entity name, if different from above Monarch Trophy Studio	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <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.) 16227 San Pedro Ave	Requester's name and address (optional)
	6 City, state, and ZIP code San Antonio, TX, 78232	
	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 Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number								
				-				

or

Employer identification number									
7	4	-	2	9	9	4	2	6	4

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 on page 3.

Sign Here	Signature of U.S. person ▶ 	Date ▶ 7/25/17
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General Instructions

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

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

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:

- Form 1099-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? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),

3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code* on page 3 and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships* above.

What is FATCA reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code* on page 3 and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9.

a. Individual. Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note. ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. Sole proprietor or single-member LLC. Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation. Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. Other entities. Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. Disregarded entity. For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

Limited Liability Company (LLC). If the name on line 1 is an LLC treated as a partnership for U.S. federal tax purposes, check the "Limited Liability Company" box and enter "P" in the space provided. If the LLC has filed Form 8832 or 2553 to be taxed as a corporation, check the "Limited Liability Company" box and in the space provided enter "C" for C corporation or "S" for S corporation. If it is a single-member LLC that is a disregarded entity, do not check the "Limited Liability Company" box; instead check the first box in line 3 "Individual/sole proprietor or single-member LLC."

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space in line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note. You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on this page), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code* earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee ¹ The actual owner ¹
5. Sole proprietorship or disregarded entity owned by an individual	The owner ³
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor ⁴
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity ⁴
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 2.

*Note. Grantor also must provide a Form W-9 to trustee of trust.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.