

**GREEN RIVER GROUP LLC** 

PO Box 18039, Morgantown, WV 26507 Telephone: 304-594-3991 Fax: 304-594-3992

2012 FEB 20 PM 1:20

**FAX TRANSMISSION LETTER** 

| TO:   | State of WV Purchasing Division |    |       |    | <br> |
|-------|---------------------------------|----|-------|----|------|
|       | 304/558-3970                    |    |       |    |      |
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| FROM: | Green River Group, LLC          |    |       | 17 |      |
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| RFQ#  | DEP15724                        |    |       |    | <br> |
| DATE: | 20-Mar-12                       | _  | TIME: | -  |      |
| NO OF | PAGES (INCLUDING THIS PAGE)     | 20 |       |    |      |

**IMPORTANT** 

Please complete the information below and affix the label to the outside of you bid envelope. Thank You

Sealed Bid Enclosed

RFQ# DEP15724

Buyer: GN -23

Bid Opening Date: 3/20/2012

Bid Opening Time: 1:30 PM

Mail to:

WV Purchasing Division 2019 Washington St. East Charleston, WV 25305-0130 \*709050315



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State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130 Charleston, WV 25305-0130

Request for AFONUMBER Quotation

DEP15724

PAGE

304-594-3991 GREEN RIVER GROUP LLC PO BOX 18039

MORGANTOWN WV 26507-8039 GUY NISBET 04-558-8802

ADDRESS CORRESPONDENCE TO A TENTION OF

ENVIRONMENTAL PROTECTION DEPARTMENT OF

OFFICE OF AML&R 601 57TH STREET SE

T CHARLESTON, WV

25304 304-926-0499

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State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130 Charleston, WV 25305-0130

304-594-3991

Request for RECTION OF THE PROPERTY OF THE PRO Quotation

**DEP15724** 

PAGE

ADDRESS CORRESPONDENCE TO A ITENTION OF

GUY NISBET 304-558-8802

ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304 304-926-0499

GREEN RIVER GROUP LLC PO BOX 18039 MORGANTOWN WV 26507-8039

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State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

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GUY NISBET 304-558-8802

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304-594-3991 GREEN RIVER GROUP LLC PO BOX 18039

MORGANTOWN WV 26507-8039 **ENVIRONMENTAL PROTECTION** DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304 304-926-0499

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ADDRESS CHANGES TO BE NOTED ABOVE

DATE PRINTED TERMS OF SALE SHIP VIA F.O.B. FREIGHT TERMS 02/02/2012 BID OPENING DATE: BID OPENING TIME 01:30PM 03/20/2012 CAT, UOP ITEM NUMBER UNIT PRICE AMOUNT LINE QUANTITY NO. 962-73 JB 0001 1 RECLAMATION: RESTORATION OF LAND & OTHER PROPERTIES REQUEST FOR QUOTATION THE WEST VIRGINIA PURCHASING DIVISION, ON BEHALF OF TH WEST VIRGINIA DEPARTMENT OF ENVIRONMENTAL PROTECTION, IS SOLICITING BIDS FROM QUALIFIED CONTRACTORS FOR A CONTRACT TO PROVIDE ALL LABOR AND MATERIALS FOR THE RECLAMATION OF 50-AC ABANDONED MINE PROJECT KNOWN AS TIPPLE" PROJECT. THE "DOTSON LOCATED IN MORGANTOWN, WEST VIRGINIA, THE SITE IS co.). (MONONGALIA A MANDATORY ON SITE PREBID CONFERENCE SHALL BE HELD ON ALL INTERESTED PARTIES ARE 02/28/12 0 10:00 AM. REQUIRED TO ATTEND THIS MEETING. FAILURE TO ATTEND THE MANDATORY PRE-BID SHALL RESULT IN DISQUALIFICATION OF NO ONE PERSON MAY REPRESENT MORE THAN ONE THE BID. ALSO, PREBIDS WILL INVOLVE EXTENSIVE FOOT BIDDER. TRAVEL OVER DIFFICULT TERRAIN AND/OR DURING INCLEMENT WEATHER. AN ATTENDANCE SHEET WILL BE MADE AVAILABLE FOR ALL POTENTIAL BIDDERS TO COMPLETE. THIS WILL SERVE AS THE OFFICIAL DOCUMENT VERIFYING ATTENDANCE AT THE MANDATORY FAILURE TO PROVIDE YOUR COMPANY AND PRE-BID. REPRESENTATIVE NAME ON THE ATTENDANCE SHEET WILL RESULT IN DISQUALIFICATION OF THE BID. THE STATE WILL NOT ACCEPT ANY OTHER DOCUMENTATION TO VERIFY ATTENDANCE. THE BIDDER IS RESPONSIBLE FOR ENSURING THEY HAVE SEE REVERSE SIDE FOR TERMS AND CONDITIONS TELEPHONE DATE SIGNATURE

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State of West Virginia Pepartment of Administration Pep 15724 Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

DEP15724

PAGE

GUY NISBET 304-558-8802

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\*709050315 304-594-3991 GREEN RIVER GROUP LLC PO BOX 18039

MORGANTOWN WV 26507-8039

ENVIRONMENTAL PROTECTION SH-P TO DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304 304-926-0499

ADDRESS CORRESPONDENCE TO ATTENTION OF

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State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

TO

RFO NUMBER DEP15724

PAGE 3

ADDRESS CORRESPONDENCE TO ATTENTION OF GUY NISBET 304-558-8802

\*709050315 PO BOX 18039 MORGANTOWN WV

304-594-3991 GREEN RIVER GROUP LLC

26507-8039

ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 304-926-0499 25304

DATE PRINTED TERMS OF SALE SHIP VIA F,O.B, FREIGHT TERMS 02/02/2012 03/20/2012 01:30PM BID OPENING DATE: BID OPENING TIME CAT, ITEM NUMBER AMOUNT QUANTITY UNITPRICE UOP LINE ON CD, TO PRINT COMPANIES IN CHARLESTON, CLARKSBURG, AND OTHER AREAS UPON REQUEST. \*\*\*\*THE CONTRACTOR WILL BE RESPONSIBLE FOR ALL PRINTING COSTS. \*\* \*\* EXHIBIT 5 WEST VIRGINIA CODE 21-1D-5 PROVIDES THAT: ANY SOLICI-TATION FOR A PUBLIC IMPROVEMENT CONSTRUCTION CONTRACT REQUIRES EACH VENDOR THAT SUBMITS A BID FOR THE WORK TO SUBMIT AT THE SAME TIME AN AFFIDAVIT OF COMPLAINCE THE ENCLOSED DRUG-FREE WORKPLACE WITH THE BID. AFFIDAVIT MUST BE SIGNED AND SUBMITTED WITH THE BID AS EVIDENCE OF THE VENDOR'S COMPLIANCE WITH THE PROVISIONS OF ARTICLE ID, CHAPTER 21 OF THE WEST VIRGINIA CODE. FAILURE TO SUBMIT THE SIGNED DRUG-FREE WORKPLACE AFFIDAVIT WITH THE BID SHALL RESULT IN DISQUALIFICATION OF SUCH BID. NOTICE TO PROCEED: THIS CONTRACT IS TO BE PERFORMED WITHIN 365 CALENDAR DAYS AFTER THE NOTICE TO PROCEED IS RECEIVED. UNLESS OTHERWISE SPECIFIED, THE FULLY EXECUTED PURCHASE ORDER WILL BE CONSIDERED NOTICE TO PROCEED. THE DIRECTOR OF PURCHASING RESERVES THE CANCELLATION: RIGHT TO CANCEL THIS CONTRACT IMMEDIATELY UPON WRITTEN NOTICE TO THE VENDOR IF THE MATERIALS OR WORKMANSHIP SUPPLIED ARE OF AN INFERIOR QUALITY OR DO NOT CONFORM WITH THE SPECIFICATIONS OF THE BID AND CONTRACT HEREIN. WAGE RATES: THE CONTRACTOR OR SUBCONTRACTOR SHALL PAY THE HIGHER OF THE U.S. DEPARTMENT OF LABOR MINIMUM WAGE RATES AS ESTABLISHED FOR MONONGALIA COUNTY, PURSUANT TO WEST VIRGINIA CODE 21-5A, ET, SEQ. SEE REVERSE SIDE FOR TERMS AND CONDITIONS TELEPHONE SIGNATURE FEIN TITLE ADDRESS CHANGES TO BE NOTED ABOVE

\*709050315

PO BOX 18039

GREEN RIVER GROUP LLC

MORGANTOWN WV 26507-8039



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State of West Virginia Department of Administration Quotation Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

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#### Request for Pronumber

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GUY NISBET 304-558-8802

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ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304

304-926-0499

DATE PRINTED TERMS OF SALE SHIP VIA B.O.B; EREIGHT TERMS 02/02/2012 BID OPENING DATE: 03/20/2012 BID OPENING TIME 01:30PM CAT. UNIT PRICE AMOUNT ITEM NUMBER LINE QUANTITY UOP (PREVAILING WAGE RATES APPLY TO THIS PROJECT.) ANY REFERENCES MADE TO ARBITRATION OR ARBITRATION: INTEREST FOR PAYMENTS DUE (EXCEPT FOR ANY INTEREST REQUIRED BY STATE LAW) CONTAINED IN THIS CONTRACT OR IN ANY AMERICAN INSTITUTE OF ARCHITECTS DOCUMENTS PERTAINING TO THIS CONTRACT ARE HEREBY DELETED. VENDOR IS REQUIRED TO PROVIDE WORKERS' COMPENSATION: A CERTIFICATE FROM WORKERS' COMPENSATION IF SUCCESSFUL. ALL OF THE ITEMS CHECKED BELOW WILL BE A REQUIREMENT OF THIS CONTRACT: (XX) INSURANCE: SUCCESSFUL VENDOR SHALL FURNISH PROOF OF COMMERCIAL GENERAL LIABILITY INSURANCE PRIOR TO ISSUANCE OF CONTRACT. UNLESS OTHERWISE SPECIFIED IN THE BID DOCUMENTS, THE MINIMUM AMOUNT OF INSURANCE COVERAGE REQUIRED IS \$250,000. ) BUILDER'S RISK INSURANCE: SUCCESSFUL VENDOR SHALL FURNISH PROOF OF BUILDERS RISK - ALL RISK INSURANCE IN AN AMOUNT EQUAL TO 100% OF THE AMOUNT OF THE CONTRACT. FIVE PERCENT (5%) OF THE TOTAL AMOUNT OF (XX) BONDS: THE BID PAYABLE TO THE STATE OF WEST VIRGINIA, SHALL BE SUBMITTED WITH EACH BID AS A BID BOND. THE SUCCESSFUL BIDDER SHALL ALSO FURNISH A PERFORMANCE BOND AND LABOR/ MATERIAL BOND FOR 100% OF THE AMOUNT OF THE CONTRACT. BONDS MAY BE PROVIDED IN THE FORM OF A CERTIFIED CHECK, IRREVOCABLE LETTER OF CREDIT, OR BOND FURNISHED BY A SOLVENT SURETY COMPANY AUTHORIZED TO DO BUSINESS IN THE A LETTER OF CREDIT SUBMITTED STATE OF WEST VIRGINIA. IN LIEU OF A BOND WILL ONLY BE ALLOWED FOR PROJECTS PERSONAL OR BUSINESS CHECKS ARE NOT UNDER \$100,000. SEE REVERSE SIDE POR TERMS AND CONDITIONS TELEPHONE SIGNATURE

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State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130 Charleston, WV 25305-0130

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PAGE 5

AUDRESS CORRESPONDENCE: TO ATTENTION OF **GUY NISBET** 304-558-8802

\*709050315 304-594-3991 GREEN RIVER GROUP LLC PO BOX 18039

MORGANTOWN WV 26507-8039 **ENVIRONMENTAL PROTECTION** DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304 304-926-0499

| DATE PRIN         | TEO                                                        | JE                                                                                     | RMS OF SAI                                     | LE                                                      |                                                   | SHI                              | IP VIA                                       |                                                 |                                         | de de                                     | F,Q,B,                             |                                    |               | FREIGHTTERMS    | <b>3</b> |
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| LINE              | QI.                                                        | JANTITY                                                                                | UOP                                            | CAT.<br>NO.                                             |                                                   | .ITEM N                          | NUMBER                                       |                                                 |                                         | וט                                        | NIT PAK                            | E                                  |               | AMOUNT          |          |
|                   |                                                            | TABLE I                                                                                |                                                |                                                         |                                                   |                                  |                                              | воир,                                           | PE                                      | RFOR                                      | MAN                                | CE                                 |               |                 |          |
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\*709050315

PO BOX 18039

GREEN RIVER GROUP LLC

MORGANTOWN WV 26507-8039



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State of West Virginia Department of Administration Quotation Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

304-594-3991

#### Request for AFONUMBER

**DEP15724** 

ADDRESS CORRESPONDENCE TO ATTENTION OF

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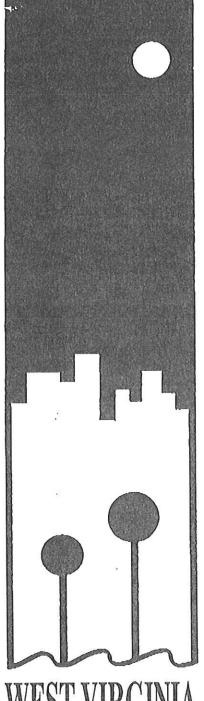
**GUY NISBET** 304-558-8802

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ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV

304-926-0499

25304 DATE PRINTED TEAMS OF SALE SHIP VIA F.O.B. FREIGHT TERMS 02/02/2012 BID OPENING DATE: 03/20/2012 BID OPENING TIME 01:30PM CAT, UNIT PRICE AMQUNT. TEM NUMBER LINE YTITAAUD YOU NO. BIDDER TO COMPLETE: Green River Grap CONTRACTORS NAME: CONTRACTORS LICENSE #: THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FURNISH A COPY OF THEIR CONTRACTORS LICENSE PRIOR TO ISSUANCE OF A PURCHASE ORDER/CONTRACT. APPLICABLE LAW THE WEST VIRGINIA STATE CODE, PURCHASING DIVISION RULES & REGULATIONS, AND THE INFORMATION PROVIDED IN THE "REQUEST FOR QUOTATION" ISSUED BY THE PURCHASING DIVISION IS THE SOLE AUTHORITY GOVERNING THIS PROCUREMENT. ANY INFORMATION PROVIDED IN SPECIFICATION MANUALS, OR ANY OTHER SOURCE, VERBAL OR WRITTEN, WHICH CONTRADICTS OR ALTERS THE INFORMATION PROVIDED FROM THE SOURCES AS DESCRIBED IN THE ABOVE PARAGRAPH IS VOID AND OF NO EFFECT. (1) NOTICE TO PROCEED: THE CONSTRUCTION WORK SPECIFIED HEREIN IS TO BE COMPLETED WITHIN 365 CALENDAR DAYS AFTER THE OFFICIAL NOTICE TO PROCEED IS RECEIVED. IN THE EVENT THAT A PRE-CONSTRUCTION CONFERENCE IS REQUIRED, THE NOTICE TO PROCEED SHALL BE THE SPECIFIC DATE ESTABLISHED IN THE PRE-CONSTRUCTION CONFERENCE. (2) GUARANTEE AND MAINTENANCE: (A) THE MATERIALS AND WORKMANSHIP AFFECTED BY THE CONTRACTOR ARE SUBJECT TO THE GUARANTEE ESTABLISHED BY CUSTOM OF THE RESPECTIVE TRADES. IN THE ABSENCE OF SEE REVERSE SIDE FOR TERMS AND CONDITIONS TELEPHONE SIGNATURE TITLE ADDRESS CHANGES TO BE NOTED ABOVE



### WEST VIRGINIA CONTRACTOR LICENSING BOARD

## **CONTRACTOR LICENSE**

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV024807

Classification:

GENERAL ENGINEERING

GREEN RIVER GROUP LLC DBA GREEN RIVER GROUP LLC PO BOX 18039 MORGANTOWN, WV 26507-8039

**Date Issued** 

Expiration Date

Authorized Company Signature

Chair, West Virginia Contractor

Chair, West Virginia Contractor
Licensing Board

This license, or a copy thereof, must be posted in a conspicuous place at every construction site where work is being performed. This license number must appear in all advertisements, on all bid submissions and on all fully executed and binding contracts. This license cannot be assigned or transferred by licensee. Issued under provisions of West Virginia Code, Chapter 21, Article 11.





VENDOR

State of West Virginia
Department of Administration

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Quotation Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for AFO NUMBER

DEP15724

PAGE 7

ADDRESS CORRESPONDENCE TO ALTENTION OF **GUY NISBET** 304-558-8802

304-594-3991 \*709050315 GREEN RIVER GROUP LLC PO BOX 18039 MORGANTOWN WV 26507-8039

ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304 304-926-0499

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Request for AFONUMBER Quotation

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ADDRESS CORRESPONDENCE TO A HENTION OF GUY NISBET 304-558-8802

\*709050315 304-594-3991 GREEN RIVER GROUP LLC PO BOX 18039 MORGANTOWN WV 26507-8039

ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV

304-926-0499 25304

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#### Request for MEDINIMBER Quotation

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ADDRESS CORRESPONDENCE: TO ATTENTION OF GUY NISBET 304-558-8802

VENDOR

304-594-3991 \*709050315 GREEN RIVER GROUP LLC PO BOX 18039

26507-8039 MORGANTOWN WV

**ENVIRONMENTAL PROTECTION** DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304 304-926-0499

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Department of Administration
Purchasing Division
2019 Washington Street East
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304-594-3991 \*709050315 GREEN RIVER GROUP LLC PO BOX 18039 MORGANTOWN WV 26507-8039

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ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV

25304 304-926-0499

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\*709050315

PO BOX 18039

MORGANTOWN WV

GREEN RIVER GROUP LLC



State of West Virginia Department of Administration Quotation Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

304-594-3991

Request for AFONUMBER

DEP15724

PAGE

ADDRESS CORRESPONDENCE TO ATTENTION OF

**GUY NISBET** 304-558-8802

SHIP

**ENVIRONMENTAL PROTECTION** DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE

VENDOR 26507-8039 CHARLESTON, WV 25304 304-926-0499 DATE PRINTED TERMS OF SALE SHIP VIA P.O.B. FREIGHT TERMS 02/02/2012 BID OPENING DATE: BID OPENING TIME 01:30PM 03/20/2012 CAT. UNIT PAICE LINE: UOP ITEM NUMBER AMOUNT QUANTITY STEEL ARE REQUIRED, THE STATE WILL ACCEPT ONLY ALUMINUM GLASS, OR STEEL PRODUCTS PRODUCED IN THE UNITED STATES. IN ADDITION, ITEMS OF MACHINERY OR EQUIPMENT PURCHASED FOR USE AT THE SITE OF PUBLIC WORKS SHALL BE MADE OF DOMESTIC ALUMINUM, GLASS OR STEEL, UNLESS THE COST OF THE PRODUCT IS LESS THAN \$50,000 OR LESS THAN 10,000 POUNDS OF STEEL ARE USED IN PUBLIC WORKS PROJECTS. FOREIGN MADE ALUMINUM, GLASS OR STEEL PRODUCTS MAY BE ACCEPTED ONLY IF THE COST OF DOMESTIC PRODUCTS IS FOUND SUCH COST IS UNREASONABLE IF IT IS TO BE UNREASONABLE. 20% OR MORE HIGHER THAN THE BID PRICE FOR FOREIGN MADE IF THE DOMESTIC ALUMINUM, GLASS OR STEEL PRODUCTS TO BE SUPPLIED OR PRODUCED IN A "SUBSTANTIAL LABOR SURPLUS AREA", AS DEFINED BY THE UNITED STATES DEPARTMENT OF LABOR, FOREIGN PRODUCTS MAY BE SUPPLIED ONLY IF DOMESTIC PRODUCTS ARE 30% OR MORE HIGHER IN PRICE THAN THE FOREIGN MADE PRODUCTS. IF, PRIOR TO THE AWARD OF A CONTRACT UNDER THE ABOVE PROVISIONS, THE SPENDING OFFICER OF THE SPENDING UNIT DETERMINES THAT THERE EXISTS A BID FOR LIKE FOREIGN ALUMINUM, GLASS OR STEEL THAT IS REASONABLE AND LOWER THAN THE LOWEST BID FOR DOMESTIC PRODUCTS, THE SPENDIN OFFICE MAY REQUEST, IN WRITING, A REEVALUATION AND REDUCTION IN THE LOWEST BID FOR SUCH DOMESTIC PRODUCTS. ALL VENDORS MUST INDICATE IN THEIR BID IF THEY ARE SUPPLYING FOREIGN ALUMINUM, GLASS OR STEEL.

REV. 3/88

EXHIBIT 9

NOTICE FOR ISSUANCE & ACKNOWLEDGEMENT OF CONSTRUCTION PROJECT ADDENDA.

| SEE REVERSE SIDE FOR TERMS AND CONDITIONS |           |     |      |     |     |    |   |     |     |    |    |   |     |     |     |     |   |      |     |     |    |
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ADDRESS CHANGES TO BE NOTED ABOVE



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State of West Virginia Department of Administration Quotation Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

#### Request for AFONUMBER

**DEP15724** 

PAGE 12

ADDRESS CORRESPONDENCE TO ATTENTION OF GUY NISBET 304-558-8802

ADDRESS CHANGES TO BE NOTED ABOVE

304-594-3991 \*709050315 GREEN RIVER GROUP LLC PO BOX 18039

MORGANTOWN WV 26507-8039

**ENVIRONMENTAL PROTECTION** DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304 304-926-0499

DATE PRINTED TERMS OF SALE SHIP VIA F.O.B. FREIGHTTERMS 02/02/2012 BID OPENING DATE: BID\_OPENING TIME 01:30PM 03/20/2012 CAT LINE QUANTITY UOP ITEM NUMBER UNITPRICE AMOUNT THE ARCHITECT/ENGINEER AND/OR AGENCY SHALL BE REQUIRED TO ABIDE BY THE FOLLOWING SCHEDULE IN ISSUING CONSTRUCTION PROJECT ADDENDA FOR STATE AGENCIES: THE ARCHITECT/ENGINEER SHALL PREPARE THE ADDENDUM AND A LIST OF ALL PARTIES THAT HAVE PROCURED DRAWINGS AND SPECIFICATIONS FOR THE PROJECT. THE ADDENDUM AND LIST SHALL BE FORWARDED TO THE BUYER IN THE STATE PURCHASING DIVISION. THE ARCHITECT/ENGINEER SHALL ALSO SEND A COPY OF THE ADDENDUM TO THE STATE AGENCY FOR WHICH THE CONTRACT IS ISSUED. THE BUYER SHALL SEND THE ADDENDUM TO ALL INTERESTED PARTIES AND, IF NECESSARY, EXTEND THE BID ANY ADDENDUM SHOULD BE RECEIVED BY THE OPENING DATE. BUYER WITHIN FOURTEEN (14) DAYS PRIOR TO THE BID OPENING DATE. ALL ADDENDA SHOULD BE FORMALLY ACKNOWLEDGED BY ALL BIDDERS AND SUBMITTED TO THE STATE PURCHASING DIVISION. THE SAME RULES AND REGULATIONS THAT APPLY TO THE ORIGINAL BIDDING DOCUMENT SHALL ALSO APPLY TO AN ADDENDUM DOCUMENT. THE ONLY EXCEPTION MAY BE FOR AN ADDENDUM THAT IS ISSUED FOR THE SOLE PURPOSE OF CHANGING A BID OPENING TIME AND/OR DATE. REV. 11/96 EXHIBIT 10 REQUISITION NO.: .DEP15724... ADDENDUM ACKNOWLEDGEMENT SEE REVERSE SIDE FOR TERMS AND CONDITIONS TELEPHONE SIGNATURE DATE



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State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130 Charleston, WV 25305-0130

Request for REQNUMBER

DEP15724

PAGE

13

GUY NISBET 304-558-8802

304-594-3991 \*709050315 GREEN RIVER GROUP LLC PO BOX 18039

MORGANTOWN WV 26507-8039

ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304 304-926-0499

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State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

Request for AFONUMBER

DEP15724

14

ADDRESS CORRESPONDENCE TO ATTENTION OF GUY NISBET 304-558-8802

\*709050315 304-594-3991 GREEN RIVER GROUP LLC PO BOX 18039

MORGANTOWN WV 26507-8039

ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV

25304 304-926-0499

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MORGANTOWN WV



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State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

26507-8039

Request for AFONUMBER

DEP15724

PAGE 15

ADDRESS CORRESPONDENCE TO ATTENTION OF GUY NISBET 304-558-8802

\*709050315 304-594-3991 GREEN RIVER GROUP LLC PO BOX 18039

ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV

25304 304-926-0499

| 02/02/            |                                                | TEA                                          | MS OF SAL      | E                           | SHIP.V                                          | A:::::::::::::::::::::::::::::::::::::  | 9938                    | FOR,                                    |         | FREIGHT TERMS       |
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|                   | <u>l</u>                                       |                                              | <u> </u>       | SEE RE                      | <br>VERSE SIDE FOR T                            |                                         | NDITIC                  | NS:                                     |         |                     |
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\$1,187,854.9

#### DOTSON TIPPLE BID SCHEDULE

#### Requisition #DEP15724

Contractor's Bid Sheet

Company Name: Green River Group, LLC

Address: PC Box 18035

Monganton, W 26307

The DEP reserves the right to request additional information and supporting documentation regarding unit prices when the

| unit price appears to be unreasonable. |                                         |                                                                 |               |                                         |  |  |  |
|----------------------------------------|-----------------------------------------|-----------------------------------------------------------------|---------------|-----------------------------------------|--|--|--|
| ITEM<br>NO.                            | QUANTITY                                | DESCRIPTION                                                     | UNIT<br>PRICE | AMOUNT                                  |  |  |  |
|                                        |                                         |                                                                 |               |                                         |  |  |  |
| 1.0                                    | 1 LS                                    | Mobilization and Demobilization (Shall not exceed 10% of total) | 45            | \$ 100,000.Cc                           |  |  |  |
| 2.0                                    | 1 LS                                    | Construction Layout Stakes (Shall not exceed 5% of total)       | 45            | \$ 50,000.00                            |  |  |  |
| 3.0                                    | 1 LS                                    | Quality Control (Shall not exceed 3% of total)                  | 45            | \$ 36,000.00                            |  |  |  |
| 4.1                                    | 1 LS                                    | Clearing and Grubbing (Shall not exceed 7% of total)            | L5            | \$ 70 000,00                            |  |  |  |
| 4.2                                    | ) LS                                    | Demolition of Structures (Shall not exceed 3% of total)         | L5            | \$ 30000                                |  |  |  |
| 5.1                                    | 1,786 LF                                | Silt Fence                                                      | 1,00          | \$ 1,786,00                             |  |  |  |
| 5.2                                    | 3,695 LF                                | Super Silt Fence                                                | 400           | \$ 14,780.00                            |  |  |  |
| 5.3                                    | 820 LF                                  | Erosion Control Barrier                                         | (,cc          | \$ 4,920.00                             |  |  |  |
| 5.4                                    | 8 EA                                    | Rock Check Dam                                                  | leave         | \$ 800,00                               |  |  |  |
| 5.5                                    | 3 EA                                    | Rock Outlet Sediment Trap                                       | 600,00        | \$ 1,800.00                             |  |  |  |
| 5.6                                    | 2 EA                                    | Stabilized Construction Entrance                                | 3,000.00      |                                         |  |  |  |
| 6.0                                    | 50 AC                                   | Revegetation                                                    | 1700,C        | \$ \$5,000,00                           |  |  |  |
| 7.1                                    | 3,412 LF                                | Riprap Drainage Channels – Type A                               | 15,ce         | \$ 51180,00                             |  |  |  |
| 7.1                                    | 877 LF                                  | Riprap Drainage Channels – Type B                               | 3100          | \$ 27,187,00                            |  |  |  |
| 7.3                                    | 2,514 LF                                | Vegetated Drainage Channels – Type C                            | 7.00          | \$ 17 598,00                            |  |  |  |
| 7.4                                    | 1,676 LF                                | Vegetated Drainage Channels – Type D                            | 9,00          | \$ 15,084,00                            |  |  |  |
| 7.5                                    | 20 LF                                   | 24-inch HDPE Culvert                                            | 75,00         | \$ 1.5cc.00                             |  |  |  |
| 7.6                                    | 30 LF                                   | 18-inch HDPE Culvert                                            | 25,00         | \$ 2,550,00                             |  |  |  |
| 8.0                                    | 162,284 CY                              | Unclassified Excavation                                         | 12.50         | \$ 405 710,00                           |  |  |  |
| 9.1                                    | 7 EA                                    | Dry Mine Seals                                                  | 1,000,0       | S Z CCC, CC                             |  |  |  |
| 9.2                                    | 4 EA                                    | Wet Mine Seals                                                  | 45cc.c        | 48 18,000,00                            |  |  |  |
| 9.3                                    | 4 EA                                    | Bat Gates                                                       | 12,000        |                                         |  |  |  |
| 9.4                                    | 50 EA                                   | Soda Ash Briquettes, 50 lb. Bag                                 | 70,00         |                                         |  |  |  |
| 9,5                                    | 3 EA                                    | Straw Bale/Silt Fence Pit                                       | 250,0         | 48 750,00                               |  |  |  |
| 9.6                                    | 1,010 LF                                | 12-inch Conveyance Pipe - Solid                                 | 32.0          | \$ 32 325.00                            |  |  |  |
| 10.0                                   | 253 LF                                  | Under drains                                                    | 53°           | c \$ 13409 cc                           |  |  |  |
| 11.0                                   | 759 LF                                  | Drilling and Grouting Vertical Injection Holes                  | 30,00         | \$ 1518000                              |  |  |  |
| 12.1                                   | 800 CY                                  | Purchasing, Handling and Placing Concrete                       | 152,0         | \$ 100 Coo.co                           |  |  |  |
| 12,2                                   |                                         | Purchasing, Handling and Placing Grout                          | 125,00        |                                         |  |  |  |
| 12.3                                   |                                         | Purchasing, Handling and Placing Fine Aggregate                 | 16.00         | \$ 800,00                               |  |  |  |
| 12.4                                   |                                         | Purchasing, Handling and Placing Coarse Aggregate               | 2.7.9         | 48 1350,00                              |  |  |  |
| 12.5                                   |                                         | Accelerator                                                     | 1,00          | s 250,00                                |  |  |  |
| 13.0                                   |                                         | Confirmation Drilling                                           | 50,c          | 6 \$ 7500,00                            |  |  |  |
| 14.0                                   |                                         | Borehole Photography                                            | 50,0          | cs 400,00                               |  |  |  |
| 15.0                                   | *************************************** | Aggregate Plug                                                  | 5 ccic        |                                         |  |  |  |
| X                                      | ×                                       |                                                                 |               | *************************************** |  |  |  |

TOTAL

https://avss.osmre.gov.

OMB #1029-0119 Expiration Date: 1/31/13

#### AML CONTRACTOR INFORMATION FORM

You must complete this form for your AML contracting officer to request an eligibility evaluation from the Office of Surface Mining to determine if you are eligible to receive an AML contract. This requirement applies to contractors and their sub-contractors and is found under OSM's regulations at 30 CFR 874.16.

| Part A: General Information                                                                                                                                                                                                                                                                      |  |  |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| Business Name: Green River Green LLC Tax Payer ID No.: 55-0739010  Address: Pc Box 18039  City: Manager State: WV Zip Code: 26507 Phone: 304-597-3991  Fax No.: 304-594-3992 E-mail address: Scalver grade acl. com                                                                              |  |  |  |  |  |
| Part B: Legal Structure                                                                                                                                                                                                                                                                          |  |  |  |  |  |
| ( ) Corporation ( ) Sole Proprietorship ( ) Partnership ( ) LLC ( ) Other (please specify)                                                                                                                                                                                                       |  |  |  |  |  |
| Part C: Certifying and updating information in the Applicant/Violator System (AVS). Select only one of the following options, follow the instructions for that option, and sign below.                                                                                                           |  |  |  |  |  |
| I, Steven C. Calvet, have the express authority to certify that:                                                                                                                                                                                                                                 |  |  |  |  |  |
| Information on the attached Entity Organizational Family Tree (OFT) from AVS is accurate, complete, and up-to-date. If you select this option, you must attach an Entity OFT from AVS to this form. Sign and date below and do not complete Part.D.                                              |  |  |  |  |  |
| 2. Part of the information on the attached Entity OFT from AVS is missing or incorrect and must be updated. If you select this option, you must attach an Entity OFT from AVS to this form. Use Part D to provide the missing or corrected information. Sign and date below and complete Part D. |  |  |  |  |  |
| <ol> <li>Our business currently has no information in AVS. If you select this option, you must<br/>provide all information required in Part D. Sign and date below and complete Part D.</li> </ol>                                                                                               |  |  |  |  |  |
| Date Managing Member Title                                                                                                                                                                                                                                                                       |  |  |  |  |  |
| IMPORTANT! In order to certify in Part C to the accuracy of existing information in AVS, you must obtain a copy of your business' Entity OFT. To obtain an Entity OFT, contact the AVS Office, toll-free, at 800-643-9748 or from the AVS website at                                             |  |  |  |  |  |

| *** | -  | - |
|-----|----|---|
| Do  | 24 | 1 |
|     |    |   |

| Contractor's Business Name: |  |
|-----------------------------|--|
|-----------------------------|--|

If the current Entity OFT information for your business is incomplete or incorrect in AVS, or if there is no information in AVS for your business, you must provide all of the following information as it applies to your business. Please make as many copies of this page as you require.

- Every officer (President, Vice President, Secretary, Treasurer, etc.);
- All Directors;
- All persons performing a function similar to a Director;
- Every person or business that owns 10% or more of the voting stock in your business;
- Every partner, if your business is a partnership;
- · Every member and manager, if your business is a limited liability company; and
- Any other person(s) who has the ability to determine the manner in which the AML reclamation project is being conducted.

| Name<br>Address                | Position/Title Telephone # % of Ownership              |  |
|--------------------------------|--------------------------------------------------------|--|
| Begin Date:                    | <br>Ending Date:                                       |  |
| Name<br>Address<br>Begin Date: | Position/Title Telephone # % of Ownership Ending Date; |  |
| Name<br>Address                | Position/Title Telephone # % of Ownership              |  |
| Begin Date:                    | Ending Date:                                           |  |
| Name<br>Address                | Position/Title Telephone # % of Ownership              |  |
| Begin Date:                    | Ending Date:                                           |  |

#### PAPERWORK REDUCTION STATEMENT

The Paperwork Reduction Act of 1995 (44 U.S.C. 3501) requires us to inform you that; Federal Agencies may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. This information is necessary for all successful bidders prior to the distribution of AML funds, and is required to obtain a benefit.

Public reporting burden for this form is estimated to range from 15 minutes to 1 hour, with an average of 22 minutes per response, including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. You may direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Office of Surface Mining Reclamation and Enforcement, Room 202 SIB, Constitution Ave., NW, Washington, D.C. 20240.

Instructions for Completing AML Contractor Form OMB #1029-01191

Part A: General Information. Part A should be completed by the AML Contractor.

Part B: Legal Structure. Part B should be completed by the AML Contractor.

Part C: Certifying and updating information in the Applicant/Violator System (AVS). Part C should be completed by the AML Contractor, selecting the statement that best describes their situation.

If information is accurate, complete and up-to-date, then check the first statement and sign and date. Attach the Entity OFT printout to the OMB #1029-0119 form and submit the form and attachment to the AML Contracting Officer your business is working with. <sup>2</sup>

Upon reviewing an Entity OFT printout, if you discover the information contained in AVS is not accurate, complete and up-to-date, then check the second statement and complete Part D to provide missing or corrected information that needs reflected in AVS. Attach the Entity OFT printout to the OMB #1029-0119 form and submit the form and attachment to the AML Contracting Officer your business is working with.

If your business does not appear to have any information in AVS, then check the third statement and complete Part D. Submit the OMB #1029-0119 form to the AML Contracting Officer your business is working with.

#### Part D:

If current Entity OFT information for your business is incomplete, incorrect, or if you believe there is no information currently in the AVS for your business, you must complete Part D. Submit the OMB #1029-0119 form to the AML Contracting Officer your business is working with.

<sup>&</sup>lt;sup>1</sup> If you need any assistance completing OMB #1029-0119, please contact the AVS Office at 800.643,9748.

You may obtain your business! Entity OFT for certification purposes two ways. One way is to contact the AVS Office at 800.643.9748 and request the information. The second way is to access the AVS from your personal computer by visiting <a href="https://avss.osmre.gov">https://avss.osmre.gov</a>. Click "Access AVS", and then Login as Guest. Place your cursor on the "Entity" Module and "Click". Type your business name in search box and press enter key. If more than one entity record appears, select your company and then "Click" on the "relationship" tab to display your Entity OFT information. Print the Entity OFT from AVS.

| (143100) Green River Group Lis          | Load Re     | port                                     |             |            |           |
|-----------------------------------------|-------------|------------------------------------------|-------------|------------|-----------|
| 14 4 1 of 1 1/1 100%                    | 6 -         | Find   Next   Select a format Export     | <b>9</b>    |            |           |
| Sancrary.                               | AVS O       | FT Report - 3/13/2012 8:27:23 A          | M           |            |           |
| -T- 3                                   |             | selected entity is listed as an entity o |             |            |           |
|                                         |             | elected (143106) Green River Group       |             |            |           |
| O MILLS                                 |             | E 25                                     |             |            |           |
| Parent Entity                           | Description | Related Entity                           | % Ownership | Begin Date | End Date  |
| 143106) Green River Group Lle           | Member      | (118897) Steven C Calvert                |             | 1/1/1995   |           |
| 143106) Green River Group Llo           | Mnnnger     | (118897) Steven C Calvert                |             | 1/1/1995   |           |
| 143106) Green River Group Lle           | Sharcholder | (118897) Steven C Calvert                | 1%          | 1/1/1995   |           |
| 139746) Colvert Exenuating & Paving Inc | Shareholder | (143106) Green River Group Llc           | 64%         | 1/1/1995   |           |
| 143106) Green River Group Llo           | Member      | (143108) Tracy S Curtis                  |             | 1/1/1995   | 5/9/1999  |
| 249438) Conquest Enterprises LLC        | Shareholder | (143106) Green River Group Llc           | 32%         | 1/1/1995   | 11/1/2010 |
| 143106) Green River Group Lle           | Member      | (143107) Joseph S Hebda                  |             | 1/1/1995   | 11/1/2010 |
| 143106) Green River Group Lle           | Shareholder | (143107) Joseph S Hebda                  | 1%          | 1/1/1995   | 11/1/2010 |
| 143106) Green River Group Llc           | Member      | (118896) Robert D Calvert Jr             |             | 1/1/1995   | 6/30/2011 |
| 143106) Green River Group Lle           | Shareholder | (118896) Robert D Calvert Jr             | 1%          | 1/1/1995   | 6/30/2011 |
|                                         |             | 1 of 1                                   |             |            |           |
|                                         |             |                                          |             |            |           |

.. ......



# State of West Virginia DRUG FREE WORKPLACE CONFORMANCE AFFIDAVIT West Virginia Code §21-1D-5

| STATE OF                                                                                                                                                                                                                                                           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| COUNTY OF Monongalia, TO-WIT:                                                                                                                                                                                                                                      |
| I, Steven C. Calvet, after being first duly sworn, depose and state as follows:                                                                                                                                                                                    |
| 1. I am an employee of Green River Group, LC; and, (Company Name)                                                                                                                                                                                                  |
| 2. I do hereby attest that Green Rum Group, LLC (Company Name)                                                                                                                                                                                                     |
| maintains a valid written drug free workplace policy and that such policy is in compliance with <b>West Virginia Code</b> §21-1D-5.                                                                                                                                |
| The above statements are sworn to under the penalty of perjury.                                                                                                                                                                                                    |
| (Company Name)                                                                                                                                                                                                                                                     |
| Ву:                                                                                                                                                                                                                                                                |
| Title: Manasins Member                                                                                                                                                                                                                                             |
| Date: 3/20/12                                                                                                                                                                                                                                                      |
| Taken, subscribed and sworn to before me this 20 march 242                                                                                                                                                                                                         |
| By Commission expires OFFICIAL SEAL NOTARY PUBLIC STATE OF WEST VIRGINIA Christy K. Caln John Haward Motors 1730 Mileground Morgantown, WV 26505  THIS AFFIDAVIT MUST-BE-SUBMITTED WITH THE BID IN ORDER TO COMPLY WITH WV CODE PROVISIONS. FAILURE TO INCLUDE THE |
| AFFIDAVIT WITH THE BID SHALL RESULT IN DISQUALIFICATION OF                                                                                                                                                                                                         |
| THE BID.  Rev March 2009                                                                                                                                                                                                                                           |

REQ No. DEP 15724

26/ 29

#### STATE OF WEST VIRGINIA Purchasing Division

#### **PURCHASING AFFIDAVIT**

West Virginia Code §5A-3-10a states: No contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and the debt owed is an amount greater than one thousand dollars in the aggregate.

**DEFINITIONS:** 

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Debtor" means any individual, corporation, partnership, association, limited liability company or any other form or business association owing a debt to the state or any of its political subdivisions. "Political subdivision" means any county commission; municipality; county board of education; any instrumentality established by a county or municipality; any separate corporation or instrumentality established by one or more counties or municipalities, as permitted by law; or any public body charged by law with the performance of a government function or whose jurisdiction is coextensive with one or more countles or municipalities. "Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount.

EXCEPTION: The prohibition of this section does not apply where a vendor has contested any tax administered pursuant to chapter eleven of this code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

Under penalty of law for false swearing (West Virginia Code §61-5-3), it is hereby certified that the vendor affirms and acknowledges the information in this affidavit and is in compliance with the requirements as stated.

WITNESS THE FOLLOWING SIGNATURE Vendor's Name: Authorized Signature: County of Marchaelic Taken, subscribed, and sworn to before me this day of My Commission expires \_ AREX-SEAL HERE OFFICIAL STAL OLICUA ANALON STATE OF WEST VIRGINIA Christy K. Cain John Howard Motors 1730 Mlleground Morgantown, WV 26505 My Commission Expires August 21, 2013 今のウンシャン・C=いゃくべくそうかりゅうのうか

Purchasing Affidavit (Revised 12/15/09)

| Agency | Purchasing  |
|--------|-------------|
| REQ.P. | D# DEP15724 |
| Bond # | 35382       |

#### **BID BOND**

| KNOW ALL MEN BY THESE P                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | PRESENTS. That we, the under                                        | signed, Green River Group, LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| of Morgantown                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | West Virginia                                                       | as Principal, and Companion Property and Casually Insurance Company                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | hio, a corpo                                                        | oration organized and existing under the laws of the State of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| South Carolina with its principal office                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | e in the City ofAtlanta, GA                                         | , as Surety, are held and firmly bound unto the State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| of West Virginia, as Obligee, in the pena                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | al sum of Elghty Elght Thousand a                                   | ond No/100 (\$ 88,000.00 ) for the payment of which,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| well and truly to be made, we jointly and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | I severally bind ourselves, our h                                   | eirs, administrators, executors, successors and assigns.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                     | The state of the s |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                     | Principal has submitted to the Purchasing Section of the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Department of Administration a certain to DEP15724 - Dotson Temple                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | or proposal, attached hereto                                        | and made a part hereof, to enter into a contract in writing for                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| BEI 10124 Bottom Formpre                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| NOW THEREFORE,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| (a) If said bid shall be rejected                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | d, or                                                               | into a contract in accordance with the bid or proposal attached                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| harata and shall furnish any other bonds                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | s and insurance required by the                                     | bid or proposal, and shall in all other respects perform the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| agreement created by the acceptance of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | of said bid, then this obligation si                                | hall be null and vold, otherwise this obligation shall remain in full of the Surety for any and all claims hereunder shall, in no event,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| exceed the penal amount of this obligation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ion as herein stated.                                               | of the outery for any and an elamo transmission entary mine extens                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                     | and the shill college of sold Surahy and its hand shall ha in no                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| The Surety, for the value received way impaired or affected by any extension                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ved, hereby stipulates and agre<br>ion of the time within which the | es that the obligations of said Surety and its bond shall be in no<br>Obligee may accept such bid, and said Surety does hereby                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| waive notice of any such extension.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| IN WITNESS WHEREOF, Prin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ncipal and Surety have hereunto                                     | set their hands and seals, and such of them as are corporations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| Principal Corporate Seal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                     | Green River Group LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
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| The second                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                     | Managing Momber                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| , as as                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                     | (Title)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Surety Corporate Seal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                     | Companion Property and Casualty Insurance Company                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| A CONTRACTOR OF THE PROPERTY O |                                                                     | (Name of Surety)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| A .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                     | 1110                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
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IMPORTANT - Surety executing bonds must be Ilcensed in West Virginia to transact surety insurance. Raised corporate seals must be affixed, a power of attorney must be attached.

#### COMPANION PROPERTY AND CASUALTY INSURANCE COMPANY

P.O. Box 100165 (29202) 51 Clemson Road Columbia, SC 29229

#### GENERAL POWER OF ATTORNEY

Know all men by these Presents, that the COMPANION PROPERTY AND CASUALTY INSURANCE COMPANY had made, Constituted and appointed, and by these presents does make, Constitute and appoint Andrew C. Heaner of Atlanta, Georgia; Richard L. Shanahan of Atlanta, Georgia; Stefan E. Tauger of Parker, Colorado; Arthur S. Johnson of Atlanta, Georgia; Martha G. Ross of Charlotte, North Carolina; James E. Feldner of West Lake, Ohio; Jeffery L. Booth of Parma, Ohio; Cheryl L. Τοπαο of Lutz, Florida; Melanie J. Stokes of Atlanta, Georgia; Garry W. Black of Murfreesboro, Tennessee; David R. Brett of Columbia, South Carolina; Scott E. Stolzner of Birmingham, Alabama; Diane L. McLain of Fitchburg, Wisconsin; Julie Klinner of Birmingham, Alabama; Brian A. O'Neal of Parker, Colorado; Jason S. Centrella of Jacksonville, Florida; Kelley E.M. Nys of Decatur, Georgia; Michael K. Thompson of Atlanta, GA; or Brian Clark of Charlotte, North Carolina, EACH as its true and lawful attorney for it and its name, place and stead to execute on behalf of the said company, as surety, bonds, undertakings and contracts of suretyship to be given to all obligees provided that no bond or undertaking or contract of suretyship executed under this authority shall exceed in amount of the sum of \$1,000,000 (One Million Dollars) including but not limited to consents of surety for the release of retained percentages and / or final estimates on construction contracts or similar authority requested by the Department of Transportation, State of Florida and the execution of such undertakings, bonds, recognizances and other surety obligations, in pursuance of the presents, shall be binding upon the Company as if they had been duly signed by the president and attested by any officer of the company in their own proper persons.

This Power of Attorney is granted and is signed and sealed by facsimile under and by the authority of the following Resolution adopted pursuant to due authorization by the Executive Committee of the Board of Directors of the COMPANION PROPERTY AND CASUALTY INSURANCE COMPANY on the 24th day of December, 2003.

RESOLVED, that the Chairman, President or any Vice President of the Company be, and that each or any of them hereby is, authorized to execute Powers of Attorney qualifying the attorney named in the given Power of Attorney to execute in behalf of the COMPANION PROPERTY AND CASUALTY INSURANCE COMPANY bonds, undertakings and all contracts of suretyship; and that any Officer, Secretary or any Assistant Secretary be, and that each or any of them hereby is, authorized to attest the execution of any such Power of Attorney, and to attach thereto the seal of the Company.

FURTHER RESOLVED, that the signature of such officers and the seal of the Company may be affixed to any such Power of

| Attorney or to any certificate relating thereto by facsimile, and any such Power of Attorney or certificate bearing such facsimile signatures or facsimile seal shall be valid and binding upon the Company when so affixed and in the future, with respect to any bond undertaking or contract of suretyship to which it is attached.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| In Witness Whereof, the COMPANION PROPERTY AND CASUALTY INSURANCE COMPANY has caused its official seal to be hereto affixed, and these presents to be signed by its President and attested by its Assistant Vice President this                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Attest: COMPANION PROPERTY AND CASUALTY INSURANCE COMPANY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Kevin M. Elmore, Assistant Vice President  George P. Reeth, Jr. President                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| STATE OF SOUTH CAROLINA COUNTY OF RICHLAND                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| On this day of Throng Columbia, before me personally came George P. Reeth, Jr., to me known, who being by me duly sworn, did depose and say that he resides in Columbia, in the County of Richland, State of SC, at Columbia; that he is the President of COMPANION PROPERTY AND CASUALTY INSURANCE COMPANY, the corporation described in and which executed the above informment; that he knows the seal of the said corporation; that the seal affixed to the said instrument is such corporate seal; that it was so affixed and that he light his name thereto pursuant to due authorization.  Notary Public, State of SC, Qualified in Richland County Commission Expires.  STATE OF SOUTH CAROLINA COUNTY OF RICHLAND  I, the undersigned, an Officer of COMPANION PROPERTY AND CASUALTY INSURANCE COMPANY, a South Carolina Corporation, |
| I, the undersigned, an Officer of COMPANION PROPERTY AND CASUALTY INSURANCE COMPANY, a South Carolina Corporation, DO HEREBY CERTIFY that the foregoing and attached Power of Attorney remains in full force/and has not been revoked; and, furthermore, that the Resolution of the Executive Committee of the Board of Directors set forth in the Power of Attorney is now in force.                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Signed and sealed at the City of Columbia, Dated the 20th day of March 2012                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |

# Companion Property & Casualty Insurance Company

NAIC Company Code: 12157
NAIC Group Code: 661

# Statutory Financial Statement Summary As of December 31, 2010

| Tofal NET Admitted Assets:                | Aggregate Write-ins for Other than Invested Assets: | Electronic Data Processing Equipment  Recommendate from Parent Substitution | Grananty Funds Receivable or On Deposit | Nel Deferred Tax Asset: | investment income Due & Accrued: | Notes Received:      | Other Invested Assets: | Other Assels:      | Funds Held by, Due from Reinsured Companies    | Deferred Premiums & Commissions Not Yet Due: | Uncolleded Premium & Agents Balance in Course of Collection | Cash & Short-term Investments: | Stocks          | Bands:       | Assets      |
|-------------------------------------------|-----------------------------------------------------|-----------------------------------------------------------------------------|-----------------------------------------|-------------------------|----------------------------------|----------------------|------------------------|--------------------|------------------------------------------------|----------------------------------------------|-------------------------------------------------------------|--------------------------------|-----------------|--------------|-------------|
| w                                         | <b>60</b> 60                                        | o vo                                                                        | to.                                     | S                       | S                                | S                    | S                      |                    | s                                              | w                                            | S                                                           | 4n                             | ↔               | S            |             |
| 564,713,047                               | 17,924,818                                          | 76,777                                                                      | 2,985,192                               | 7,927,199               | 2,635,121                        | t                    | 17,326,582             |                    | 6,463,870                                      | 38,396,967                                   | 36,260,603                                                  | 94,466,343                     | 89,180,155      | 236,518,686  |             |
| Total Liabilities & Policyholder Surplus: | onassigned nunus:<br>Total Policyholder Surplus: S  | តៅរប់បន្ទេក Surplus:                                                        | Common Stock:                           | Policyholder Surplus    |                                  | Total Liabifilies: S | Other Liabilities      | Advanced Premiums: | Payables to Parents, Subsidiaries, Affiliales: | Reinsurance Payables:                        | c) Expenses, Tax, Licenses & Fees:                          | b) Unearned Premiums:          | B) Losses & LAE | Reserves for | Liabilities |
| S                                         | S                                                   | າ છ                                                                         | ы                                       |                         |                                  | Ł)                   | 60                     | 47                 | S                                              | S                                            | S                                                           | S                              | S               |              |             |
| 564,713,047                               | 216,531,310                                         | 122,369,422                                                                 | 4,200,000                               |                         |                                  | 349,181,737          | 56,165,559             | 133,974            | 17,627,729                                     | 32,459,925                                   | 9,733,233                                                   | 83,903,810                     | 148, 157, 507   |              |             |

NOTES: Boxds & Stocks are valued in accordance with the basis adopted by the NAIC.

# CERTIFICATION:

stated above, all terein described assets were the absolute property of the sold reporting entity, free and clear from any liens or claims thereon, except as herein stated, and differ, or 2) that State rules or regulations require differences in reporting not related to accounting practices and procedures accounting to the best of their information, and have been completed in accordance with the NAIC Annual Statement instructions and Accounting Practices and Procedylres Manual except that 1) State Law may that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a fulf and true statement of all assets and knowledge and belief, respectively. liabilities and of the condition and affairs of the said reporting antity as of the reporting period stated above, and of its income and deductions therefrom for the period ended The Officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period

VOTARIZED:

VOTARI

George Right, Jr., President
Jennifet Hadme, VP & CFO