



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

State of West Virginia
 Request for Quotation
 36 - Vehicles

Proc Folder: 363203

Doc Description: 19,000 GVWR 4X4 CREW CAB W/ ALUM CLOSED-TOP SERVICE BODY

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2017-08-15	2017-09-26 13:30:00	CRFQ 0803 DOT1800000013	1

BID RECEIVING LOCATION

BID CLERK
 DEPARTMENT OF ADMINISTRATION
 PURCHASING DIVISION
 2019 WASHINGTON ST E
 CHARLESTON WV 25305
 US

VENDOR

Vendor Name, Address and Telephone Number:

09/26/17 09:40:04
 WV Purchasing Division

FOR INFORMATION CONTACT THE BUYER

Mark A Atkins
 (304) 558-2307
 mark.a.atkins@wv.gov

Signature X

FEIN #

464572814

DATE

9/25/17

All offers subject to all terms and conditions contained in this solicitation



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

State of West Virginia
 Request for Quotation
 36 - Vehicles

Proc Folder: 363203

Doc Description: ADDENDUM_1: 19,000 GVWR 4X4 CREW CAB W/ ALUM CLOSED-TOP BODY

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2017-09-15	2017-09-26 13:30:00	CRFQ 0803 DOT1800000013	2

BID RECEIVING LOCATION

BID CLERK
 DEPARTMENT OF ADMINISTRATION
 PURCHASING DIVISION
 2019 WASHINGTON ST E
 CHARLESTON WV 25305
 US

VENDOR

Vendor Name, Address and Telephone Number:

FOR INFORMATION CONTACT THE BUYER

Mark A Atkins
 (304) 558-2307
 mark.a.atkins@wv.gov

Signature X

FEIN #

464572814

DATE

9/25/17

All offers subject to all terms and conditions contained in this solicitation

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: CRFQ 0803 DOT1800000013

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

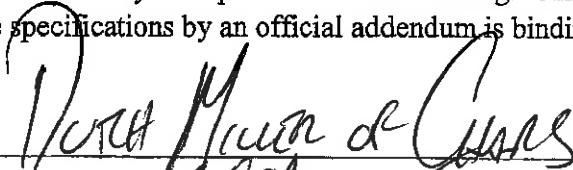
Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

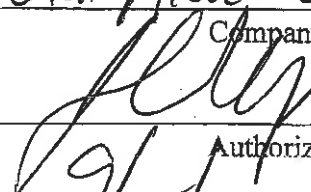
Addendum Numbers Received:

(Check the box next to each addendum received)

- | | | | |
|-------------------------------------|----------------|--------------------------|-----------------|
| <input checked="" type="checkbox"/> | Addendum No. 1 | <input type="checkbox"/> | Addendum No. 6 |
| <input type="checkbox"/> | Addendum No. 2 | <input type="checkbox"/> | Addendum No. 7 |
| <input type="checkbox"/> | Addendum No. 3 | <input type="checkbox"/> | Addendum No. 8 |
| <input type="checkbox"/> | Addendum No. 4 | <input type="checkbox"/> | Addendum No. 9 |
| <input type="checkbox"/> | Addendum No. 5 | <input type="checkbox"/> | Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.



Company


Authorized Signature
9/20/17

Date

NOTE: This addendum acknowledgement should be submitted with the bid to expedite document processing.

EXHIBIT A PRICING PAGE

CRFQ 0803 DOT1800000013

19,000 GVWR 4x4 Crew Cab with Aluminum Closed Top Service Body

Item No.	Description:	Make/Model & Year	Estimated Unit Quantity	Unit Price (each)	Item Total Cost
1	Complete Unit: 4x4 Crew Cab w/Aluminum Closed Top Service Body		80	\$49,105 DM \$74,205	ACE EQUIPMENT 25,100 <hr/> \$ 74,205
Total Bid Cost					\$ 5,936,400

Bid will be awarded to the lowest overall bid total.

Vendor: DUTCH MILLER OF CHARLESTON

Contact Name: JOHN GRAY

Email: JGRAY@DUTCHMILLERAUTO.COM

DUTCH MILLER CHRYSLER DODGE JEEP RAM
 339 MACCORKLE AVE SW
 SOUTH CHARLESTON, WV 253031263

Configuration Preview

Date Printed: 2017-09-06 12:24 PM VIN: Quantity: 1
 Estimated Ship Date: VON: Status: BA - Pending order
 FAN 1: 48868 Executive Office State of WV
 FAN 2:
 Client Code:
 Bid Number: TB8098
 PO Number:

Sold to: DUTCH MILLER CHRYSLER DODGE JEEP RAM (26872)
 339 MACCORKLE AVE SW
 SOUTH CHARLESTON, WV 253031263

Ship to: DUTCH MILLER CHRYSLER DODGE JEEP RAM (26872)
 339 MACCORKLE AVE SW
 SOUTH CHARLESTON, WV 253031263

Vehicle: 2018 5500 CREW CAB CHASSIS 4X4 (197.4 in WB - CA of 84 in) (DP0L94)

	Sales Code	Description	MSRP(USD)	FWP(USD)
Model:	DP0L94	5500 CREW CAB CHASSIS 4X4 (197.4 in WB - CA of 84 in)	45,445	41,782
Package:	29A	Customer Preferred Package 29A	0	0
	ETK	6.7L I6 Cummins Turbo Diesel Engine	7,345	6,684
	DF2	6-Spd Auto Aisin AS69RC HD Trans	1,600	1,456
Paint/Seat/Trim:	PI.1	Low Vol School Bus Yellow	400	364
	APA	Monotone Paint	0	0
	*TX	HD Vinyl 40/20/40 Split Bench Seat	0	0
	-X8	Black/Diesel Gray	0	0
Options:	4DH	Prepaid Holdback	0	-1,742
	4ES	Delivery Allowance Credit	0	-454
	MAF	Fleet Purchase Incentive	0	0
	YEP	Manuf Statement of Origin	0	0
	XXJ	B-20 Bio Diesel Capability	0	0
	XKH	Clean Idle Emissions Label	0	0
	MRT	Chrome Tubular Side Steps	595	541
	AH2	Ambulance Prep Group	295	268
	TUZ	225/70R19.5G All Traction Tires	250	228
	TBB	Full Size Spare Tire	350	319
	AHQ	Max Tow Package	395	359
	AHD	Heavy Duty Snow Plow Prep Group	245	223
	XAC	ParkView Rear Back-up Camera	395	359
	ACL	DOT Certified Roadside Safety Kit	150	137
	XHC	Trailer Brake Control	295	268
	XXS	Upfitter Electronic Module (VSIM)	0	0
	LBN	Power Take Off Prep	295	268
	BAJ	220 Amp Alternator	0	0
	5N6	Easy Order	0	0
	4FM	Fleet Option Editor	0	0
	4FT	Fleet Sales Order	0	0
	135	Zone 35-Washington	0	0
	4EA	Sold Vehicle	0	0
Non Equipment:	4FA	Special Bid-Ineligible For Incentive	0	0
Bid Number:	TB8098	Government Incentives	0	-3,500
Destination Fees:			1,395	1,395

Note: This is not an invoice. The prices and equipment shown on this priced order confirmation are tentative and subject to change or correction without prior notice. No claims against the content listed or prices quoted will be accepted. Refer to the vehicle invoice for final vehicle content and pricing. Orders are accepted only when the vehicle is shipped by the factory.

Total Price: 59,450 48,955

Order Type: Fleet
Scheduling Priority: 1-Sold Order
Customer Name:
Customer Address:
Instructions: USA

PSP Month/Week:
Build Priority: 99

49,105

Note: This is not an invoice. The prices and equipment shown on this priced order confirmation are tentative and subject to change or correction without prior notice. No claims against the content listed or prices quoted will be accepted. Refer to the vehicle invoice for final vehicle content and pricing. Orders are accepted only when the vehicle is shipped by the factory.



1130 Newark Road P.O. Box 2605 Zanesville, Ohio 43702-2605

888-799-6220

740 453-0551

FAX 740 453-7023

PRICE QUOTATION

QUOTE X DATE 9/25/2017
ORDER _____ DATE _____

PURCHASE ORDER _____

SALESMAN

COMPANY WV DOT 1800000013
ADDRESS

ATTN:
EMAIL
PHONE
FAX

END USER

CHASSIS INFORMATION	MAKE	MODEL	WB	CA/CT	84"
	TRANS.	MODEL	TIRES	PAINT	

WE ARE PLEASED TO QUOTE THE FOLLOWING
READING ALUMINUM SERVICE BODY WITH ENCLOSED TOP
MODEL# ALTPB72-UR132AHHDW
MEETING ALL SPECIFICATIONS 3.1.8 THRU 3.1.12.3
INSTALLED ON YOUR CAB AND CHASSIS
PAINTED AS PER SPECIFICATIONS
DELIVERED TO BUCKHANNON WVA

OPTIONAL ITEMS

DOT SAFETY KIT ITEM 3.1.4.15 ADD \$ 110.00 EACH TRUCK

TRUCKLITE LED BAR LIGHT ITEM 3.1.4.19 ADD \$ 1217.00 EACH TRUCK

(Handwritten circle around item 3.1.4.19 with a plus sign below it)

PRICE EACH \$23,883.00
FED. TAX
SALES TAX - 7.25% IF APPLIES
SUB TOTAL \$23,883.00
TRADE-IN
NET PRICE \$23,883.00

TRADE DESCRIPTION

+1217

This quotation becomes an order when signed here: Name _____ Title _____
This order is not binding until approved by a company official. All quotations and delivery promises made and orders accepted subject to delays caused by fire, accident, strikes or other causes beyond our control. Deliveries delayed by any of the above conditions shall not constitute cause for cancellation of this order. Prices subject to change without notice. *25,100*

wv doh reading

DESIGNATED CONTACT: Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

(Name, Title)

(Printed Name and Title)

(Address)

(Phone Number) (Fax Number)

(email address)

CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

(Company)

(Authorized Signature) (Representative Name, Title)

(Printed Name and Title of Authorized Representative)

(Date)

(Phone Number) (Fax Number)

STATE OF WEST VIRGINIA
Purchasing Division

PURCHASING AFFIDAVIT

CONSTRUCTION CONTRACTS: Under W. Va. Code § 5-22-1(i), the contracting public entity shall not award a construction contract to any bidder that is known to be in default on any monetary obligation owed to the state or a political subdivision of the state, including, but not limited to, obligations related to payroll taxes, property taxes, sales and use taxes, fire service fees, or other fines or fees.

ALL OTHER CONTRACTS: Under W. Va. Code §5A-3-10a, 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: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. 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.

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.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"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 exceeds five percent of the total contract amount.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (W. Va. Code §61-5-3) that: (1) for construction contracts, the vendor is not in default on any monetary obligation owed to the state or a political subdivision of the state, and (2) for all other contracts, that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

WITNESS THE FOLLOWING SIGNATURE:

Vendor's Name: Dutch Miller of Charleston

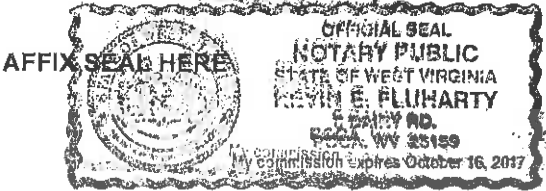
Authorized Signature: [Signature] Date: 9/25/17

State of WV

County of Kanawha, to-wit:

Taken, subscribed, and sworn to before me this 26th day of September, 2017

My Commission expires 10/14, 2017



NOTARY PUBLIC [Signature]

West Virginia Ethics Commission

Disclosure of Interested Parties to Contracts

Contracting business entity: DUTCH MILLER OF CHARLESTON
Address: 339 MACCORMIE AVE SW, So. CHAR., WV 25302
Contracting business entity's authorized agent: JOHN GRAY JR
Address: 339 MACCORMIE AVE, SOUTH CHAR., WV 25302
Number or title of contract: CRFQ 0803 DOT 1800000013
Type or description of contract: 19000 GVWR 4X4 CREW CAB 4/ANUM TP BODY
Governmental agency awarding contract: WVA PURCHASING DIVISION

Names of each Interested Party to the contract known or reasonably anticipated by the contracting business entity (attach additional pages if necessary):

JOHN R GRAY

Signature: [Handwritten Signature] Date Signed: 9/25/17

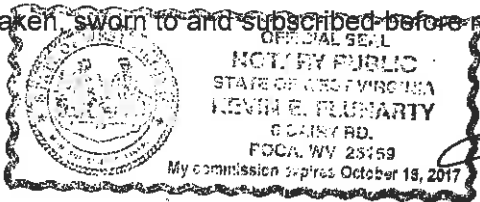
Check here if this is a Supplemental Disclosure.

Verification

State of WV, County of Kanawha

I, [Name], the authorized agent of the contracting business entity listed above, being duly sworn, acknowledges that the Disclosure herein is being made under oath and under the penalty of perjury.

Taken, sworn to and subscribed before me this 26th day of September, 2017



[Handwritten Signature] Notary Public's Signature

To be completed by State Agency:

Date Received by State Agency:

Date submitted to Ethics Commission:

Governmental agency submitting Disclosure:

State of West Virginia

VENDOR PREFERENCE CERTIFICATE

Certification and application is hereby made for Preference in accordance with **West Virginia Code**, §5A-3-37. (Does not apply to construction contracts). **West Virginia Code**, §5A-3-37, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the **West Virginia Code**. This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Vendor Preference, if applicable.

1. Application is made for 2.5% vendor preference for the reason checked:

- Bidder is an individual resident vendor and has resided continuously in West Virginia for four (4) years immediately preceding the date of this certification; **or**,
- Bidder is a partnership, association or corporation resident vendor and has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification;
- Bidder is a resident vendor partnership, association, or corporation with at least eighty percent of ownership interest of bidder held by another entity that meets the applicable four year residency requirement; **or**,
- Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4) years immediately preceding the date of this certification; **or**,

2. Application is made for 2.5% vendor preference for the reason checked:

- Bidder is a resident vendor who certifies that, during the life of the contract, on average at least 75% of the employees working on the project being bid are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; **or**,

3. Application is made for 2.5% vendor preference for the reason checked:

- Bidder is a nonresident vendor that employs a minimum of one hundred state residents, or a nonresident vendor which has an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia and employs a minimum of one hundred state residents, and for purposes of producing or distributing the commodities or completing the project which is the subject of the bidder's bid and continuously over the entire term of the project, on average at least seventy-five percent of the bidder's employees or the bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years and the vendor's bid; **or**,

4. Application is made for 5% vendor preference for the reason checked:

- Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above; **or**,

5. Application is made for 3.5% vendor preference who is a veteran for the reason checked:

- Bidder is an individual resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid is submitted; **or**,

6. Application is made for 3.5% vendor preference who is a veteran for the reason checked:

- Bidder is a resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard, if, for purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid and continuously over the entire term of the project, on average at least seventy-five percent of the vendor's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years.

7. Application is made for preference as a non-resident small, women- and minority-owned business, in accordance with West Virginia Code §5A-3-59 and West Virginia Code of State Rules.

- Bidder has been or expects to be approved prior to contract award by the Purchasing Division as a certified small, women- and minority-owned business.

Bidder understands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the requirements for such preference, the Secretary may order the Director of Purchasing to: (a) rescind the contract or purchase order; or (b) assess a penalty against such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to the contracting agency or deducted from any unpaid balance on the contract or purchase order.

By submission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and authorizes the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid the required business taxes, provided that such information does not contain the amounts of taxes paid nor any other information deemed by the Tax Commissioner to be confidential.

Bidder hereby certifies that this certificate is true and accurate in all respects, and that if a contract is issued to Bidder and if anything contained within this certificate changes during the term of the contract, Bidder will notify the Purchasing Division in writing immediately.

Bidder: Dora Minor of Cias

Signed: [Signature]

Date: 9/25/17

Title: Commercial Director

*Check any combination of preference consideration(s) indicated above, which you are entitled to receive.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/20/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER AssuredPartners of West Virginia, LLC dba Insurance Systems 1 Insurance Way; PO Box 10 Ona WV 25545	CONTACT NAME: Pat Stutler PHONE (A/C, No, Ext): (304) 736-2222 E-MAIL ADDRESS: pstutler@isi-wv.com FAX (A/C, No): (304) 302-3401
INSURED Dutch Miller Chevrolet Inc; DM Motors Inc Dutch Miller of Charleston; Dutch Miller of Charlotte PO Box 9069 Huntington WV 25704	INSURER(S) AFFORDING COVERAGE INSURER A: Granite State Insurance Co INSURER B: National Union Fire Insurance INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: CL1612603579

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDITIONAL SUBROGATION	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:		02-IX-092175438-0/000	11/1/2016	11/1/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> GARAGE <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		02-IX-092175438-0/000	11/1/2016	11/1/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$ 5,000
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		29-UD-06284094-0	11/1/2016	11/1/2017	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Employee Dishonesty		02-IX-092175438-0/000	11/1/2016	11/1/2017	Occurrence 250,000 Deductible per Occurrence 1,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Acts, Errors or Omissions Liability \$500,000 Aggregate with \$1,000 deductible.

CERTIFICATE HOLDER

CANCELLATION

EVIDENCE OF INSURANCE	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Mrs. Pat Stutler/PAT <i>Patricia Stutler</i>
-----------------------	---

© 1988-2014 ACORD CORPORATION. All rights reserved.