

1 GFI Digital (A3)

2 ORDINANCE NUMBER

3 19-0527

4 **WHEREAS**, the Jefferson County, Missouri, County Council, finds it is in the best
5 interest of the County to renew the bid award for Copier Repairs 2020 for the term of 1-1-
6 21 to 12-31-21 with Da-Com Corporation, CDS Office Technologies, and GFI Digital with
7 approval of the County Council and County Executive up to **\$30,000.00 per term, for**
8 **total amount not to exceed \$30,000.00 for the term**, subject to budgetary limitations.

9 **BE IT ENACTED BY THE JEFFERSON COUNTY, MISSOURI, COUNCIL,**
10 **AS FOLLOWS:**

11 Section 1. The County authorizes the renewal of the bid awards for an
12 additional one-year term as follows:

13 BID NAME

14 Copier Repairs 2020

15 TERM

16 1-1-21 to 12-31-21

17 Upon approval of the County Council and County Executive

18 AMOUNT

19 **Up to \$30,000.00 per term,**

20 **for total amount not to exceed \$30,000.00 for the term,**

21 subject to budgetary limitations

22 AWARDED BIDDER

1 Da-Com Corporation (A1)

2 CDS Office Technologies (A2)

3 GFI Digital (A3)

4 Section 2. The Jefferson County, Missouri, Council hereby authorizes the
5 County Executive to execute a renewal agreement, attached hereto and incorporated herein
6 by reference and attached as Exhibit A1 through A3. The County Executive is further
7 authorized to take any and all actions necessary to carry out the intent of this Ordinance.

8 Section 3. Copies of all Invitations for Bid, Requests for Proposals, responses
9 thereto, and any contracts or agreements shall be maintained by the Department of the
10 County Clerk consistent with the rules and procedures for the maintenance and retention
11 of records as promulgated by the Secretary of State.

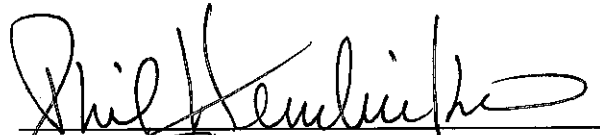
12 Section 4. This Ordinance shall be in full force and effect from and after its
13 date of approval. If any part of this Ordinance is invalid for any reason, such invalidity
14 shall not affect the remainder of this Ordinance.

THIS BILL BEING DULY INTRODUCED, THE MEMBERS OF THE JEFFERSON COUNTY, MISSOURI, COUNCIL VOTED AS FOLLOWS:

Council Member District 1, Brian Haskins	<u>yes</u>
Council Member District 2, Renee Reuter	<u>yes</u>
Council Member District 3, Phil Hendrickson	<u>yes</u>
Council Member District 4, Charles Groeteke	<u>yes</u>
Council Member District 5, Tracey Perry	<u>yes</u>
Council Member District 6, Daniel Stallman	<u>yes</u>
Council Member District 7, James Terry	<u>yes</u>

THE ABOVE BILL ON THIS 23rd DAY OF November, 2020:

PASSED **FAILED**


Phil Hendrickson, County Council Chair



Pat Schlette, Council Executive Assistant

THIS BILL WAS X APPROVED BY THE JEFFERSON COUNTY EXECUTIVE AND ENACTED AS AN ORDINANCE OF JEFFERSON COUNTY, MISSOURI, THIS 24th DAY OF NOVEMBER, 2020.

THIS BILL WAS _____ VETOED AND RETURNED TO THE JEFFERSON COUNTY, MISSOURI, COUNCIL WITH WRITTEN OBJECTIONS BY THE JEFFERSON COUNTY EXECUTIVE, THIS _____ DAY OF _____, 2020.


Dennis J. Gannon, Jefferson County, Missouri, Executive

ATTEST:


Ken Waller, County Clerk

BY: 

Reading Date: 11-23-2020



County of Jefferson

State of Missouri

Administration Center
729 Maple Street · PO Box 100
Hillsboro, Missouri 63050

Dennis Gannon

County Executive

DEPARTMENT OF ADMINISTRATIVE SERVICES

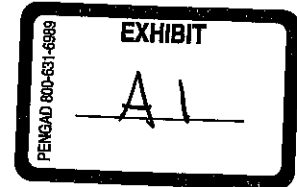
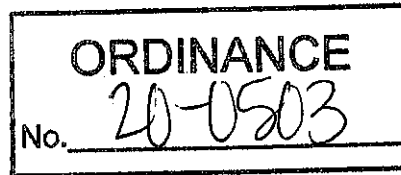
David Courtway - Director

Web Address: www.jeffcomo.org

Dana Downs
Human Resources Manager
(636)797-5563 / Fax (636)797-5596

Jackie Talarski
General Services/Contracts & Grants Manager
(636)797-5380 / Fax (636)797-5067

DA-COM CORPORATION
5317 KNIGHTS OF COLUMBUS
SAINT LOUIS MO 63119



October 8, 2020

Attn: Robert Thompson

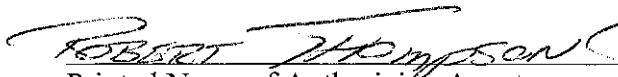
Your company was awarded a bid for “**COPIER REPAIRS 2020**” for the County of Jefferson, Missouri in **November 2019**. The Invitation for Bid allows the County to renew your bid award for an additional one-year term with consent of the awarded bidder.

The County of Jefferson, Missouri may desire to renew this bid award for an additional one year with the same terms and conditions, subject to budgetary limitations, subject to approval by the County Council and County Executive. The new award dates shall be from **January 1, 2021 to December 31, 2021**.

PLEASE INCLUDE THE FOLLOWING ITEMS:

- 1) **This executed renewal letter**
- 2) **Updated insurance certificates**
- 3) **Current paid tax receipts for any real or personal property owned in Jefferson County OR a notarized letter on company letterhead stating that your company does not own any real or personal property in Jefferson County.**
- 4) **Company Name, Signature, Print, Company Address and Phone completed on next page.**

Please sign and return as soon as possible if your company agrees to renew this contract.

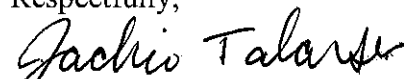

Printed Name of Authorizing Agent


Signature

10/15/20
Date

If your company does not wish to renew this agreement, please advise as soon as possible. Any questions please contact me at (636) 797-5380.

Respectfully,

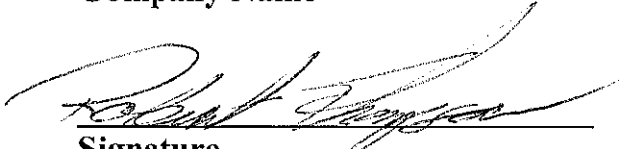

Jackie Talarski

Department of Administrative Services

In Witness thereof, the parties hereto have executed this Agreement, in triplicate, as of this 15 day of OCTOBER 2020:

DA - Com
Company Name

County of Jefferson, State of Missouri


Signature
ROBERT THOMPSON
Print


Dennis J. Gannon County Executive


Company Address: _____

5317 KNIGHTS OF COLUMBUS

ST LOUIS MO 63115

Phone: (314) 442 2800

I hereby certify under section 50.660 RSMo there is either: (1) a balance of funds, otherwise unencumbered, to the credit of the appropriation to which the obligation contained herein is chargeable, and a cash balance otherwise unencumbered, in the treasury, to the credit of the funds from which payment is to be made, each sufficient to meet the obligation contained herein; or (2) bonds or taxes have been authorized by vote of the people and there is a sufficient unencumbered amount of the bonds yet to be sold or of the taxes levied and yet to be collected to meet the obligation in case there is not a sufficient unencumbered cash balance in the treasury.


County Auditor

APPROVED AS TO FORM


County Counselor



October 15, 2020

County of Jefferson
State of Missouri
Administration Center
729 Maple Street
P.O. box 100
Hillsboro, MO 63050

This letter is to state the Da-com Corporation does not own any real estate or personal property with Jefferson County, Missouri.

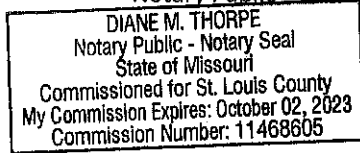
Sincerely,

Bob Thompson
Service Manager

Subscribed and sworn to before me the 15 day of October, ~~2018~~ 2020

IN TESTOMONY WHEREOF, I have hereunto set my hand and affixed my official seal in the County and State aforesaid, the day and year first above written.

Notary Public



My commission Expires:

MISSOURI
314-442-2800

5317 Knights of Columbus DR., St. Louis, MO 63119

ILLINOIS
866-489-8303



County of Jefferson

State of Missouri
Administration Center
729 Maple Street - PO Box 100
Hillsboro, Missouri 63050

Dennis Gannon
County Executive

DEPARTMENT OF ADMINISTRATIVE SERVICES

David Courtway - Director

Web Address: www.jeffcom.org

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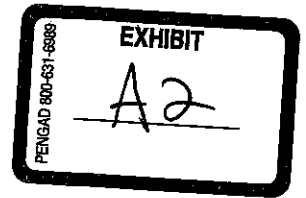
CDS OFFICE TECHNOLOGIES
13758 SHORELINE DR.
EARTH CITY MO 63045

October 8, 2020

Attn: Joseph O'Coin

RECEIVED

OCT 2 2020



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8) Company Name, Signature, Print, Company Address and Phone completed on next page.

Please sign and return as soon as possible if your company agrees to renew this contract.

Joseph O'Coin
Printed Name of Authorizing Agent

Signature

10/26/2020
Date

If your company does not wish to renew this agreement, please advise as soon as possible. Any questions please contact me at (636) 797-5380.

Respectfully,
Jackie Talarski
Department of Administrative Services

In Witness thereof, the parties hereto have executed this Agreement, in triplicate, as of this _____ day of _____ 2020:

CDS OFFICE TECHNOLOGIES
Company Name

County of Jefferson, State of Missouri

Joseph O'Coin
Signature
Joseph O'Coin
Print

Dennis J. Gannon
Dennis J. Gannon County Executive

Company Address: _____

13758 Shoreline Dr.

Earth City, MO 63045

Phone: (314) 739-4093 x1331

I hereby certify under section 50.660 RSMo there is either: (1) a balance of funds, otherwise unencumbered, to the credit of the appropriation to which the obligation contained herein is chargeable, and a cash balance otherwise unencumbered, in the treasury, to the credit of the funds from which payment is to be made, each sufficient to meet the obligation contained herein; or (2) bonds or taxes have been authorized by vote of the people and there is a sufficient unencumbered amount of the bonds yet to be sold or of the taxes levied and yet to be collected to meet the obligation in case there is not a sufficient unencumbered cash balance in the treasury.

Kristy L. Appian
County Auditor

APPROVED AS TO FORM

Norm L. Linder for Wes Yates
County Counselor



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

09/14/2020

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 have ADDITIONAL INSURED provisions or 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 TROXELL 214 South Grand Ave West P.O. Box 3757 Springfield IL 62704		CONTACT NAME: Kate Halford PHONE (A/C, No, Ext): (217) 528-7533 E-MAIL ADDRESS: khalford@troxellins.com FAX (A/C, No): (217) 528-1041	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A: Hartford	NAIC #
INSURED		INSURER B: Selective Insurance Company	
CDS Office Systems Inc 612 S Dirksen Pkwy Springfield IL 62703-2111		INSURER C: Professional Solutions Insurance Company	
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES

CERTIFICATE NUMBER: CL206232944

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	ADDL INSD	SUBR WVD	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 GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			83SBAG5HF7	06/01/2020	06/01/2021	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000
							MED EXP (Any one person)	\$ 10,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
							Employee Benefits Liab	\$ 1,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			S45610300	06/01/2020	06/01/2021	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
							Uninsured motorist	\$ 1,000,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			83SBAG5HF7	06/01/2020	06/01/2021	EACH OCCURRENCE	\$ 4,000,000
							AGGREGATE	\$
								\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) if yes, describe under DESCRIPTION OF OPERATIONS below			83WEAG2FAG	06/01/2020	06/01/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER	
							E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
C	Employment Practices Liability Crime			E9668DMLA200	06/01/2020	06/01/2021	Limit - \$500,000	Ded - \$10,000
							Limit - \$500,000	Ded - \$2,500

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Timberland Partners, its affiliates, and the direct and indirect owners and advisors of their managed properties are additional insured in respects to the general liability on a primary and noncontributory basis, per written contract, subject to the terms and conditions of the policy.

CERTIFICATE HOLDER**CANCELLATION**

Timberland Partners 8500 Normandale Lake Blvd Suite 700 Bloomington IL 625437	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 
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© 1988-2015 ACORD CORPORATION. All rights reserved.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/27/2020

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.

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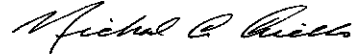
PRODUCER TROXELL 214 South Grand Ave West P.O. Box 3757 Springfield IL 62704	CONTACT NAME: Kate Halford	
	PHONE (A/C, No, Ext): (217) 528-7533 FAX (A/C, No): (217) 528-1041 E-MAIL ADDRESS: khalford@troxellins.com	
INSURED CDS Office Systems Inc 612 S Dirksen Pkwy Springfield IL 62703-2111	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Hartford	
	INSURER B: Selective Insurance Company	
	INSURER C: Professional Solutions Insurance Company	
	INSURER D:	
	INSURER E:	

COVERAGES CERTIFICATE NUMBER: CL206232944 REVISION NUMBER:

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A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			83SBAG5HF7	06/01/2020	06/01/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Employee Benefits Liab \$ 1,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY			S45610300	06/01/2020	06/01/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Uninsured motorist \$ 1,000,000
A	<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			83SBAG5HF7	06/01/2020	06/01/2021	COMBINED SINGLE LIMIT EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N if yes, describe under DESCRIPTION OF OPERATIONS below		N/A	83WEAG2FAG	06/01/2020	06/01/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	Employment Practices Liability Crime			E9668DMLA200	06/01/2020	06/01/2021	Limit - \$500,000 Ded - \$10,000 Limit - \$500,000 Ded - \$2,500

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER County of Jefferson, Jackie Talariski General Services Contracts & Grants Manager 729 Maple St Hillsboro MO 63050	CANCELLATION 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 

AFFIDAVIT
NO TAX DUE

STATE OF MISSOURI }
 } SS
COUNTY OF JEFFERSON }

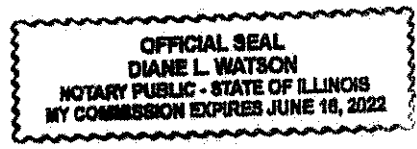
Comes now Bruce Egolf, Chief Financial Officer of the business known as CDS Office Technologies, and being first duly sworn states that the said business known as CDS Office Technologies, does not owe any sales tax to Jefferson County, Missouri.

Bruce Egolf
Signature

Subscribed and sworn before me this 28th day of October 2020.

Diane R. Watson
Clerk/Notary Public

Commission Expires: 6/16/2022





County of Jefferson

State of Missouri
Administration Center
729 Maple Street - PO Box 100
Hillsboro, Missouri 63050

Dennis Gannon
County Executive

DEPARTMENT OF ADMINISTRATIVE SERVICES

David Courtway - Director

Web Address: www.jeffcomo.org

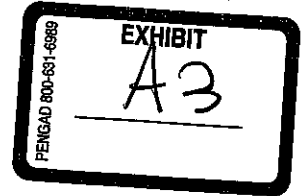
Dana Downs
Human Resources Manager
(636)797-5563 / Fax (636)797-5596

Jackie Talarski
General Services Contracts & Grants Manager
(636)797-5380 / Fax (636)797-5067

GFI DIGITAL
12163 PRICHARD FARM RD
MARYLAND HEIGHTS MO 63043

RECEIVED

OCT 2nd 2020



October 8, 2020

Attn: Robert Roth

Your company was awarded a bid for **"COPIER REPAIRS 2020"** for the County of Jefferson, Missouri in **November 2019**. The Invitation for Bid allows the County to renew your bid award for an additional one-year term with consent of the awarded bidder.

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- 9) This executed renewal letter
- 10) Updated insurance certificates
- 11) Current paid tax receipts for any real or personal property owned in Jefferson County
OR a notarized letter on company letterhead stating that your company does not own any real or personal property in Jefferson County.
- 12) Company Name, Signature, Print, Company Address and Phone completed on next page.

Please sign and return as soon as possible if your company agrees to renew this contract.

Patti Crocker
Printed Name of Authorizing Agent

Patti Crocker
Signature

10/19/20
Date

If your company does not wish to renew this agreement, please advise as soon as possible. Any questions please contact me at (636) 797-5380.

Respectfully,

Jackie Talarski
Jackie Talarski

Department of Administrative Services

In Witness thereof, the parties hereto have executed this Agreement, in triplicate, as of this 19th day of October 2020:

GFI Digital
Company Name

County of Jefferson, State of Missouri

Patti Crocker
Signature

Dennis J. Gannon
Dennis J. Gannon County Executive

Patti Crocker
Print

Company Address: _____

12163 Prichard Farm Rd
Maryland Heights, Mo 63043

Phone: 314 997 6300

I hereby certify under section 50.660 RSMo there is either: (1) a balance of funds, otherwise unencumbered, to the credit of the appropriation to which the obligation contained herein is chargeable, and a cash balance otherwise unencumbered, in the treasury, to the credit of the funds from which payment is to be made, each sufficient to meet the obligation contained herein; or (2) bonds or taxes have been authorized by vote of the people and there is a sufficient unencumbered amount of the bonds yet to be sold or of the taxes levied and yet to be collected to meet the obligation in case there is not a sufficient unencumbered cash balance in the treasury.

Kristy A. Appell
County Auditor

APPROVED AS TO FORM

James L. Lambert for Wes Yates
County Counselor



CERTIFICATE OF LIABILITY INSURANCE

6/1/2021

DATE (MM/DD/YYYY)

9/25/2020

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IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or 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 Lockton Companies 444 W. 47th Street, Suite 900 Kansas City MO 64112-1906 (816) 960-9000	CONTACT NAME: PHONE (A/C, No., Ext): _____ FAX (A/C, No.): _____ E-MAIL ADDRESS: _____														
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COVERAGES **CERTIFICATE NUMBER:** 17016159 **REVISION NUMBER:** XXXXXXXX

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	ADDL INSD	SUBR WVD	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 GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: _____	N	N	84UUNKV9400	6/1/2020	6/1/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPIOP AGG \$ 2,000,000 \$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY	N	N	84UENKV9511	6/1/2020	6/1/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$ XXXXXXXX
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED _____ RETENTION \$ _____	N	N	84XHUZH9987	6/1/2020	6/1/2021	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$ XXXXXXXX
D	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH) <input checked="" type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	N	84WBRR5698	6/1/2020	6/1/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
B	TECH E&O	N	N	84TE0291016	6/1/2020	6/1/2021	\$7,000,000 EACH WRONGFUL ACT \$7,000,000 AGGREGATE

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER 17016159 FOR INFORMATION ONLY	CANCELLATION 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 
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County of Jefferson
State of Missouri
729 Maple Street
Hillsboro, MO 63050

To whom it may concern,

GFI Digital does not own any real or personal property in Jefferson County and therefore does not owe or pay any taxes for such.

Sincerely,

A handwritten signature in cursive script that reads 'Patti Crocker'.

Patti Crocker
Controller
GFI Digital

A handwritten signature in cursive script that reads 'Heather K. Griffin'.

