

BILL NO.: 16-1116

ORDINANCE NO.: 16- 0534

INTRODUCED BY: COUNCIL MEMBER(s) Kaster

1 **AN ORDINANCE RENEWING THE BID AWARDS FOR CERTAIN**
2 **PRODUCTS AND SERVICES FOR FOOD – DAIRY - BAKERY, DEPARTMENT**
3 **OF THE SHERIFF.**

4 **WHEREAS**, Jefferson County, Missouri, (hereafter, the “County”) recommends
5 the renewal of the following bid awards at the same terms and conditions as previously bid,
6 as authorized by the original Invitation for Bid awarded by the County, for an additional
7 one-year term:

8 BID NAME

9 Food – Dairy - Bakery

10 AWARDED BIDDERS

11 Jackson Produce Co. (A1)

12 Good Source Solutions (A2)

13 ORDINANCE NUMBER

14 15-0573

15 **WHEREAS**, the Department of the Sheriff of Jefferson County, Missouri, Council
16 finds it is in the best interest of the County to renew the bid award for Food – Dairy -
17 Bakery for the term of 01-01-17 through 12-31-17 with Jackson Produce Co. and Good
18 Source Solutions with approval of the County Council and County Executive up to the
19 amount of **\$395,650.00** subject to budgetary limitations.

FILED

NOV 18 2016

WES WAGNER
COUNTY CLERK OF JEFFERSON COUNTY, MO.

1 **BE IT ENACTED BY THE JEFFERSON COUNTY, MISSOURI, COUNCIL,**

2 **AS FOLLOWS:**

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

5 BID NAME

6 Food – Dairy - Bakery

7 TERM

8 01-01-17 through 12-31-17

9 Upon approval of the County Council and County Executive

10 AMOUNT

11 Up to **\$395,650.00**

12 subject to budgetary limitations

13 AWARDED BIDDER

14 Jackson Produce Co. (A1)

15 Good Source Solutions (A2)

16 Section 2. The Jefferson County, Missouri, Council hereby authorizes the
17 County Executive to execute a renewal agreement, incorporated herein by reference and
18 attached as Exhibit A1 through A2. The County Executive is further authorized to take
19 any and all actions necessary to carry out the intent of this Ordinance.

20 Section 3. Copies of all Invitations for Bid, Requests for Proposals, responses
21 thereto, and any contracts or agreements shall be maintained by the Department of the

1 County Clerk consistent with the rules and procedures for the maintenance and retention
2 of records as promulgated by the Secretary of State.

3 Section 4. This Ordinance shall be in full force and effect from and after its
4 date of approval. If any part of this Ordinance is invalid for any reason, such invalidity
5 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, Don Bickowski	<u>yes</u>
Council Member District 2, Renee Reuter	<u>yes</u>
Council Member District 3, Robert Boyer	<u>yes</u>
Council Member District 4, George Engelbach	<u>Absent</u>
Council Member District 5, Oscar J. "Jim" Kasten	<u>yes</u>
Council Member District 6, Cliff Lane	<u>yes</u>
Council Member District 7, James Terry	<u>yes</u>

THE ABOVE BILL ON THIS 14th DAY OF November, 2016:

PASSED **FAILED**



Renee Reuter, County Council Chair



Pat Schlette, Council Administrative Assistant

THIS BILL WAS ✓ APPROVED BY THE JEFFERSON COUNTY EXECUTIVE AND ENACTED AS AN ORDINANCE OF JEFFERSON COUNTY, MISSOURI, THIS 16TH DAY OF NOVEMBER, 2016.

THIS BILL WAS _____ VETOED AND RETURNED TO THE JEFFERSON COUNTY, MISSOURI, COUNCIL WITH WRITTEN OBJECTIONS BY THE JEFFERSON COUNTY EXECUTIVE, THIS _____ DAY OF _____, 2016.

Kenneth B. Waller
Kenneth B. Waller, Jefferson County, Missouri, Executive

ATTEST:

Wes Wagner
Wes Wagner, County Clerk

BY: Katharine E. Missey

Reading Date: 11-14-2016

In Witness thereof, the parties hereto have executed this Agreement, in triplicate, as of this 25th day of September 2016:

RECEIVED

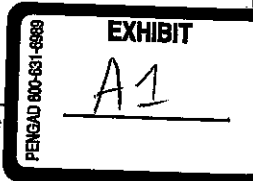
SEP 22 2016



County of Jefferson

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

Ken Waller
County Executive



DEPARTMENT OF ADMINISTRATIVE SERVICES

David Courtway - Director
Web Address: www.jeffco.mo.org

Nicole Crawford
Human Resources Manager
(636)797-5071 / Fax (636)797-5596

Vickie Pratt
General Services/Contracts & Grants Manager
(636)797-5380 / Fax (636)797-5067

JACKSON PRODUCE CO
3226 MCKELVEY RD
BRIDGETON MO 63044

September 7, 2016

Attn: Gerald Jackson

Your company was awarded a bid for "FOOD - DAIRY-BAKERY" for the County of Jefferson, Missouri in November 2015. 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 two additional one year with the same terms and conditions subject to approval by the County Council and County Executive. The new award dates shall be from January 1, 2017 through December 31, 2017.

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.

GERALD JACKSON
Printed Name of Authorizing Agent

Gerald Jackson
Signature

9-15-2016
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,

Vickie S. Pratt
Vickie S. Pratt

Department of Administrative Services

AS

In Witness thereof, the parties hereto have executed this Agreement, in triplicate, as of this
15th day of September 2016:

Jackson Produce Co.
Company Name

County of Jefferson, State of Missouri

Gerald Jackson
Signature

Kenneth B. Waller
Kenneth B. Waller County Executive

Gerald Jackson
Print

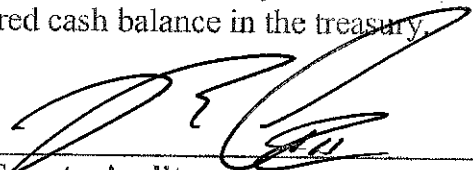
Company Address: 3226

Mekelvey Road

Bridgeton, MO, 63044

Phone: 314-291-1080

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

GJ



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
8/3/2016

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 Insurance Advisors of Saint Louis 8050 Watson Road, Suite #190 St. Louis MO 63119		CONTACT NAME: MAGGIE WARREN PHONE (A/C, No, Ext): (314) 842-0960 FAX (A/C, No): (314) 842-5285 E-MAIL ADDRESS:	
INSURED Jackson Supply Inc 3226 McKelvey Rd Bridgeton MO 63044		INSURER(S) AFFORDING COVERAGE INSURER A: TRAVELERS INSURANCE CO INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES	CERTIFICATE NUMBER: ORIGINAL	REVISION NUMBER:
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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 SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		I-680-6300R178-16-42	8/5/2016	8/5/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 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
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS		BA-6303R630-16	8/5/2016	8/5/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE					EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
A	DED <input checked="" type="checkbox"/> RETENTION \$ 5,000		CUP6508R518-16-42	8/5/2016	8/5/2017	\$
A	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	IHUB-4612T93-6-16	8/5/2016	8/5/2017	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <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
		N/A				

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

CERTIFICATE HOLDER

(636) 797-5067

JEFFERSON COUNTY
ATTN: CONTRACTS
P.O. BOX 100
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

DAVID BISSELL/STACY

Jackson Supply Inc.
3226 McKelvey Road
Bridgeton, Mo. 63044
314-291-1080 or 314-381-5252
jacksonproduce1@gmail.com

09/22/16

To whom this may concern,

My name is Gerald Jackson and I do not own and real or personal property in Jefferson County, Missouri. I do not owe and form of taxes in Jefferson County, Missouri.

Gerald Jackson - President

Angela Kay Miller
9/22/2016

ANGELA KAY MILLER Notary Public - Notary Seal State of Missouri Commissioned for St. Louis City My Commission Expires: January 28, 2019 Commission Number: 15633017

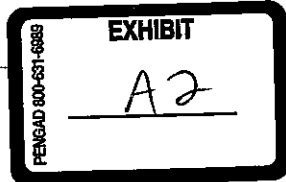


County of Jefferson

State of Missouri

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

Ken Waller
County Executive



DEPARTMENT OF ADMINISTRATIVE SERVICES

David Courtway - Director

Web Address: www.jeffcomo.org

Nicole Crawford
Human Resources Manager
(636)797-5071 / Fax (636)797-5596

Vickie Pratt
General Services Contracts & Grants Manager
(636)797-5380 / Fax (636)797-5067

GOOD SOURCE COLUTIONS
3115 MELROSE DRIVE #160
CARLSBAD CA 92010

September 7, 2016

Attr: Anna Tulino

Your company was awarded a bid for **“FOOD – DAIRY-BAKERY”** for the County of Jefferson, Missouri in **November 2015**. 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 two additional one year with the same terms and conditions subject to approval by the County Council and County Executive. The new award dates shall be from **January 1, 2017 through December 31, 2017**.

PLEASE INCLUDE THE FOLLOWING ITEMS:

- 5) This executed renewal letter
- 6) Updated insurance certificates
- 7) 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.
- 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.

Anna Tulino
Printed Name of Authorizing Agent

[Signature]
Signature

9/14/16
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,

[Signature]

Vickie S. Pratt
Department of Administrative Services

In Witness thereof, the parties hereto have executed this Agreement, in triplicate, as of this _____ day of _____ 2016:

Good Source Solutions, Inc.
Company Name County of Jefferson, State of Missouri

[Signature]
Signature
Eric Shiring
Print

Kenneth B. Waller
Kenneth B. Waller County Executive

Company Address: _____
3115 Melrose Drive #160
Carlsbad, CA 92010
Phone: 760-577-5151

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.

[Signature]
County Auditor

APPROVED AS TO FORM

[Signature]
County Counselor



3115 Melrose Drive, Suite 160 - Carlsbad, CA 92010 - 800.776.6758 | goodsourcesolutions.com

To: David Courtway
Department of Administrative Services
Jefferson County Missouri
729 Maple Street, PO Box 100
Hillsboro, Missouri 63050-0100

From: Eric Shiring
CFO – Good Source Solutions, Inc
3115 Melrose Drive, Suite 160
Carlsbad, CA 92010

Re: BOX MEAL 2015 BID

Date: October 26, 2016

Please accept this letter in response to item 7 of your required items for inclusion in submission for the "Dood-Dairy-Bakery" bid for the county of Jefferson per your letter dated September 7, 2016. Good Source Solutions, Inc. does not own any real or personal property in Jefferson County.

Please do not hesitate to contact me should you have any further questions.

Regards,

A large, stylized handwritten signature in black ink, appearing to read 'Eric Shiring'.

Eric Shiring
CFO – Good Source Solutions, Inc
3115 Melrose Drive, Suite 160
Carlsbad, CA 92010

*please see attachment/Notary





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
 12/21/2016 4/8/2016

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 Lockton Insurance Brokers, LLC 725 S. Figueroa Street, 35th Fl. CA License #0F15767 Los Angeles CA 90017 (213) 689-0065	CONTACT NAME: PHONE (A/C, No, Ext): _____ FAX (A/C, No): _____ E-MAIL ADDRESS: _____													
	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Unigard Insurance Company</td> <td>25747</td> </tr> <tr> <td>INSURER B: RSUI Indemnity Company</td> <td>22314</td> </tr> <tr> <td>INSURER C: Everest National Insurance Company</td> <td>10120</td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Unigard Insurance Company	25747	INSURER B: RSUI Indemnity Company	22314	INSURER C: Everest National Insurance Company	10120	INSURER D:		INSURER E:		INSURER F:
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INSURER B: RSUI Indemnity Company	22314													
INSURER C: Everest National Insurance Company	10120													
INSURER D:														
INSURER E:														
INSURER F:														
INSURED 1361523 Good Source Holdings, LLC dba: Good Source Solutions, Inc. 3115 Melrose Drive, Suite 160 Carlsbad, CA 92010														

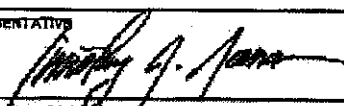
COVERAGES GOOSO03 **CERTIFICATE NUMBER:** 12649889 **REVISION NUMBER:** XXXXXXXX

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	SUBH 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 GENL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: _____	N	N	CCI1258068	12/21/2015	12/21/2016	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS	N	N	CCI1258068	12/21/2015	12/21/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX Comp./Coll Ded. \$ 1,000
A B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000	N	N	CCU1258068 NHA239307	12/21/2015 12/21/2015	12/21/2016 12/21/2016	EACH OCCURRENCE \$ 11,000,000 AGGREGATE \$ 11,000,000 \$ XXXXXXXX
C	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	N/A	CA10001450151	12/21/2015	12/21/2016	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

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

ENTERED
 4-8-16 JAD

CERTIFICATE HOLDER 12649889 County of Jefferson Vickie Pratt General Services/Contracts & Grants Manager 729 Maple Street 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 
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