

BID SIGNATURE PAGE

Type or Print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION				
Company:	G4S Secure Solutions (USA) Inc.			
Address:	401 W Capitol Ave., Suite 450			
City:	Little Rock	State:	Arkansas	Zip Code: 72201
Business Designation:	<input type="checkbox"/> Individual <input type="checkbox"/> Partnership	<input type="checkbox"/> Sole Proprietorship <input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Public Service Corp <input type="checkbox"/> Nonprofit	
Minority and Women-Owned Designation*:	<input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> African American <input type="checkbox"/> Asian American	<input type="checkbox"/> American Indian <input type="checkbox"/> Hispanic American <input type="checkbox"/> Pacific Islander American	<input type="checkbox"/> Service Disabled Veteran <input type="checkbox"/> Women-Owned	
	AR Certification #: _____ * See Minority and Women-Owned Business Policy			

PROSPECTIVE CONTRACTOR CONTACT INFORMATION			
Provide contact information to be used for bid solicitation related matters.			
Contact Person:	Steven C. Willis	Title:	District Manager
Phone:	(501) 375-3700	Alternate Phone:	(501) 553-8108
Email:	steve.willis@usa.g4s.com		

CONFIRMATION OF REDACTED COPY
<input type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input checked="" type="checkbox"/> NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested. <i>Note: If a redacted copy of the submission documents is not provided with Prospective Contractor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Bid Solicitation for additional information.</i>

ILLEGAL IMMIGRANT CONFIRMATION
By signing and submitting a response to this <i>Bid Solicitation</i> , a Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants. If selected, the Prospective Contractor certifies that they will not employ or contract with illegal immigrants during the aggregate term of a contract.

ISRAEL BOYCOTT RESTRICTION CONFIRMATION
By checking the box below, a Prospective Contractor agrees and certifies that they do not boycott Israel, and if selected, will not boycott Israel during the aggregate term of the contract. <input type="checkbox"/> Prospective Contractor does not and will not boycott Israel.

An official authorized to bind the Prospective Contractor to a resultant contract must sign below.

The signature below signifies agreement that any exception that conflicts with a Requirement of this *Bid Solicitation* will cause the Prospective Contractor's bid to be rejected:

Authorized Signature: _____ Title: Steven C. Willis, District Manager
 Use Ink Only. Steven C. Willis, District manager

Printed/Typed Name: _____ Date: 19-May-2020

PROPOSED SUBCONTRACTORS FORM

- **Do not** include additional information relating to subcontractors on this form or as an attachment to this form.

PROSPECTIVE CONTRACTOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.

Type or Print the following information

Subcontractor's Company Name	Street Address	City, State, ZIP

PROSPECTIVE CONTRACTOR DOES NOT PROPOSE TO USE SUBCONTRACTORS TO PERFORM SERVICES.

OFFICIAL BID PRICE SHEET

SP-20-0094: ARMED SECURITY GUARD SERVICES

Name of Company: G4S Secure Solutions (USA) Inc.

Description of Service	Estimated Number of Guards	Estimated Hours per year	Hourly Rate per Guard	Bill Rate	Estimated Bill Rate per Year
Armed Guard Serices: Front Desk Coverage	1	2,080	\$16.00	\$23.76	\$49,420.80
Armed Guare Services: Roving Patrol Coverage	1	2,080	\$16.00	\$23.76	\$49,420.80
Total Estimated Cost for Initial 1-Year Term					\$98,841.60

2.5 GENERAL SERVICE REQUIREMENTS

E. Contractor **shall** provide the contact name, phone number, and E-mail address of a supervisory Guard to be available through email or phone call, Monday through Friday, 8:00 a.m. to 4:30 p.m. Central Time, excluding State Holidays, to manage ADH's account.

Supervisor Name: **Steven C. Willis, District Manager**
 Phone Number: **Office (501) 375-3700 / Mobile (501) 553-8108**
 E-mail: **steve.willis@usa.g4s.com**

ATTACHMENT A - MANDATORY SITE VISIT VERIFICATION FORM

Location, date and time of Mandatory Site Visit:

Arkansas Department of Health
4815 West Markham Street
Little Rock, AR 72205

Date: May 6, 2020
Time: 2:00 p.m. Central Time

- Present this Mandatory Site Visit Verification Form to the AR Department of Health representative and the OSP representative for signature upon completion of all Mandatory Site Visits at the ADH location.
- Submit the original signed Mandatory Site Visit Verification Form with bid submission.

This duly signed Mandatory Site Visit Verification Form serves as verification the Prospective Contractor's representative named below was present and participated in the Mandatory Site Visit as required by the Invitation for Bid SP-20-0094, Armed Security Guard Services.

PROSPECTIVE CONTRACTOR'S REPRESENTATIVE INFORMATION

Company:	G4S Secure Solutions (USA), Inc.
Representative's Printed Name:	Steven C. Willis, District Manager
Signature:	<i>Steven C. Willis</i>

Jan Jain _____ *5/6/20* _____
Arkansas Department of Health Authorized Signature Date

Justin Shackelford _____ *5/6/2020* _____
Office of State Procurement Authorized Signature Date



STATE OF ARKANSAS
TRANSFORMATION AND SHARED SERVICES
OFFICE OF STATE PROCUREMENT
 1509 West 7th Street, Room 300
 Little Rock, Arkansas 72201-4222

ADDENDUM 1

TO: Vendors Addressed
 FROM: Julia Shackelford, Buyer
 DATE: May 15, 2020
 SUBJECT: SP-20-0094: Armed Security Guard Services

The following changes to the above-referenced IFB have been made as designated below:

- Change of specifications
- Additional specifications
- Change of bid opening time and date
- Cancellation of bid
- Other:

BID OPENING DATE AND TIME

- Bid opening date and time shall remain unchanged.

CHANGE OF SPECIFICATIONS

- **Delete 2.4 E. and replace with the following:**
 E. Contractor shall provide the contact name, phone number, and E-mail address of a supervisory Guard who shall be available to ADH personnel through email or phone call, Monday through Friday, 8:00 a.m. to 4:30 p.m. Central Time to manage ADH's account. (See *Official Bid Price Sheet*.)
- **Delete 2.6 A. 1. and replace with the following:**
 1. Days of week: Monday through Friday
- **Delete 2.6 B. 1. and replace with the following:**
 1. Days of week: Monday through Friday

ADDITIONAL SPECIFICATIONS

- **Add the following to Section 2.6:**
 D. Occasionally, Guards may be requested to provide services on State Holidays. If requested by ADH, the Contractor shall provide Guards on State Holidays as requested.

The specifications by virtue of this addendum become a permanent addition to the above referenced IFB. Failure to return this signed addendum may result in rejection of your bid proposal.

If you have any questions please contact Julia Shackelford at Julia.shackelford@dfa.arkansas.gov or (501) 371-6079

Company: G4S Secure Solutions (USA) Inc.

Signature: Steven C. Wally, District manager Date: 19-May-2020

CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM

Failure to complete all of the following information may result in a delay in obtaining a contract, lease, purchase agreement, or grant award with any Arkansas State Agency.

SUBCONTRACTOR: SUBCONTRACTOR NAME:

Yes No

TAXPAYER ID NAME: G4S Secure Solutions (USA) Inc IS THIS FOR: Goods? Services? Both?

YOUR LAST NAME: FIRST NAME: M.I.:

ADDRESS: 401 W Capitol Ave., Suite 450

CITY: Little Rock STATE: AR ZIP CODE: 72201 COUNTRY: USA

AS A CONDITION OF OBTAINING, EXTENDING, AMENDING, OR RENEWING A CONTRACT, LEASE, PURCHASE AGREEMENT, OR GRANT AWARD WITH ANY ARKANSAS STATE AGENCY, THE FOLLOWING INFORMATION MUST BE DISCLOSED:

FOR INDIVIDUALS *

Indicate below if: you, your spouse or the brother, sister, parent, or child of you or your spouse is a current or former: member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee:

Position Held	Mark (√)		Name of Position of Job Held <small>[senator, representative, name of board/ commission, data entry, etc.]</small>	For How Long?		What is the person(s) name and how are they related to you? <small>[i.e., Jane Q. Public, spouse, John Q. Public, Jr., child, etc.]</small>	
	Current	Former		From MM/YY	To MM/YY	Person's Name(s)	Relation
General Assembly							
Constitutional Officer							
State Board or Commission Member							
State Employee							

None of the above applies

FOR AN ENTITY (BUSINESS) *

Indicate below if any of the following persons, current or former, hold any position of control or hold any ownership interest of 10% or greater in the entity: member of the General Assembly, Constitutional Officer, State Board or Commission Member, State Employee, or the spouse, brother, sister, parent, or child of a member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee. Position of control means the power to direct the purchasing policies or influence the management of the entity.

Position Held	Mark (√)		Name of Position of Job Held <small>[senator, representative, name of board/commission, data entry, etc.]</small>	For How Long?		What is the person(s) name and what is his/her % of ownership interest and/or what is his/her position of control?		
	Current	Former		From MM/YY	To MM/YY	Person's Name(s)	Ownership Interest (%)	Position of Control
General Assembly								
Constitutional Officer								
State Board or Commission Member								
State Employee								

None of the above applies

Contract and Grant Disclosure and Certification Form

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this contract. Any contractor, whether an individual or entity, who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the agency.

As an additional condition of obtaining, extending, amending, or renewing a contract with a state agency I agree as follows:

1. Prior to entering into any agreement with any subcontractor, prior or subsequent to the contract date, I will require the subcontractor to complete a **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM**. Subcontractor shall mean any person or entity with whom I enter an agreement whereby I assign or otherwise delegate to the person or entity, for consideration, all, or any part, of the performance required of me under the terms of my contract with the state agency.

2. I will include the following language as a part of any agreement with a subcontractor:

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this subcontract. The party who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the contractor.

3. No later than ten (10) days after entering into any agreement with a subcontractor, whether prior or subsequent to the contract date, I will mail a copy of the **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM** completed by the subcontractor and a statement containing the dollar amount of the subcontract to the state agency.

I certify under penalty of perjury, to the best of my knowledge and belief, all of the above information is true and correct and that I agree to the subcontractor disclosure conditions stated herein.

Signature Steven Willis Title District Manager Date 19-May-2020

Vendor Contact Person Steven C. Willis Title District Manager Phone No. (501) 375-3700

Agency use only

Agency Number _____ Agency Name _____ Agency Contact Person _____ Contact Phone No. _____ Contract or Grant No. _____

THIS LICENSE MUST BE CONSPICUOUSLY DISPLAYED IN PLACE OF BUSINESS

State of Arkansas

Number

CMPY.0000114

License

Date of Expiration

09/17/2020

This is to certify that

G4S

is duly licensed to transact business in the State of Arkansas as a

Class B License: Security Service Contractor

This license is renewable as provided in A.C.A.

17-40-101 Et. Seq.




Arkansas State Police

Lt. Michael Moyer

Lieutenant Michael Moyer
Administrator

NON TRANSFERABLE

POLICY MANUAL POL-0515	
EEO and Diversity	
Effective Date: 03/30/15 Supersedes: 10/11/10 Last reviewed without change: N/A	Related Policies and Forms: FM-015: Consolidated Acknowledgement and Consent Form; G4S Group HR policies: Diversity and Equal Opportunities; Business Ethics

Scope and Purpose

G4S Secure Solutions (USA) Inc. is committed to equality in opportunity and treatment for all employees. This policy documents our commitment and provides guidance to all levels of the employee population.

Responsibility

It is the responsibility of all employees to know, support and comply with the company's EEO policy. Those in management, including supervisors and above, who become aware of an actual or potential discrimination issue are responsible for reacting immediately and appropriately by following the policy and procedures contained in this document.

Policy

It is the policy of G4S Secure Solutions (USA) Inc. to employ, retain and promote individuals without regard to race, religion, color, gender, sexual orientation, gender identity, age, national origin, disability, veteran status, marital status, genetic information, or any other factors protected by law or company directives.

All employees at every level of the company are expected to follow our Equal Employment Opportunity policy. Management and supervisory personnel have the additional responsibility of ensuring that their direct reports know about and comply with both the scope and spirit of this policy.

Equal Employment/Affirmative Action Policy Statement

G4S Secure Solutions (USA) Inc. is an Equal Employment Opportunity/Affirmative Action Employer. Each year a revised Affirmative Action Plan reasserts our policy and commitment to equal opportunity in the fullest sense of the word.

Employees with direct reports will be evaluated with respect to their support of this policy. Discrimination of any kind (including sexual harassment) will not be tolerated and may subject any employee to disciplinary action up to and including termination. Management must manifest support of this policy. If someone in authority becomes aware of potentially discriminatory practices, and fails to report it, he or she may be subject to disciplinary action that could include termination.

Diversity Statement

G4S Secure Solutions (USA) Inc. believes that diversity in the workplace directly contributes to the success of the company. We support it; indeed, we seek it! Valuing diversity means respecting, acknowledging, appreciating and utilizing the differences and similarities among people with different cultures and backgrounds to create a productive work environment. Through diversity, we gain different points of view as well as a variety of approaches toward business decisions and problem solving.

Forms of Discrimination

The most common forms of discrimination are based on prejudice and misperception about individuals because of their identification with a group, or any immutable characteristics they may have. Misperceptions regarding workplace abilities and qualifications of the disabled, members of various minority groups, and people of different ages and genders have caused the enactment of the comprehensive rules of law addressed in the following section of this policy. To make employment decisions based in any part on an individual's immutable characteristics (e.g., gender, race, sexual orientation, gender identity, disability, genetics, etc.) which are protected is therefore prohibited by law and by company policy; however, requiring competent performance and sufficient productivity from all of us is not discrimination. Similarly, requiring attendance, respect for instructions, and compliance with company policies is also not discrimination when applied uniformly.

The Law

There are many laws on the federal level that prohibit discrimination and provide remedies for people who feel discriminated against in employment. There are other laws at the state and local level that expand on the federal laws. In terms of the law, we always comply with the more stringent law that applies to the jurisdiction we are in. Note, however, that our company's commitment may go beyond the law in some jurisdictions. That is how committed we are to our employees! Everyone plays a role in our success and we honor that. To address each and every applicable law would create a voluminous policy. You can find out about EEO laws on the federal level by going to the following Internet addresses: www.eeoc.gov; www.dol.gov/ofccp, and by consulting your state or local government websites. The Corporate Human Resources team also maintains publications regarding state and local laws and can answer questions you may have. You can call Corporate Human Resources directly at 1-800-506-6265.

Complaints of Discrimination

Formal Discrimination Charges Filed with the Equal Opportunity Commission or State Agencies

Should a company location receive official notification of a complaint of discrimination filed with the Equal Employment Opportunity Commission or any related federal or state agency, Corporate Human Resources is to be notified *immediately* by phone. Also, a copy of the complaint is to be sent to Corporate Human Resources using the quickest means possible, such as fax or e-mail. Field offices are expressly prohibited from handling official complaints of discrimination on their own. Further, employees should never be stopped from lodging a discrimination complaint either through their supervisor/manager or via the Employee Concerns Hotline.

Any investigation of the complaint will be coordinated by Corporate Human Resources unless Corporate Human Resources refers the case to the Legal Department. All field offices are expected to provide all of the charge documentation, statements, relevant personnel records, etc., as requested by Corporate and forward same expeditiously. No records relative to the complaint, including e-mails, will be destroyed without approval from Corporate. No field office may submit written responses or other information to any agency or attorney without the direction or approval of Corporate.

The company considers all discrimination complaints to be official, even if an outside agency is not involved. If an employee verbally complains or raises a concern about discrimination affecting him/herself or another employee, consider it official. Any other complaints, including letters from attorneys, are to be similarly handled. Call Corporate Human Resources immediately for assistance and guidance. An investigation into the complaint will then be coordinated by Corporate Human Resources.

Note: Always be aware of the possibility of an assertion that someone in the organization is retaliating against the person for making a complaint of discrimination. A retaliation charge

tacked on to a base charge is taken very seriously by the government and by the company. Any actual or perceived negative action taken against a complainant can prompt a retaliation charge, and will not be tolerated.

Legislative Overview

Listed below is a brief outline of some of the Federal laws governing Equal Employment Opportunity and Affirmative Action. As stated below, there may be state, regional, or local laws expanding company obligations. G4S Secure Solutions USA complies with all federal and state civil rights legislation including but not necessarily limited to the following:

Title VII of the Civil Rights Act of 1964: Prohibits discrimination on the basis of race, color, religion, sex or national origin, in hiring, firing, promotions, training and all other terms, conditions and privileges of employment. Sexual Harassment is also prohibited under *Title VII*.

Equal Pay Act of 1963: Actually preceding *Title VII*, the *Equal Pay Act* prohibits discrimination in the payment of wages on the basis of sex.

Age Discrimination in Employment Act of 1967: and its 1978 amendments were enacted to promote the employment of older persons, age 40 and older, based on their ability, not their age; and to prohibit arbitrary age discrimination in employment.

Executive Order 11246, as amended: In 1965, the President of the United States issued this Order which requires Federal government contractors and subcontractors with contracts over \$50,000 and 50 or more employees to prepare and implement a written Affirmative Action Plan. G4S Secure Solutions (USA) Inc. is a Federal government contractor and hence subject to this Executive Order. Please see the Affirmative Action section of the Policy Manual for more detail regarding our obligations with respect to this Order.

Executive Order 13672: On July 21, 2014, the President of the United States issued this Order which extends the protections of Executive Order 11246 by prohibiting discrimination on the basis of sexual orientation and gender identity.

Rehabilitation Act of 1973, as amended: Requires Federal contractors to employ and advance in employment, in a non-discriminatory manner, persons with physical and mental disabilities.

Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended: Requires Federal contractors to employ and advance in employment veterans and disabled veterans in accordance with their qualifications. Also addresses the re-employment rights of Veterans.

Uniformed Services Employment and Re-employment Rights Act of 1994: Prohibits employers from discriminating against individuals because of past, present or future membership in a uniformed service and provides employees certain re-employment rights.

Jobs for Veterans Act of 2002: The Final Rule, published as 41 CFR 60-300 on August 8, 2007, amending the Vietnam Era Veteran's Readjustment Assistance Act of 1974 and applies to any Government contract or subcontract of \$100,000 or more, entered into or modified on or after December 1, 2003, for the purchase, sale or use of personal property or nonpersonal services (including construction), requiring those contractors or subcontractors to employ and advance in employment disabled veterans, recently separated veterans, Armed Forces service medal veterans, and other protected veterans and mandating that open job postings be distributed to the appropriate employment service delivery system in addition to all other documented outreach efforts.

Pregnancy Discrimination Act of 1978: Requires employers to treat pregnancy and pregnancy related medical conditions the same as any other medical condition with respect to all terms and conditions of employment.

Americans with Disabilities Act of 1990 (ADA): *Title I* of ADA prohibits employers from discriminating against qualified applicants and employees on the basis of a disability. **Please review POL-0525 for more detail regarding ADA.**

Americans with Disabilities Amendments Act of 2008 (ADAA): This Act emphasizes that the definition of disability should be construed in favor of broad coverage of individuals to the maximum extent permitted by the terms of the ADA and generally shall not require extensive analysis. The Act also makes important changes to the definition of the term "disability" by rejecting the holdings in several Supreme Court decisions and portions of EEOC's ADA regulations. The effect of these changes is to make it easier for an individual seeking protection under the ADA to establish that he or she has a disability within the meaning of the ADA.

Civil Rights Act of 1991: Reversed seven (7) U.S. Supreme Court decisions handed down in 1989 and 1990 which were thought to be detrimental to civil rights. Added a provision that allows complainants to demand punitive damages and jury trials.

Genetic Information Nondiscrimination Act of 2008 (GINA): House Resolution 493, or GINA, was signed by the President on May 21, 2008, providing protections against discrimination based on their genetic information when it comes to health insurance and employment. Section 202 make it unlawful for an employer to (a) fail or refuse to hire, or to discharge, any employee, or otherwise to discriminate against any employee with respect to the compensation, terms, conditions, or privileges of employment of the employee, because of genetic information with respect to the employee or (b) to limit, segregate, or classify the employees of the employer in any way that would deprive or tend to deprive any employee of employment opportunities or otherwise adversely affect the status of the employee as an employee, because of genetic information with respect to the employee. GINA also restricts employers' acquisition and disclosure of genetic information, making it unlawful for employers to request, require, or purchase genetic information with respect to an employee or a family member of the employee (limited exceptions apply).

Listed below is additional legislation that can interplay with Equal Employment Opportunity/Affirmative Action laws:

Family Medical Leave Act of 1993 (FMLA): Requires employers to provide eligible employees with twelve (12) weeks of unpaid, job protected leave per year for: (1) the birth or placement for adoption or foster care of a child; (2) an employee's serious health condition, or (3) an employee to care for the serious health condition of a spouse, parent or child. Military Leave entitlement under FMLA includes (1) exigency leave, allowing eligible employees with a spouse, son, daughter, or parent on active duty or called to active duty status in the National Guard or Reserves in support of a contingency operation to use their 12-week leave entitlement to address certain qualifying exigencies and (2) military caregiver leave allowing eligible employees to take up to 26 weeks of leave to care for a covered service member during a single 12-month period. **Please review POL-0498 detail regarding FMLA.**

Fair Labor Standards Act-FLSA (Federal Wage and Hour Law): Federal law governing payment of wages and overtime. FLSA also requires employers to accommodate nursing mothers with a reasonable break time and a lactation area for nursing a new born for one year after the child's birth. **Please review POL-0210 and POL-0215 for more detail regarding FLSA.**

Various Workers' Compensation Laws and Coverage: Issues surrounding ADA and Workers' Compensation can occasionally be interrelated. Our ADA Policy (POL-0525) addresses this in chapter 13 of that policy.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
09/21/2019

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 Willis of Florida, Inc. c/o 26 Century Blvd P.O. Box 305191 Nashville, TN 372305191 USA	CONTACT NAME: PHONE (A/C, No, Ext): 1-877-945-7378 FAX (A/C, No): 1-888-467-2378 E-MAIL ADDRESS: certificates@willis.com	
	INSURER(S) AFFORDING COVERAGE INSURER A: National Union Fire Insurance Company of P INSURER B: New Hampshire Insurance Company INSURER C: INSURER D: INSURER E: INSURER F:	NAIC # 19445 23841

COVERAGES **CERTIFICATE NUMBER: W12959243** **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:			GL 686-24-20	10/01/2019	10/01/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ Excluded PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY			CA 499-32-50 (AOS)	10/01/2019	10/01/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
B	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	WC 017-51-5817 (AOS)	10/01/2019	10/01/2020	<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)
See Attached:

CERTIFICATE HOLDER G4S Secure Solutions (USA) Inc. 1395 University Blvd. Jupiter, FL 33458	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 



ADDITIONAL REMARKS SCHEDULE

AGENCY Willis of Florida, Inc.		NAMED INSURED G4S Secure Solutions (USA) Inc. 1395 University Blvd. Jupiter, FL 33458	
POLICY NUMBER See Page 1		EFFECTIVE DATE: See Page 1	
CARRIER See Page 1	NAIC CODE See Page 1		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
 FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

Automobile Liability Policy:
 Insurance Carrier: National Union Fire Insurance Company of Pittsburgh
 All Limits Apply Per Policy
 Policy Numbers: CA 499-32-51 (VA) & CA 499-32-53 (MA)
 Policy Term: 10/01/2019 - 10/01/2020
 Combined Single Limit: \$1,000,000 - Any Auto

Workers' Compensation and Employer's Liability Policies:
 All Limits Apply Per Policy
 Workers' Compensation and Employer's Liability policies are effective 10/01/2019 and expire 10/01/2020.

Insurance Carrier: New Hampshire Insurance Company
 Policy Numbers: WC 017-51-5812 & WC 017-51-5813 (MA,WI)
 Applies Per Statute
 E.L. EACH ACCIDENT \$1,000,000
 E.L. DISEASE - EACH EMPLOYEE \$1,000,000
 E.L. DISEASE - POLICY LIMIT \$1,000,000
 WC 017-51-5813 (MA,WI) Includes Stop Gap. WC 017-51-5812 applies to AZ, IL, KY, NC, NH, NJ, PA, UT, VA, and VT.

Insurance Carrier: American Home Assurance Company
 Policy Numbers: WC 017-51-5815 (CA)
 Applies Per Statute
 E.L. EACH ACCIDENT \$1,000,000
 E.L. DISEASE - EACH EMPLOYEE \$1,000,000
 E.L. DISEASE - POLICY LIMIT \$1,000,000

Insurance Carrier: Illinois National Insurance Company
 Policy Numbers: WC 017-51-5816 (FL)
 Applies Per Statute
 E.L. EACH ACCIDENT \$1,000,000
 E.L. DISEASE - EACH EMPLOYEE \$1,000,000
 E.L. DISEASE - POLICY LIMIT \$1,000,000

Excess Workers' Compensation and Employers Liability Policy:
 Insurance Carrier: New Hampshire Insurance Company
 Policy Numbers: XWC 556-56-52 (OH)
 Policy Term: 10/01/2019 - 10/01/2020
 E.L. EACH ACCIDENT \$1,000,000
 E.L. DISEASE - EACH EMPLOYEE \$1,000,000

Re: Evidence of insurance

BID RESPONSE PACKET
SP-20-0094