# **CITY OF FAIRFIELD**

SHIP TO:

Sports Center

W Texas/5th St Allan Witt Park

Fairfield CA 94533

VENDOR NO:

P.O. NOUMBER:

B9201

SC 10536

SCHEDULED
DELIVERY DATE:

P.O. TYPE:

OPEN

VENDOR:

BUCKNER KATHY

450 MEEHAN CT

SUISUN CITY CA 94585-4148

## **PURCHASING COPY**

## PURCHASE ORDER

LINE	QUANTITY	UNIT	UNIT PRICE	AMOUNT	DESCRIPTION OF ITEM AND/OR SERVICES ORDERED		
1 200,000		EA	1.00	200,000.00	The purchase of goods and services is limited to the current adjusted maximum unit		
					cost. Please contact the Purchasing Officer for the currentlyadjusted maximum.		
			· · ·				
			TOTAL:	\$200,000.00			
				TERMS:	NET 30		

•

**AUTHORIZED PURCHASING SIGNATURE:** 

Wale snow

DATE

15/04/16

## SPECIAL PURCHASE ORDER INSTRUCTIONS:

- 1. For any information concerning this order contact purchasing division at (707) 428-7596
- 2. List Purchase Order number on all shipments and invoices.
- 3. Delivery of merchandise is considered acceptance of unit price as stated.
- 4. Prices considered F.O.B. Fairfield, CA unless stated otherwise. Freight collect shipments are not accepted.

INVOICE IN TRIPLICATE TO:

CITY OF FAIRFIELD ACCOUNTS PAYABLE 1000 WEBSTER STREET FAIRFIELD, CA 94533-4883

The seller hereby affirms that it shall not discriminate against any employee or applicant for employment because of race, color, national origin, religion, sex, physical handicap, or age. Violation of this clause may be cause for refusing to accept delivery of any such goods and/or services from the seller until the seller complies with said provision.

## CITY OF FAIRFIELD SERVICES AGREEMENT

THIS AGREEMENT is made at Fairfield, California, as of February 18, 2015 by and between the City of Fairfield ("the CITY") and Kathy Buckner. ("SERVICE PROVIDER").

SCOPE OF SERVICE: SERVICE PROVIDER agrees to perform the following work as needed: CONSULTANT shall perform as instructor for the Home Economic, Cooking, Sewing and Arts and Crafts Classes, including planning, preparation, and implementation:

CONSULTANT shall arrive 5-10 minutes early to prepare for lesson. Α

CONSULTANT shall follow session schedule as outlined or give timely notice in the event of any changes.

C. CONSULTANT shall plan for possible participation in CITY sponsored events. D.

CONSULTANT shall be responsible for maintaining art materials such as pencils, paper, rulers, drawing pads, etc

# SU 10536

## PAYMENTS.

а The total contract price for services rendered by SERVICE PROVIDER under this Agreement shall be as specified below:

60 percent of the participant registration fees from each registered participant that is collected for instruction and/or services identified in Scope of Services A exclusive of b. any non-resident fees, facility entrance, pool use, tennis court night lights, and/or publicity fees where charged

Payment shall be made to SERVICE PROVIDER on a time and materials basis, and the PROGRAM COORDINATOR shall submit monthly invoices to the C. for the same. Citv

d. Any additional meetings or work required beyond that set forth in Exhibit "A" shall be mutually agreed to by the CITY and SERVICE PROVIDER.

## INSURANCE.

- WORKERS' COMPENSATION. During the term of this Agreement, SERVICE PROVIDER shall fully comply with the terms of the law of California concerning workers' compensation. Said compliance shall include, but not be limited to, maintaining in full force and effect one or more policies of insurance insuring against any liability SERVICE PROVIDER may have for workers' compensation. Said policy shall also include employer's liability coverage no less than \$1,000,000 per accident for bodily
- GENERAL LIABILITY INSURANCE. SERVICE PROVIDER shall obtain at its sole cost and keep in full force and effect during the term of this agreement commercial general liability insurance in the amount of \$1,000,000 per occurrence for bodily injury, personal injury, and property damage. Said insurance shall provide (1) that the CITY, its officers, agents, employees and volunteers shall be named as additional insureds under the policy, and (2) that the policy shall operate as primary insurance, and (3) that no other insurance effected by the CITY or other named insureds will be called upon to cover a loss covered thereunder.
- AUTOMOBILE LIABILITY INSURANCE. SERVICE PROVIDER shall obtain at its sole cost and keep in full force and effect during the term of this agreement automobile liability insurance in the amount of \$ 1,000,000 per occurrence for bodily injury and property damage. Said insurance shall provide (1) that the CITY, its officers, agents, employees and volunteers shall be named as additional insureds under the policy, and (2) that the policy shall operate as primary insurance, and (3) that no other insurance effected by the CITY or other named insureds will be called upon to cover a loss covered thereunder.
- CERTIFICATES OF INSURANCE. SERVICE PROVIDER shall file with CITY'S Director of Community Services upon the execution of this agreement, certificates of ď. insurance which shall provide that no cancellation, major change in coverage, expiration, or nonrenewal will be made during the term of this agreement, without thirty (30) days written notice to the Director of Community Services prior to the effective date of such cancellation, or change in coverage
- SERVICE PROVIDER shall file with the Director of Community Services concurrent with the execution of this agreement, the City's standard endorsement form (attached hereto) providing for each of the above requirements.
- INDEMNIFY AND HOLD HARMLESS. SERVICE PROVIDER shall indemnify, defend, and hold harmless the CITY, its officers, agents, employees and volunteers from all claims, suits, or actions of every name, kind and description, brought forth on account of injuries to or death of any person or damage to property arising from or connected with the willful misconduct, negligent acts, errors or omissions, ultra-hazardous activities giving rise to strict liability, or defects in design by the SERVICE PROVIDER or any person directly or indirectly employed by or acting as agent for SERVICE PROVIDER in the performance of this Agreement, including the concurrent or successive passive negligence of the CITY, its officers, agents, employees or volunteers

It is understood that the duty of SERVICE PROVIDER to indemnify and hold harmless includes the duty to defend as set forth in Section 2778 of the California Civil Code.

Acceptance of insurance certificates and endorsements required under this Agreement does not relieve SERVICE PROVIDER from liability under this indemnification and hold harmless clause. This indemnification and hold harmless clause shall apply whether or not such insurance policies shall have been determined to be applicable to any of such damages or claims for damages.

## LABOR AND WAGE CODE GUIDELINES

- Attention is directed to Section 1777.5 of the Labor Code as it applies to apprenticeship standards
- SERVICE PROVIDER, as defined for this agreement, shall pay prevailing wages to the extent required by California Labor Code Section 1771. The general prevailing wage rates for each craft, classification, or type of workman shall be as determined by the Director of Industrial Relations (available online at http://www.dir.ca.gov/DLSR/statistics.research.html select the appropriate wage decision and then collect the wage decision for Statewide, Northern California and Solano County). A copy of these wage rate determinations are kept on file and are available for review at the Office of the City Engineer located at 1000 Webster Street.
- In accordance with the provision of Section 1860 of the California Labor Code, attention is directed to the requirement that in accordance with the provisions of Section 3700 of the California Labor Code, every contractor will be required to secure the payment of compensation of his or her employees.
- BUSINESS LICENSE. The CONSULTANT shall obtain a business license for work within the City of Fairfield pursuant to Chapter 10B of the Fairfield City Code, with respect to the gross receipts received pursuant to this Agreement. No payments shall be made to any SERVICE PROVIDER until such business license has been obtained, and all fees paid therefore, by the CONSULTANT. Business license applications and information may be obtained from the Finance Department, Fairfield City Hall, 1000 Webster Street, Fairfield, CA 94533-4883, (707/428-7509).
- CANCELLATION. This agreement may be canceled at any time by CITY for its convenience upon written notice to SERVICE PROVIDER: provided, however, that the SERVICE PROVIDER shall be entitled to receive full payment for all services performed and all costs incurred to the date of its receipt of written notice to cease work.
- COMPLETE AGREEMENT/AMENDMENT. This Agreement constitutes the complete agreement between the parties as to the subject matter hereof and may not be amended or changed except by a written agreement signed by both parties.

SERVICE PROVIDER

C:\Users\dwebster\Documents\Girls Can Do Fun Club Service Agreement.doc

## EDD REPORTING REQUIREMENTS CHECKLIST

## Effective January 1, 2001 the State Employment Development Department (EDD) requires the following.

Please com	plete the follov	ving: (To be cor	mplete by the department)				
Department/Division: Commo		Community R	esources/Aquatic Sports & Reservation	Date	of Contract:	February 18, 2015	
Authorize	Authorized by Res. No.:  Person Reviewing EDD Requirements:			Contract Expiration Date:		open	
Person Re			Ron Collins	Phone:	(707) 428-	7676	
	llars) or more in		When CITY executes an agreement for dar year, CONSULTANT shall provide				
			oing business as a sole proprietorship n-profit corporation or other form of o		, limited liabi	lity partnership, corporation,	
			siness as a sole proprietorship, CONs didentification number of the sole pro		all provide th	e full name, address and soc	
C. If (	CONSULTAN x identification	T is doing bus number.	iness as other than a sole proprietor	ship, CONSU	LTANT shal	I provide CONSULTANT's fe	
			<b>Dear Contracting Con</b>	npany:			
oursuant to	vour contract w	with the above m	1 10' CD 10' 11D				
		viui uic abovc-ii	nentioned City of Fairfield Department.	ou are require	d to complete	box 1 AND box 2 below	
			nentioned City of Fairfield Department, y	ou are require	d to complete	box 1 AND box 2 below.	
Please indic			provide the information requested:	ou are require	d to complete	box 1 AND box 2 below.	
			•	ou are require	d to complete	box 1 AND box 2 below.	
			•	•	d to complete	box 1 AND box 2 below.	
BOX 1	cate the type of		provide the information requested:	•	•	box 1 AND box 2 below.	
BOX 1	ME		provide the information requested:	ESS Kathy I	•	box 1 AND box 2 below.	
BOX 1 FULL NAM	cate the type of		provide the information requested:	ESS Kathy I	Buckner an Court	box 1 AND box 2 below.	
BOX 1 FULL NAM	cate the type of		NAME AND ADDR	ESS Kathy I 450 Meeh	Buckner an Court	box 1 AND box 2 below.	
BOX 1 FULL NAM ADDRESS CITY, STA	cate the type of		provide the information requested:	ESS Kathy I 450 Meeh	Buckner an Court	box 1 AND box 2 below.	
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Renewal:	New:
	×

# **INSURANCE CHECKLIST**

STAPLE HERE

APPI						Req	DES
APPROVED:	:			:	×	Required?	CONTRACTOR: DEPARTMENT: DESCRIBE PRO
4.7	Sole Proprietor	Professional Liability	Workers' Compensation	Excess Liability	Auto Liability	Type of Insurance	JECT /
Authorized Risk Management Signature			•	**************************************	Mercury Insurance Group  AM Best Rating: A+  Superior	Insurance Company Name and AM Best Rating	Kathy Buckner  Community Resources/ASR Division  WORK: "Girls Can Do Fun Club"
D,					0401 05 130072002	Policy Number	DATE (
DATE:					09/03/2015	Expiration Date	DATE OF CONTRACT: April 1, 2015 STAFF PERSON & TELEPHO
April 1, 2015						Per Occurrence Insurance Limit City	OF CONTRACT: <u>April 1, 2015</u> P.O.# <u>Open</u> STAFF PERSON & TELEPHONE NO: Ron Collins (707) 428-7676
			-			Endorsement Form	<u>\$28-7676</u>

Betty-Lou Woodhall

Digitally signed by Betty-Lou Woodhall DN: cn=Betty-Lou Woodhall, o=City of Fairfield, ou=Risk Management, email=fairfield\_project@yahoo.com, c=US

Date: 2015.04.02 06:43:37 -04'00'

MERCURY CALIFORNIA AUTOMOBILE LIABRITY INSURANCE ID CARD
MERCURY INSURANCE AGENCY: GATEWAY PROFESSIONAL INS. (707) 446-8864

HY BUCKNER 1 05 130072002 HONDA

TER BUCKNER

VEHICLE IDENTIFICATION NUMBER SFNRL 188448146570 03/03/2015 09/03/2015

MERCURY OROUP

KATHY BUCKNER

CALFORNIA AUTOMOBILE LIABILITY INSURANCE ID CARD MERCURY INSURANCE

COMPANY
AGENCY: GATEWAY PROFESSIONALINS, (707) 449-9884

POLICY NUMBER 0401 05 130072002 HONDA

EFFECTIVE & EXPIRATION DATES 03/03/2015 09/03/2015 VEHICLE IDENTIFICATION NUMBER 5FNRL 18844B 146570

ADDITIONAL DRIVER(S)
WALTER BUCKNER

TO REPORT A CLAIM, please cell (800) 503-3724
For occess to ROADSIDE ASSISTANCE ONLY, please cell (866) 519-6478
This insurance complies with Cyc S16056 or S16500.5 NAIC# 27553

TO REPORT A CLAIM, please cell (800) 503-3724

eccess to ROADSIDE ASSISTANCE ONLY, please cell (866) 519-6478

i Insurance complies with CVC S16056 or S16500.5 NAIC# 27553

85 W. Imperial Highway, Bros. CA 92521

THE COVERAGE PROVIDED BY THIS POLICY MEETS THE MINIMUM LIABILITY LIMITS PRESCRIBED BY LAW

IF YOU HAVE AN ACCIDENT

Notify the police immediately.

- Capture the names, addresses, telephone numbers, driver license numbers and license place numbers of all persons involved and of wimesses.
- Note any damage to other vehicles.
- Do not admit fault. Do not discuss the accident with anyone except your
- Take photos if possible. Immediately report all claims to Mercury at (800) 503-3724.

rev, 09/13

the photos if possible.

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NIMUM LIABILITY LIMIIS PRESCRIBED BY LAW ? COVERAGE PROVIDED BY THIS POLICY MEETS THE

K fold in half here A SSS W. Experial Highway, Brea, CA 92821

IF YOU HAVE AN ACCIDENT

d license plate numbers of all persons involved and of witnesses. pture the names, addresses, telephone numbers, driver license numbers

rev. 09/13

z URANCE GROUP

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## Mercury Insurance Company (2)

A.M. Best #: 003574

United States

Los Angeles, CA 90054

NAIC #: 27553 Mailing Address P.O. Box 54600

Web: www.mercuryinsurance.com Phone: 323-937-1060

View Additional Address Information

companies that have, in

Assigned to Strength I

our opinion,

a superior ability to meet their ongoing insurance obligations.

Based on A.M. Best's analysis, 058411 - Mercury General Corporation is the AMB Ultimate Parent and identifies the topmost entity of the corporate structure. View a list of operating insurance entities in this structure.

Best's Credit Rating Analyst

Disclosure Information

and Its Subsidiaries February 27, 2015

Rating Issued by: A.M. Best Company, Inc.

Senior Financial Analyst: Joel Silverthorn

Assistant Vice President: Gregory T. Williams

View A.M. Best's Rating Disclosure Statement

A.M. Best Affirms Ratings of Mercury General Corporation

## Best's Credit Ratings

Fax: 323-857-7116

## Financial Strength Rating View Definition

Rating:

A+ (Superior) a (Group)

Affiliation Code: Financial Size

XIII (\$1.25 Billion to \$1.5

Category: Outlook:

Billion) Stable

Action:

Affirmed

Effective Date: Initial Rating Date: February 27 2015 June 30, 1979

### Long-Term Issuer Credit Rating **View Definition**

Long-Term:

Stable

Outlook:

Action: Affirmed

**Effective Date:** 

February 27, 2015

Initial Rating Date: May 03, 2006

## Reports and News

Visit Best's News and Analysis site for the latest news and press releases for this company and its A.M. Best Group.



AMB Credit Report - includes Best's Financial Strength Rating and rationale along with comprehensive analytical commentary, detailed business overview and key financial data Report Revision Date: 3/9/2015 (represents the latest significant change).

Historical Reports are available in AMB Credit Report Archive.



Best's Executive Summary Reports (Financial Overview) - available in three versions, these presentation style reports feature balance sheet, income statement, key financial performance tests including profitability, liquidity and reserve analysis. Data Status: 2015 Best's Statement File - P/C, US Contains data compiled as of 3/31/2015 As Received.

- Single Company five years of financial data specifically on this company.
- Comparison
  - side-by-side financial analysis of this company with a peer group of up to five other companies you select.
- Composite
- evaluate this company's financials against a peer group composite. Report displays both the average and total composite of your selected peer group



Best's Key Rating Guide Presentation Report - includes Best's Financial Strength Rating and financial data as provided in the most current edition of Best's Key Rating Guide products, (Quality Cross Checked)

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Best's Key Rating Guide - P/C, US & Canada

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Best's Executive Summary Report - Composite - Property/Casualty

Best's Executive Summary Report - Comparison - Property/Casualty

Best's Statement File - Global

Best's Regulatory Center Market Share Reports

Best's State Line - P/C, US

Best's Corporate Changes and Retirements - P/C, US/CN

Best's Insurance Expense Exhibit (IEE) - P/C, IJS

Best's Schedule P (Loss Reserves) - P/C, US