

otherwise.

2. Company hereby promises and agrees to render and provide, during the term of this Contract, and shall be obligated to render and provide the Services in accordance with the Specifications within **Hidalgo County** following a request for Services by the **Commissioners' Court** or their designated agent. Company agrees in performing the Services that it will use proper professional standards, comply with any and all appropriate laws and regulations in providing the Services, and devote such time as is necessary to safely and efficiently provide the Services.

3. This Contract shall be for a period of one year effective **January 30, 2014** and ending on **January 31, 2015**. Hidalgo County at its sole discretion elect the option to extend the contract for one (1) additional year at the same rates, terms and conditions and may further extend an additional sixty (60) days grace period at the end of the contract term due to any unforeseen delay in the procurement process, unless this Contract is terminated pursuant to the provisions herein, whichever occurs first.

4. As a condition of this Contract, Company shall hold and maintain throughout the term of this Contract all licenses and permits required, or which may be required by any authority during the term hereof to provide the Services.

5. All trucks or vehicles operated by the Company to perform the Services shall contain all equipment required by any authority to operate on streets and roads and all persons in the employ of Company who operate such trucks or vehicles shall have the required licenses, qualifications, skill and expertise to perform such Services

and shall comply with all laws, rules and regulations prescribed by any agency or authority having jurisdiction with regard to the operation of such trucks or vehicles in providing the Services.

6. As consideration for rendering the Service provided for in this Contract, the County agrees to pay Company the amounts specified in Exhibit "B" attached hereto payable against written invoice submitted by Company.

7. Company shall provide insurance in force on all its vehicles and all persons connected with providing services under this Contract naming County as an additional insured (with the coverages and in the amounts described on Exhibit "C" attached hereto and incorporated herein at this point for all purposes), and shall furnish to County certificates of such insurance coverage.

8. Company shall provide a sufficient number of trucks, vehicles, personnel and equipment available to safely and efficiently provide the Services.

9. Company shall indemnify and hold harmless County, its elected officials, employees and agents from any and all claims, damages, losses, and expenses including attorney's fees for the defense of any action against County arising out of, resulting from, or connected with the provision of the Service by Company under this Contract. Said indemnity shall cover any act or failure to act by the Company, its agents or employees.

10. This Contract shall not be assignable in whole or in part by either party without prior written consent of the other party.

15. The contract may be terminated without cause upon thirty (30) days written notice by County.

16. This Agreement shall be binding upon and inure to the benefit of and be enforceable by the parties hereto and their respective heirs, executors, administrators, legal representatives, successors, and assigns where permitted by this Agreement.

17. This Agreement shall be governed by and construed in accordance with the laws of the State of Texas and shall be performable in Hidalgo County.

18. Commitment of Current Revenues Only. In the event that, during any term hereof, the Commissioners Court does not appropriate sufficient funds to meet the obligations of Buyer under this Agreement, Buyer may terminate this Agreement upon sixty (60) days written notice to Seller. Buyer agrees, however, to use reasonable efforts to secure funds necessary for the continued performance of this Agreement. The parties intend this provision to be a continuing right to terminate this Agreement at the expiration of each budget period of Buyer pursuant to the provisions of Tex. Loc. Govt. Code Ann. ' 271.903 (Vernon Supp. 1996).

WITNESS our hands in duplicate originals this _____ day of _____,
2011.

COUNTY OF HIDALGO

ATTEST:

By: _____
Ramon Garcia, County Judge

Arturo Guajardo Jr., County Clerk

COMPANY: _____

By: _____

Printed Name: _____

Title: _____

APPROVED AS TO FORM:
Atlas, Hall & Rodriguez, L.L.P.

By: _____
Stephen L. Crain

APPROVED BY COMMISSIONES COURT: _____

**EXHIBIT “A”
REQUEST FOR BIDS (RFB)
PROCUREMENT PACKET**

**EXHIBIT “B”
VENDOR’S BID**

TABULATION SHEET
HIDALGO COUNTY
“SPECIALTY PRINTING & RELATED SERVICES
RFB NO.: 2013-153-01-28-YZV

DISTRICT CLERK			
	SECTION II	QTY	GATEWAY
1	Letterhead Paper		25.00 (500 ream)

PURCHASING DEPARTMENT			
	SECTION II	QTY	GATEWAY
1	Printing Paper 28#	10000	200.00
2	Business Cards w/Logo Card Stock Linen	1000	143.00

93rd DISTRICT COURT			
	SECTION II	QTY	GATEWAY
1	Award Certificate 8x11	2500	740.00

BUDGET/PUBLIC AFFAIRS/EMPLOYEE BENEFITS			
	SECTION II	QTY	GATEWAY
1	2X10 Desk/Door Name Plate Black w/White Letters	5	60.00

JUSTICE OF THE PEACE PCT 2 PLACE 2			
	SECTION II	QTY	GATEWAY
1	4X9 ½ JACKET “ The State of Texas	1000	102.00

HEALTH & HUMAN SERVICES DEPARTMENT			
	SECTION II	QTY	GATEWAY
1	Envelope w/o Window	5000	275.00
2	Postmaster Label w/Logo	5000	720.00
3	HCCS_HCIHCP Cards	5000	305.00
4	Alto a la Tub.100# Gloss/ Stop TB	5000 S	335.00
		5000 E	335.00
5	Tb Get the Facts 100# Gloss Stop TB 100# Gloss	5000 E	395.00
		5000 S	395.00

AMENDED-EXHIBIT "B"-ADDENDUM 1
HIDALGO COUNTY
"SPECILTY PRINTING SERVICES & RELATED SERVICES"
RFB NO.; 2013-153-12-18-YZV

	DESCRIPTION	Estimate Qty	Unit Price	Total Price
Purchasing Department				
1	8.5 x 11 Letterhead with Watermark and with Cty Logo in Gold & Dept Info. In Blue (Linen) 20lbs	10,000	.065	650.00
2	8.5 x 11 Heavyweight printing paper inkjet paper 24lbs- / 28lbs	10,000	.020	200.00
3	Envelopes w/ window 4 1/8 x 9 1/2 w Cty Logo in Gold & Dept Info. In Blue-Standard #9	10000	.057	570.00
	Envelopes w/o window 4 1/8 x 9 1/2 w Cty Logo in Gold & Dept Info. In Blue-Linen	10000	.054	540.00
4	Business Cards w Cty Logo in Gold & Dept Info. In Blue 3 1/2 x 2-Card Stock Linen	1,000	.143	143.00
County Court @ Law No. 5				
1	Envelope w/ without window 4 1/8 x 9 1/2 w Cty Logo in Gold & Dept Info. In Blue	3,500	.140	490.00
2	8.5 x 11 Letterhead w Cty Logo in Gold & Dept Info. In Blue	500	.235	117.50
3	Business Cards w Cty Logo in Gold & Dept Info. In Blue 3 1/2 x 2	2500	.039	97.50
93RD District Court				
1	Order of Release 8.5 x 11 -3 Carbon Copy sheets white, yellow and pink, top binding, Cty Logo in the bottom	2,500	.157	392.50
2	Order of Commitment, 8.5 x 11 -3 Carbon Copy sheets all in white, top binding, 1 st page is front/ back the other two only front Cty Logo in the bottom	2,500	.200	500.95
3	8.5 x 11 Letterhead w Cty Logo in Gold & Dept Info. In Blue with the State of Texas Emblem as a Watermark-25% Cotton-Off-White	2,500	.128	320.00
4	Business Cards w Envelopes Cty Logo in Gold & Dept Info. In Blue 9 1/2 x 4 1/4 25% Cotton-Off-White	2,500	.123	307.50
5	Business Cards w Cty Logo on the Right of the card and State of Texas on the left in Gold & Dept Info. In Blue 3 1/2 x 2 Card Stock 25% Cotton Off-White	500 per box	.076	38.00
6	Award/Certificate 8x11 1/2 Gold border with Blk Letters	2,500	.296	740.00
Elections Department				
	8.5 x 11 Letterhead w Cty Logo in Gold & Dept Info. In Blk -20# Cotton	500 per box	.357	178.50
2	Envelopes without window 4 1/8 x 9 1/2 w Cty Logo in Gold & Dept Info. In Blk-Cotton	500 per box	.218	109.00
	Envelopes w/window 4 1/8 x 9 1/2 w Cty Logo in Gold & Dept Info. In Blk-20#	500 per box	.218	109.00
3	Business Cards w Cty Logo in Gold & Dept Info. In Blk 3 1/2 x 2**See Sample-80 # Cover Stock	500 per box	.231	115.50
-4	Notepads		Delete	
Budget /Public Affairs/ W/Comp/Employee Benefits				
1	Envelopes w/ without window 4 x 9 1/2 w Cty Logo & Dept Info. Blue/Gold ink	500	.218	109.00
2	Business Cards w Cty Logo in Gold & Dept Info. In Blk 3 1/2 x 2	500	.076	38.00
3	2 x 10 desk/door name plates Blk w/ white letters	5	12.00	60.00
Justice of the Peace Pct 2 Place 2				
1	Business Cards w Pink Rose & Blk letters 3 1/2 x 2	2,000	.083	166.00
2	4x 9 1/2 Jacket with Blk letters*The State Of Texas	1000	.102	102.00
449TH Judicial District of Texas				
1	Business Cards w Cty Logo in Gold & Dept Info. In Blk 3 1/2 x 2 (White linen, raised printed)-Cotton	3000	.05	150.00
2	8.5 x 11 White Letterhead w Cty Logo in Gold & Dept Info. In Blk. 25% Cotton, raised printed.	1000	.149	149.00
3	Envelopes w/ window (White) 4 1/8 x 9 1/2 w Cty Logo in Gold & Dept Info. In Blk	500	.218	109.00
	Envelopes w/o window (White) 4 1/8 x 9 1/2 w Cty Logo in Gold & Dept Info. In Blk-Cotton	500	.218	109.00
R.O.W-Delete				
1	Business Cards w Cty Logo & Dept Info. In Blk 3 1/2 x 2	5000	—	—
2	8.5 x 11 White Letterhead w Cty Logo in Gold & Dept Info. In Blue-Linen, raise printed.	3000	—	—

**AMENDED-EXHIBIT "B"-ADDENDUM 1
HIDALGO COUNTY
"SPECILTY PRINTING SERVICES & RELATED SERVICES"
RFB NO.; 2013-153-12-18-YZV**

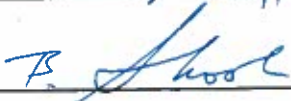
DESCRIPTION		Estimate Qty	Unit Price	Total Price
PCT 4				
1	Business Cards w Cty Logo in Gold & Dept Info: In Blk 3 1/2 x 2 (Wht linen, raised blk printed) for about 10 employees	2,000	.112	224.00
2	8.5 x 11 White Letterhead w Cty Logo in Gold & Dept Info. In Blk. 25% Cotton, raised printed. Texture Bond 25% Cotton	2,000	.108	216.00
3	Envelopes w/ without window - Wht 4 1/8 x 9 1/2 w Cty Logo in Gold & Dept Info. In Blk (flat)	2,000	.129	258.00
4	Polypropylene Stickers with face adhesive 3" x 3"	10,000 (A)	.076	1520.00
		10,000 (B)		
5	Service Work order Books 9" x 5.5" (2 part of 50 pages) in sequence	5,000	DELETE	—
6	Work Order Books 9" x 5.5" (2 part of 50 pages) in sequence	5,000	DELETE	—
Health & Human Services				
1	8.5 x 11 Letterhead w Cty Logo in Gold & Dept Info. In Blue	5,000	.102	510.00
2	Envelope w/ without window 4 1/8 x 9 1/2 w Cty Logo in Gold & Dept Info. Blue	5,000	.069	345.00
3	Postmaster label for mail outs w Cty Logo in Blk & Dept. info. In Blk 4"x3"	5,000	.055	275.00
4	The HCCS-HCIHCP cards (perforated) all in blk	5,000	.144	720.00
5	9x 5 Index card Form L-37	5,000	.061	305.00
6	Chest Clinic Appointment Card 2"x4" letters in blk	5,000	.029	145.00
7	3 1/2 x 6 Blue Blk letters Registro de Tratamiento Preventive	5,000	.057	285.00
8	Attention...Parents flyer 8 1/2 x 11 Glossily in color with border 100# Gloss	5,000	.093	465.00
9	HPV Vaccine flyer 8 1/2 x 11 glossily in color 100# Gloss	5,000	.093	465.00
10	Information for Healthcare providers from CDC (VFC) 8 1/2 x 11 in color 100# Gloss	5,000 Eng	.093	465.00
		5000Span	.093	465.00
11	Information for parents from CDC (VFC) 8 1/2 x 11 glossily in color 100# Gloss	5,000	.093	465.00
12	National Infant Immunization Campaign flyer 8 1/2 x 11 in color 100#-Gloss	5,000	.093	465.00
13	Vaccine Freezer Setup flyer 8 1/2 x 11 glossily in color IMM-966-100#-Cover Gloss	5,000	.121	605.00
14	Vaccine Freezer Setup flyer 8 1/2 x 11 glossily in color IMM-962-100#-Cover Gloss	5,000	.121	605.00
15	Acceptable Temperatures for Vaccines 8 1/2 x 11 glossily in color 100#- Cover Gloss	5,000	.121	605.00
16	Vaccine Coordinator 8 1/2 x 11 glossily in color 100#-Cover Gloss	5,000	.121	605.00
17	Monthly Care of Vaccine Storage Units 8 1/2 x 11 glossily in color 100#-Gloss	5,000	.121	605.00
18	Keep your Germs to yourself 8 1/2 x 11 glossily in color 100#-Gloss	5,000	.093	465.00
19	Alto A la Gripe Texasflu.org. 8 1/2 x 11 glossily in color 100#-Gloss	5,000	.093	465.00
20	FAQ from parents about Vaccines for Infants 8 1/2 x 11 copy paper color 20#-Non-Gloss	5,000	.087	435.00
21	8 1/2 x 11 letter copy paper color 20 lb (several flyers all same format)-tri-fold 100# Gloss	5,000	.117	585.00
22	8 1/2 x 11 letter copy paper color 20 lb (several flyers all same format)black ink 8 pages	5,000 ea	.200	1000.00
23	8 1/2 x 11 letter copy paper color 20 lb (several flyers all same format)-black ink 8 pages	5,000	.200	1000.00
24	8 1/2 x 11 letter copy paper color 20 lb (several flyers all same format)-black ink -3 pages	5,000	.134	670.00
25	8 1/2 x 11 letter copy paper color 20 lb (several flyers all same format)"Do you need a Temporary Food Event Permit"	5,000	.134	670.00
26	Alto a la tuberculosis/Stop TB-Multi Color Flyer - Gloss Paper 2 Pages English & Spanish 100#-Gloss	5000 Eng	.067	335.00
		5000 Span	.067	335.00
27	TB Get the Facts/La Tuberculosis-... English/Spanish Blue & Black Ink - Tri-Fold-Gloss Paper - Double Sided Print 100#-Gloss	5000 Eng	.079	395.00
		5000 Span	.079	395.00

**AMENDED-EXHIBIT "B"-ADDENDUM 1
HIDALGO COUNTY
"SPECILTY PRINTING SERVICES & RELATED SERVICES"
RFB NO.; 2013-153-12-18-YZV**

	DESCRIPTION	Estimate Qty	Unit Price	Total Price
HEALTH DEPARTMENT CONTINUATION				
28	TB Skin Test Record Double Sided Print White Stock 5x3 Index Card-Black Ink	5,000	.035	175.00
29	Appt Card 5x3 blue Index Card Single Sided Print-Black Ink	5,000	.030	150.00
30	Patient Has an App.. Card 5x3 ¼ Double Sided Print-White Stock Card	5,000	.035	175.00
31	Treatment Record English & Spanish (2 Cards) Double Sided Print 6x3 ½ Yellow Stock Card	5,000	.067	335.00
32	Referral Form 3 part (wht, yellow & pink) 8 ½ x 11 letter in blk Pad of 50 sets	5,000	.144	720.00
33	On-site Wastewater Systems Checklist 2 part (wht, yellow) 8 ½ x 11 letter in blk	5,000	.099	495.00
34	How to obtain a Cty Permit for an on-site sewerage Facility 2 part (wht, yellow) 8 ½ x 11 letter in blk	5,000	.099	495.00
35	Foster Home Inspection Report 3 part (wht, yellow & pink) 8 ½ x 11 letter in blk	5,000	.144	720.00
36	Sanitary Inspection Form 3 part (wht, yellow & pink) 8 ½ x 11 letter in blk	5,000	.144	720.00
37	Investigation Report Occupational Health Regulation #2-B 4 part (wht, yellow, pink & orange) 8 ½ x 11 letter in blk	5,000	.191	955.00
38	License to Operate OSSF form 8 ½ x 11 letter in blk	5,000	.033	165.00
39	Temporary Food Establishment Permit Request 8 ½ x 11 letter in blk	5,000	.033	165.00
40	Environmental & Consumer Health Protection Complaint Form 8 ½ x 11 letter in blk	5,000	.033	165.00
41	CMS 1500 NCR 2 part for computer -Continuous Feed Red Ink Double Sided Print	5,000	.111	555.00
42	TB Program Evaluation -TB 340 4-part NCR-Side Glue-Landscape Print	1,000	.562	562.00
43	TB Program Evaluation -TB 341-4-part NCR-Side Glue-Landscape Print	5,000	.149	745.00
44	TB Report of Case & Patient Serv-TB 400A-3Part Top Glue	3,000	.152	456.00
45	Report of TB Case & Patient Serv TB-400B-3-Part Top Glue	3,000	.152	456.00
46	Certificate to return to Work...HCHHSD 10069-2-Part Top Glue Black Ink	500	.284	142.00
47	To Whom it may Concern HCHHSD 20083 2-Part Top Glue	1000	.199	199.00
48	Food Serv Establishment 3-Part NCR-Double Sided Print-Top Glue	5000	.143	715.00
49	On-Site Sewerage Inspection Report 3-Part NCR Top Glue	5000	.143	715.00
50	Application for ON-Site Sewerage Facility 2-Part NCR Top Glue	5000	.096	480.00
51	ON Site Sewage Facility Tec Info.. 2-Part NCR Top Glue Black Ink	5000	.096	480.00
52	Authorization to Construct...2-Part NCR Top Glue Black Ink	5000	.096	480.00
53	Soil Evaluation Report Info. 1 Page Double Sided Print - BLUE INK	5000	.039	195.00
54	Family Planning Appt. Card 3 ½ x 4 - White Stock Double Sided Print-Black Ink	2000	.063	126.00
55	Prenatal Weight Gain Grid White 20 lb. paper Multi Color Form	2000	.212	424.00
56	On site sewage Facility Inspection fees wrapped around cover 8 3/8 x 5 " 3 parts 50 sets to a book in sequence perforated	5,000	.136	680.00
57	Health Permit Inspection Fees wrapped around cover 8 3/8 x 5 " 3 parts 50 sets to a book in sequence perforated	5,000	.136	680.00
TRESURER'S OFFICE				
1	14" E-Z Fold Blank Check w/Control Number	20000	NO BID	

**GATEWAY PRINTING & OFFICE SUPPLY INC.
315 S. CLOSNER
EDINBURG, TX 78539
PH. 936-383-3881 FAX 936-383-4674
BUTCH SHOOK**

AMENDED-EXHIBIT "B"-ADDENDUM 1
HIDALGO COUNTY
"SPECILTY PRINTING SERVICES & RELATED SERVICES"
RFB NO.; 2013-153-12-18-YZV

BIDDER/COMPANY NAME: Gateway Printing & Office Supply, Inc.
ADDRESS: 315 S. Closner
CITY/STATE/ZIP: Edinburg TX 78539
PHONE NO/FAX NO: (956) 383-3861 (956) 383-4674
CELL PHONE NO: (956) 383-3861
E-MAIL ADDRESS: butch@gatewayp.com
AUTHORIZED SIGNATURE: 
TITLE: Sr. VP

GATEWAY PRINTING & OFFICE SUPPLY INC.
315 S. CLOSNER
EDINBURG, TX 78539
PH. 956-383-3861 FAX 956-383-4674
BUTCH SHOOK

**EXHIBIT “C”
INSURANCE REQUIREMENTS**



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/23/2013

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 FEDERATED MUTUAL INSURANCE COMPANY HOME OFFICE: P.O. BOX 328 OWATONNA, MN 55060	CONTACT NAME: CLIENT CONTACT CENTER PHONE (A/C, No, Ext): 888-333-4949 FAX (A/C, No): 507-446-4664 E-MAIL ADDRESS: CLIENTCONTACTCENTER@FEDINS.COM	INSURER(S) AFFORDING COVERAGE	NAIC #
		INSURER A: FEDERATED SERVICE INSURANCE COMPANY	28304
INSURED GATEWAY PRINTING AND OFFICE SUPPLY INC 315 S CLOSNER BLVD EDINBURG, TX 78539-4674	336-266-2	INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	

RECEIVED
 OCT 28 2013
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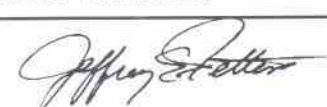
COVERAGES CERTIFICATE NUMBER: 32 REVISION NUMBER: 0

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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY	N	N	9421779	12/01/2013	12/01/2014	EACH OCCURRENCE	\$1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person)	EXCLUDED
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	\$1,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						GENERAL AGGREGATE	\$2,000,000
							PRODUCTS - COMP/OP AGG	\$2,000,000
A	AUTOMOBILE LIABILITY	N	N	9421779	12/01/2013	12/01/2014	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident)	
	<input type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident)	
A	<input checked="" type="checkbox"/> UMBRELLA LIAB	N	N	9421780	12/01/2013	12/01/2014	EACH OCCURRENCE	\$2,000,000
	<input type="checkbox"/> EXCESS LIAB						AGGREGATE	\$2,000,000
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION							
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	N/A	N	9804084	12/01/2013	12/01/2014	<input checked="" type="checkbox"/> WC STATUTORY LIMITS	OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)							
	If yes, describe under DESCRIPTION OF OPERATIONS below							
							E.L. EACH ACCIDENT	\$500,000
							E.L. DISEASE - EA EMPLOYEE	\$500,000
							E.L. DISEASE - POLICY LIMIT	\$500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
ADDITIONAL NAMED INSUREDS INCLUDE
 JONES AND COOK STATIONERS

CERTIFICATEHOLDER IS AN ADDITIONAL INSURED FOR BUSINESS AUTO LIABILITY.

CERTIFICATE HOLDER 336-266-2 HIDALGO COUNTY 2812 S BUSINESS HIGHWAY 281 EDINBURG, TX 78539-6243	32 0	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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