

TO: CITY OF LONG BEACH
CITY CLERK
ATTN: Michelle King

411 West Ocean Boulevard, Lobby Level
Long Beach, California 90802



INVITATION TO BID

**Emergency Vehicles
Parts and Repair Services**

CONTRACT NO.

35463

1. COMPLETE CONTRACT:

This Invitation to Bid, together with THE NOTICE INVITING BIDS, the entire Bid (including Specifications), or any items(s) thereof, the signature page, Instructions to Bidders, General Conditions, Special Conditions, Bid Section, Addendums, and when required, CONTRACTOR'S BOND shall become the Contract upon its acceptance by the City Manager or designee on behalf of the City of Long Beach, Contractor will be provided with a copy of the executed Contract. All materials or services provided by the Contractor shall comply with the City Charter, and all applicable Federal, State and City Laws.

2. SERVICES TO BE PROVIDED BY THE CONTRACTOR:

Contractor shall upon acceptance of this Bid by the City, furnish the goods and services herein specified according to the terms and conditions set forth herein.

3. AMOUNT TO BE PAID:

The City shall pay Contractor for the goods or services as described in the section entitled "PAYMENT" in the Instructions to Bidders.

4. CHOICE OF ALTERNATE PROVISIONS; OPTIONS; NOTIFICATION:

When alternative provisions are requested, or options are offered, Contractor will be notified as to which provision, or option, is being accepted at the same time that he is notified that he is the successful Bidder.

5. DECLARATION OF NON-COLLUSION:

The undersigned certifies or declares under penalty of perjury that this Bid is genuine and not sham or collusive, or made in the interest or on behalf of any person or entity not herein named; that the Bidder has not directly or indirectly induced or solicited any other Bidder to submit a sham bid, or any other person or entity to refrain from bidding, and that the Bidder has not in any manner sought by collusion to secure to himself any advantage over other Bidders.

BIDDER MUST COMPLETE AND SIGN BELOW:

(Signature of Corporate Officers or persons authorized to sign bids and contracts on behalf of the Contractor – refer to page 2 Instructions Concerning Signatures.)

EXECUTED AT: Corona CA ON THE 22 DAY OF October, 2019.
CITY STATE MONTH

COMPANY NAME: Southern California Fleet Services, Inc. TIN: [REDACTED]
(FEDERAL TAX IDENTIFICATION NUMBER)

STREET ADDRESS: 2855 Sampson Ave. CITY: Corona STATE: CA ZIP: 92879

PHONE: 951-272-8655 FAX: 951-272-8408

S/ [Signature] President
(SIGNATURE) (TITLE)

Tom Franchina

(PRINT NAME)

tfranchina@socalfleet.com

(EMAIL ADDRESS)

S/ [Signature] Chief Financial Officer
(SIGNATURE) (TITLE)

Tom Franchina

(PRINT NAME)

tfranchina@socalfleet.com

(EMAIL ADDRESS)

ALL SIGNATURES MUST BE NOTARIZED FOR ALL COMPANIES LOCATED OUTSIDE THE STATE OF CALIFORNIA.
NO OUT-OF-STATE BID WILL BE CONSIDERED UNLESS A NOTARIAL ACKNOWLEDGMENT IS ATTACHED.
NOTARIES ARE NOT REQUIRED FOR CALIFORNIA BIDDERS.

IN WITNESS WHEREOF the City of Long Beach has caused this contract to be executed as required by law as of the date stated below.

THE CITY OF LONG BEACH

BY

Director of Financial Management

2/15/20
Date

APPROVED AS TO FORM

February 12, 2020
CHARLES PARKIN
CITY ATTORNEY

Deputy

**MINUTES OF
ANNUAL MEETING OF THE SOLE SHAREHOLDER
AND
ORGANIZATIONAL MEETING OF THE SOLE DIRECTOR
OF
SOUTHERN CALIFORNIA FLEET SERVICES, INC.**

INTRODUCTION

The Annual Shareholder's Meeting and Organizational Meeting of the Board of Directors of SOUTHERN CALIFORNIA FLEET SERVICES, INC., a California corporation, was held at the corporate offices at 2855 Sampson Avenue, Corona, California, at 10:00 o'clock a.m., on March 12, 2019.

PURPOSE OF MEETING

This meeting was held for the purpose of considering reports of the affairs of the Corporation, electing a Board of Directors and officers for the new term, and transacting such other business as may come before the meeting.

SHAREHOLDERS AND DIRECTORS PRESENT

Tom Franchina, the Corporation's sole Shareholder and sole Director, was present.

CALL TO ORDER

The meeting was called to order by the President of the Corporation, Tom Franchina, who presided as Chairman of the meeting and in his capacity as the Corporation's Secretary, recorded the minutes of the meeting.

WAIVER

By affixing his name and signature to the minutes of this meeting, the sole Shareholder and sole Director waives notice of, consents to and approves this meeting and all actions taken at the meeting.

REVIEW OF FINANCIAL CONDITION

The Chairman began with a review of the corporate tax returns and financial statements of the Corporation for the year ended December 31, 2018. It was:

RESOLVED, that the corporate tax returns and financial statements of the Corporation for the year ended December 31, 2018 are hereby approved and adopted as presented to this meeting.

RATIFICATION OF PRIOR ACTS

The Chairman then reviewed specific events occurring during the Corporation's last year. All acts of the Board of Directors and officers during the year just ended were approved, ratified and confirmed.

ELECTION OF DIRECTORS

The meeting then proceeded to the election of a Board of Directors for the new term. It was:

RESOLVED, that Tom Franchina is hereby elected as the Director of this Corporation, to serve for the term set forth in and to act in accordance with the Bylaws of this Corporation.

ELECTION OF OFFICERS

The Chairman then noted that officers for the ensuing year needed to be elected. The Director had determined that it is in the Corporation's best interests to declare a vacancy to the office of Chief Administrative Officer until such time as the Director can take action. The following individuals were nominated and elected to the offices indicated after their respective names:

Tom Franchina President, Chief Financial Officer, Secretary

RESOLVED FURTHER, that the office of Chief Administrative Officer shall remain vacant until further action is taken by the Board.

ADJOURNMENT

There being no further business to come before the meeting, the meeting was duly adjourned.



TOM FRANCHINA
Chairman

ATTEST:



TOM FRANCHINA
Secretary

APPROVAL OF SOLE SHAREHOLDER AND SOLE DIRECTOR



TOM FRANCHINA

BID NUMBER ITB FS 19-135

The City of Long Beach is committed to provide maximum opportunities for Disadvantaged, Minority, Women and Long Beach Business Enterprises (DBEs, MBEs, WBEs and Local) to compete successfully in supplying our needs for products and services.

The following information is submitted regarding the Bidder:

Legal Form of Bidder:

Corporation ☒ State of California

Partnership ☐ State of _____

General ☐ Limited ☐

Joint Venture ☐

Individual ☐ DBA _____

Limited Liability Company ☐ State of _____

Composition of Ownership (more than 51% of ownership of the organization):

OPTIONAL

Ethnic (Check one):

- ☐ Black ☐ Asian ☐ Other Non-white
☐ Hispanic ☐ American Indian ☒ Caucasian

Non-ethnic Factors of Ownership (check all that apply):

- ☒ Male ☐ Yes - Physically Challenged ☐ Under 65
☐ Female ☐ No - Physically Challenged ☒ Over 65

Is the firm certified as a Disadvantaged Business: ☐ Yes ☒ No

Has firm previously been certified as a minority-owned and/or woman-owned business enterprise by any other agency?

- ☐ Yes ☒ No

Name of certifying agency: _____

INSTRUCTIONS CONCERNING SIGNATURES

Please use the proper notary form, which applies to your type of organization on all Bid documents, attachments and bonds requiring a signature by officers of your company.

NOTE: FAILURE TO COMPLY MAY RESULT IN DISQUALIFICATION OF YOUR BID.

INDIVIDUAL (Doing Business As)

- The only acceptable signature is the owner of the company. (Only one signature is required.)
- The owner's signature must be notarized if the company is located outside of the state of California.

PARTNERSHIP

- The only acceptable signature(s) is/are that of the general partner or partners.
- Signature(s) must be notarized if the partnership is located outside of the state of California.

CORPORATION

- Two (2) officers of the corporation must sign.
- Each signature must be notarized if the corporation is located outside of the state of California.

OR

- The signature of one officer or the signature of person other than an officer is acceptable if the Bid is accompanied by a certified corporate resolution granting authority to said person to execute contracts on behalf of the corporation.
- Signature(s) must be notarized if the corporation is located outside of the state of California.

LIMITED LIABILITY COMPANY

- The signature on the Bid must be a member or, if the Articles provide for a manager, must be the manager. (Only one signature is required.)
- Signature must be notarized if the company is located outside of the state of California.

**THIS INFORMATION IS AVAILABLE IN AN ALTERNATIVE FORMAT BY
CONTACTING 562-570-6200.**

INSTRUCTIONS TO BIDDERS

11. PUBLIC WORK AND PREVAILING WAGES:

The Contractor to whom the contract is awarded, along with its subcontractors, shall pay not less than the general prevailing rate of per diem, holiday and overtime wages established by the Department of Industrial Relations (DIR) of the State of California for the locality in which the public work is to be performed for each craft, classification or type of worker needed to execute the contract. Refer to the California DIR's website, <http://www.dir.ca.gov/dlsr> for such prevailing wages and additional information.

The Director of Public Works of the City by and on behalf of the City Council has obtained from the Director of the Department of Industrial Relations of the State of California the general prevailing rate of per diem wages and the general prevailing rate of holiday and overtime work in the locality in which the public work is to be performed for each craft, classifications or type of workers needed to execute the Contract, and the same is on file with the City Engineer, 9th floor, City Hall, 333 W. Ocean Boulevard, Long Beach, California 90802. It shall be mandatory upon the Contractor to whom the Contract is awarded, and his Subcontractors to pay not less than the said prevailing rate of wages to all workers employed by Contractor or said Subcontractors in the execution of the Contract.

12. RIGHT TO REJECT:

The City reserves the right to reject at any time any or all Bids, or parts thereof, and to waive any variances, technicalities and informalities which do not impair the quality, utility, durability or performance of the items.

13. SAMPLES:

Samples of items when requested or required must be furnished to the City free of expense to the City and, if not destroyed by tests, will upon request be returned at Bidder's expense.

14. PRICES:

Prices shall be in accordance with those extended to other governmental agencies. In case of error in extension of prices, unit price will govern. All prices must be firm for the Contract term unless the City specifically provides for adjustment.

15. CITY'S POLICY FOR MINORITY AND WOMEN-OWNED BUSINESSES:

The City of Long Beach is committed to providing maximum opportunities for Disadvantaged, Minority, Women and Long Beach Business Enterprises (DBEs, MBEs, WBEs and Local) to compete successfully in supplying our needs for products and services.

SUBCONTRACTORS

To assist the City in maintaining records of its Minority and Women Outreach Program, Bidder is requested to provide the following information. Answers are optional, and failure to answer will not disqualify Bid. If additional space is required, Bidder shall attach a separate sheet.

The following Minority- or Woman-owned subcontractors are to be utilized to provide equipment, material, supplies and/or services for this Contract requirement:

Company Name: N/A

Address: _____

Commodity/Service Provided: N/A
Circle appropriate designation: MBE WBE

Ethnic Factors of Ownership: (more than 51%)
Black () American Indian ()
Hispanic () Other Non-white ()
Asian () Caucasian (X)

Certified by: _____

Valid thru: _____

Dollar value of participation: \$ _____

16. BID SUBMITTAL AND WITHDRAWAL OF BIDS:

Each Bid must be delivered to the location and received on or before the due date and time stated herein. Bids will not be accepted after the date and time stated herein. Bids may be withdrawn without prejudice providing the written request is received by the City Clerk no later than the time set for opening Bids. Withdrawals will be returned to Bidder unopened.

SUBMIT TO:
CITY OF LONG BEACH
CITY CLERK – ATTN: Michelle King
411 W OCEAN BLVD/LOBBY LEVEL
LONG BEACH CA 90802

BID DUE DATE: October 31, 2019

TIME: 11:00 am

IF BIDDER HAS ANY QUESTIONS REGARDING THIS INVITATION TO BID PLEASE CONTACT THE FOLLOWING CITY PERSONNEL.

<u>Michelle King</u>	<u>(562) 570-6020</u>
BUYER	TELEPHONE NUMBER

17. BID OPENING PROCEDURES:

All bids are publicly opened and will be posted on the City's online system at the date and time noted on the Invitation to Bid.

Bid results are posted on the City's online system as soon as they have been reviewed for responsiveness. Bids are awarded to the lowest responsible and responsive bidder meeting the City's specifications. Bid results will not be given out via telephone, City email, or facsimile.

CAUTION: Only the City Council has authority to make an award, and a contract is not in effect until the City Council makes an award and contract documents (including insurance and bonds) are signed, submitted and approved.

Bid protest procedures may be obtained from the Buyer. Protests must be submitted within five (5) business days following the electronic notification of intent to award.

18. INTER-AGENCY PARTICIPATION:

IF OTHER AGENCIES EXPRESS AN INTEREST IN PARTICIPATING IN THIS BID, WOULD YOU SUPPLY THE SAME ITEMS.

YES X NO _____

(If yes, any agency electing to participate in this Bid will order its own requirements without regard to the City of Long Beach. The City of Long Beach assumes no liability or payment guarantee on any units sold to participating agencies.)

GENERAL

The City conducted an investigation of the fire apparatus repair industry. The investigation served to provide valuable information on the industries' equipment, standards and labor rates. The information was collected and used to develop the specification and bid categories. Contractors are encouraged to participate with the understanding that the City is soliciting Bids from qualified Contractors that perform industry-accepted repairs.

Evidenced by the submittal of a bid, Contractor acknowledges and agrees to have read, understands and shall observe all terms, conditions and procedures outlined in this Specification.

Contractors shall participate in the Specification repair procedure as outlined in order to satisfy the City's requirements and to make possible the return of City fire/ambulance back to service as quickly as possible.

- A) Facility structure and equipment.
- B) Vendors may experience heavy workloads from their customer base that may delay the City's vital equipment being repaired expediently.
- C) Competitive bidding through estimates is an industry standard in conducting Fire/Ambulance Apparatus Parts and Services.
- D) Due to the complexity of some City equipment, some vendors may not have skilled technician at their employ in order to perform repairs.

This Invitation to Bid shall encompass Fire/Ambulance Apparatus Parts and Service for the City of Long Beach Fleet Services Bureau.

Contractor(s) shall maintain a Fire/Ambulance Apparatus repair facility and have been in business for a period of at least one (1) year prior to bid opening, and have the capabilities to perform Fire/Ambulance Apparatus repair services on Fire/Ambulance Apparatus owned by the City. The City reserves the right to be the sole judge as to the Contractor's adequacy to properly service the City's Fire Apparatus repair needs.

All equipment, materials or services provided shall be in compliance with all applicable State, Federal and Local Laws and Regulations.

The City reserves the right to change any portion of the work required, to add and/or delete items, or amend such other terms and conditions that may become necessary. Any such revisions shall be accomplished by written amendment to the contract and executed by the Contractor and the City.

LOCATION

In-order to keep the down-time of City Fire/Ambulance Apparatus to a minimum during maintenance, repair and overhaul, bidders shall have a place of business and adequate inventory of replacement parts and accessories within a twenty-five (25) mile radius from Fleet Services Bureau located at 2600 Temple Avenue, Long Beach.

Bidder shall state location of facility that will process orders:

- A. Anaheim - 1215 S. Fee Ana St. Anaheim 92807 , Carson - 20420 S. Susana Rd. Carson 90810

SUBCONTRACTING OF SERVICES

Contractor is required to contact Contract Administrator prior to subcontracting the work of any City fire/ambulance apparatus for additional repairs. City must know exact location of City fire/ambulance apparatus at all times.

HIDDEN DAMAGE

If, during the course of any repairs, hidden damage is discovered the contractor **shall immediately notify** the Contract Administrator and provide a supplemental VDO for the hidden damages. Should the hidden damage be significant the City reserves the right to seek new quotes for any additional work. Under no circumstances shall any additional work be performed without the written approval of the Contract Administrator. Contract Administrator may visit the facility to verify additional damage.

ADMINISTRATION AND ADMISSION

Contractor shall provide access during normal business hours to allow routine inspection of fire/ambulance apparatus repairs by the Contract Administrator or appointed representative without prior notification.

Contractor shall provide a sufficient level of security to safeguard and protect City assets and fire/ambulance apparatus against burglary, theft, vandalism and disclosure of confidential information while in its possession. Contractor shall store, whenever possible, City assets and fire/ambulance apparatus inside a locked facility after normal working hours and when the Repair Facility is not occupied.

PRICE AGREEMENT CONDITIONS

Prices charged to the City shall be based on percentage discounts from Manufacturer's Published Price Lists. Percentage discounts shall remain firm for the duration of the Contract, but said Manufacturer's Price Lists may be subject to fluctuation in accordance with changes issued by the Manufacturer. Price Lists that are submitted with bid must be in effect at time of bid opening and shall not be subject to change for a period of 90 days after bid opening.

If the prices on the Price Lists are raised, the City reserves the right to accept such raises or to cancel such items from the Contract. Contractor shall immediately notify the City of such price increase, and shall immediately give to the City the benefit of any decline in prices upon the Manufacturer's effective date of such decline. Changes in price shall be effective on the date the notice of change is received by the City Purchasing Division, or at a later date designated by the Contractor. Increases in Price Lists shall not be retroactive. Specifications and conditions herein shall supersede any conflicting conditions in Price Lists.

WARRANTY

Contractor shall provide a one year unconditional guarantee on all parts, materials, labor and workmanship. Failure to provide warranty as outlined may disqualify Contractor's Bid.

WARRANTY: Parts 365 days Labor 365 days

PAYMENT TERMS

Net _____; _____⁰% discount in _____⁰ days.

MISCELLANEOUS ITEMS

Miscellaneous related items and services not listed herein may be purchased in an amount not to exceed \$2,000.00 per order.

VENDOR CONTACT INFORMATION

Name of a person that will be the City's contact for order placement, order problems or special needs, etc. (must have a person's name).

Contact Name: Rick Tarulli _____

Contact Direct Phone: 949-556-0711 _____

Contact Fax: 951-272-8408 _____

Contact E-mail: rtarulli@socalfleet.com _____

VENDOR'S EMPLOYEES

Specify the number of current full-time employees residing in Long Beach _____⁰

BID NUMBER ITB FS 19-135

State comments and or exceptions in the blank spaces provided for each section regarding the vehicle or equipment offered corresponding to the specifications set forth. FAILURE TO COMPLETE ALL BLANK SPACES WILL OTHERWISE BE DETERMINED AS VENDOR MEETING SPECIFICATIONS MINIMUMS

Comply

REPAIR EQUIPMENT & METHODS	YES	NO	COMMENTS/EXCEPTIONS
Automated Estimating Software Program	x		
Indicate Estimating Software to be used			
Diagnostic Tools for Engine Performance	x		
DEF Diagnostics and Repair	x		
Particulate Trap Diagnostics and Repair	x		
Fire Apparatus Pump/Transfer Case Repairs	x		
Ladder Truck Ladder Repairs	x		
Diesel and Natural Gas Powered Equipment Diagnostics and Repairs	x		
Ability to be called in for Diagnostics and Repairs 24 hours a day	x		
Electronic Specialty Equipment related to Fire/ Ambulance Apparatus	x		



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/27/2019

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
FEDERATED MUTUAL INSURANCE COMPANY
HOME OFFICE: P.O. BOX 328
OWATONNA, MN 55060

CONTACT NAME: CLIENT CONTACT CENTER

PHONE
(A/C, No, Ext): 888-333-4949FAX
(A/C, No): 507-446-4664E-MAIL
ADDRESS: CLIENTCONTACTCENTER@FEDINS.COM

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: FEDERATED MUTUAL INSURANCE COMPANY

13935

INSURED
SOUTHERN CALIFORNIA FLEET SERVICES INC
2855 SAMPSON AVE
CORONA, CA 92679-6126

336-585-5

INSURER B:

INSURER C:

INSURER D:

INSURER E:

INSURER F:

COVERAGES

CERTIFICATE NUMBER: 216

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	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	N	N	9823225	03/01/2019	03/01/2020	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) EXCLUDED PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMPIOP AGG \$2,000,000
A	<input checked="" type="checkbox"/> 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	N	N	9823225	03/01/2019	03/01/2020	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE	N	N	9823226	03/01/2019	03/01/2020	EACH OCCURRENCE \$4,000,000 AGGREGATE \$4,000,000
	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					PER STATUTE E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
THIS COPY IS NOT TO BE REPRODUCED FOR ISSUANCE OF CERTIFICATES.

CERTIFICATE HOLDER

CANCELLATION

A CERTIFICATE HAS BEEN FILED WITH EACH OF YOUR CERTIFICATE HOLDERS.

216 0

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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Technician Certifications

Corona Location

Ron Madnick - (Fire Services Manager Companywide - Corona location)

- Level III fire mechanic through the California Fire Mechanics Academy
- ASE medium/heavy duty master tech
- Oshkosh ARFF factory trained. Legacy Striker Maintenance & Advanced Electronics
- Cummins Factory Certified Heavy Duty Engines X12
- Waterous Pump Factory Trained
- DOT annual inspection qualification training through CHP program

Martin Vickers- Fire tech Corona

- Level I Fire mechanic through California Fire Mechanics Academy specializing in fabrication

Scott Dixon Fire tech Corona / Anaheim / Mobile Truck

- Level I Fire mechanic through California Fire Mechanics Academy
- ASE medium / heavy duty master tech
- DOT annual inspection qualification training through CHP program

Escondido Location

Jesse Coss – Lead Fire Mechanic Escondido / Mobile Truck

- Level III fire mechanic through the California Fire Mechanics Academy
- ASE medium/heavy duty master tech
- Oshkosh ARFF factory trained. Legacy Striker Maintenance & Advanced Electronics
- DOT annual inspection qualification training through CHP program

Will Dawson - Primary technician servicing our San Diego County Regional Airport Contract /Mobile Truck

- Level I fire mechanic through the California Fire Mechanics Academy
- Oshkosh Global Striker Maintenance & Advanced Electronics (ARFF) Factory certified
- DOT annual inspection qualification training through CHP program

Hesperia Location

Juan Espino- Fire tech Hesperia / Corona / Mobile Truck

- Oshkosh Global Striker Maintenance & Advanced Electronics (ARFF) Factory certified
- Level II Fire mechanic through the California Fire Mechanics Academy

Javier Prieto – Fire tech Hesperia

- EVT certifications

Anaheim Location

Chris Lehman- Lead Fire mechanic Anaheim / Mobile Truck

- Level III fire mechanic through the California Fire Mechanics Academy
- ASE medium/heavy duty master tech
- Oshkosh Global Striker Maintenance & Advanced Electronics (ARFF) Factory certified
- DOT annual inspection qualification training through CHP program

**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

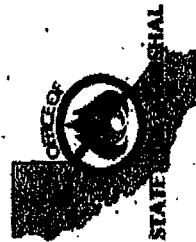
This is to certify that


RON MADNICK
successfully completed the

California State Fire Marshal's accredited course

FIRE MECHANIC 1: FIRE PUMPS AND

on
April 14, 2006




RUBEN GRIMALVA
California State Fire Marshal



**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

RON L. MADNICK

successfully completed the

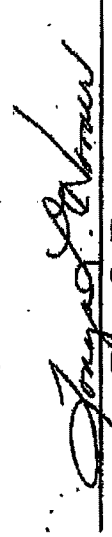
California State Fire Marshal's accredited course

FIRE MECHANIC 2A

on
April 22, 2011



Course Number C100811


Tonya L. Hoover
Acting State Fire Marshal



**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

RON L. MADNICK

successfully completed the

California State Fire Marshal accredited course


FIRE MECHANIC 2B

Allison Transmissions

on
November 9, 2012

Course Number C120864




Tanya L. Hoover
State Fire Marshal

**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

RON L. MADNICK

successfully completed the

California State Fire Marshal accredited course

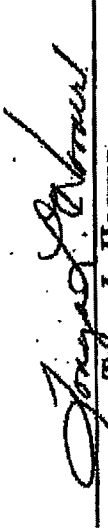
FIRE MECHANIC 3A

Ambulance Service and Maintenance

on
April 4, 2014

Course Number C130640




Tonya L. Hoover
State Fire Marshal



**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

RON L. MADNICK

successfully completed the


California State Fire Marshal accredited course

FIRE MECHANIC 3B
Aerial Apparatus

on
March 29, 2013

Course Number C120668




Tanya L. Hoover
State Fire Marshal



**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

RON L. MADNICK

successfully completed the

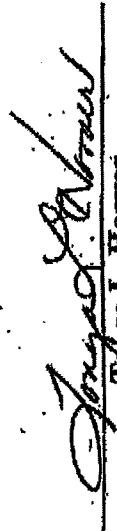
California State Fire Marshal accredited course

**FIRE MANAGEMENT 1
Management/Supervision for Company Officers**

**on
May 16, 2014**

Course Number C130785




Tanya L. Hoover
State Fire Marshal

ARA1214420

Certificate of Attendance

awarded to

RONALD MADNICK

FALL ACADEMY 2009



Course Number

FM-109

Course Hours

36

BASIC AUTO & TRUCK ELECTRONICS

David VanGroenenbergh
CFMA President

**Orange County Fire Authority
Irvine, California
November 2-6, 2009**

Certificate of Attendance

awarded to

RON L. MADNICK
ACADEMY 2012



Course Number

FM-212

FM-303

Course Hours

16

16

HALE FIRE PUMP SERVICE

ELECTRICAL MULTIPLEXING SYSTEMS

George M. Schmeltz
CEMA President

McClellan Park
Sacramento, California
April 2 - 6, 2012

National Institute for Automotive Service Excellence

Ron Madnick
 Moreno Valley, CA 92557-5908
 ASE Account #: ASE-1240-4580

Current Status



Designations

Certificate	Most Recent Testing Period	Test Series	Last Printed
Medium/Heavy Truck Technician	2018 Summer	T: Medium/Heavy Truck	10/25/2018

Certification Tests

Test	Description	Expiration Date	Status
T2	Diesel Engines	6/30/2023	Current
T3	Drive Train	12/31/2019	Current
T4	Brakes	6/30/2023	Current
T5	Suspension and Steering	12/31/2023	Current
T6	Electrical/Electronic Systems	12/31/2018	Expired
T7	Heating, Ventilation, and A/C	12/31/2023	Current
T8	Preventive Maintenance and Inspection	6/30/2023	Current

Test Results

Test	Description	Testing Period	Result
T2R	Diesel Engines	2018 Winter	Pass
T4R	Brakes	2018 Winter	Pass
T6R	Electrical/Electronic Systems	2018 Winter	Fail
T8R	Preventive Maintenance and Inspection	2018 Winter	Pass

1 Page Size: 20

4 items in 1 page

Work Experience

Experience Type	Verification Date
Repair Technician - 1 year	6/1/2000
Repair Technician - 2 years	5/1/2000

Close

Print

**EVERY
SKILL.**



Ron Madnick

Has demonstrated skill & knowledge
competencies for :

X12 CM2350 X119B

Full Qualification

Diagnostic & Troubleshooting

Course

October 18, 2019

A handwritten signature in black ink, appearing to read "Leroy Carr", written over a horizontal line.

Leroy Carr
Cummins Sales & Service



Ron Madnick
1055463

Has demonstrated skill & knowledge
competencies for:

**2010 Mid Range, Heavy Duty
Combination Engine Qualification**
2009-30Q, 31Q & 37Q

February 7, 2014

RLA

Robert L. Gardia
Cummins Pacific, LLC



Waterous Fire Pump Seminar

Certificate of Attendance

This is to Certify that

Ron Madnick

Attended 24 hours of Waterous Pump Training
October 8-10, 2019 at Waterous Company in South St. Paul
in the State of Minnesota

Mark Blake
Waterous Instructor

This certifies that:

Ron Madnick

Has successfully completed:

Legacy Striker Electrical
Troubleshooting
(40 Hours)

R. Oja

5/15/2014 - 6/20/2014

Id, Product Training Manager

Date

**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

Martin D Vickers

successfully completed the

**California State Fire Marshal accredited course
Fire Mechanic 1 (2004): Fire Pumps and Accessories**

on

April 13, 2018



A handwritten signature in black ink, appearing to read "D. Mathisen", written over a horizontal line.

**Dennis Mathisen
State Fire Marshal**



SFT ID 5698-1292

CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM

This is to certify that

Martin D Vickers

SFT ID 5698-1292

successfully completed the

California State Fire Marshal accredited course
Fire Mechanic 2B (2004): Allison Transmissions

on
November 9, 2018



A handwritten signature in dark ink, appearing to read "Dennis Mathisen".

Dennis Mathisen
State Fire Marshal



National Institute for
AUTOMOTIVE SERVICE EXCELLENCE

ASE Certification Status

Martin D Vickers
Riverside, CA 92504-1412
ASE ID: ASE-1088-9755

Created: March 21, 2019
11:28:36 AM

This individual currently has the ASE certification status shown below:



Current ASE Designations

Certificates	Test Series
Medium/Heavy Truck Technician	T: Medium/Heavy Truck

ASE Certification Details

Test	Description	Expiration Date	Status
T2	Diesel Engines	07/01/2000	Expired
T4	Brakes	12/31/2023	Current
T8	Preventive Maintenance and Inspection	12/31/2023	Current

To become ASE certified, you must pass an ASE test and have the required amount of relevant hands-on work experience. You can download the Work Experience Form at www.ase.com/expform.

Any expired certification can be reinstated by taking the corresponding recertification test. If you have any questions, please contact us.

Sincerely,
ASE Customer Service
E-mail: contactus@ase.com

Phone: 1-800-390-6789
Fax: (703) 669-6122

**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that
Scott D Dixon
successfully completed the

California State Fire Marshal accredited course
Fire Mechanic 1 (2004): Fire Pumps and Accessories

on
November 17, 2017



Mec10002



SFT ID 7995-9153

A handwritten signature in black ink, appearing to read "D. Mathisen".

Dennis Mathisen
State Fire Marshal

**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

Scott D Dixon

SFT ID 7995-9153

successfully completed the

California State Fire Marshal accredited course
Fire Mechanic 3B: Aerial Apparatus

on
November 9, 2018



Dennis Mathisen
State Fire Marshal





National Institute for
AUTOMOTIVE SERVICE EXCELLENCE

ASE Certification Status

Scott D Dixon
Menifee, CA 92586-3468
ASE ID: ASE-5433-0669

Created: April 18, 2017
2:48:22 PM

This individual currently has the ASE certification status shown below:



Current ASE Designations

Certificates	Test Series
Medium/Heavy Truck Technician	T: Medium/Heavy Truck

ASE Certification Details

Test	Description	Expiration Date	Status
T1	Gasoline Engines	12/31/2020	Current
T4	Brakes	12/31/2018	Current
T6	Electrical/Electronic Systems	06/30/2020	Current
T8	Preventive Maintenance and Inspection	12/31/2020	Current

To become ASE certified, you must pass an ASE test and have the required amount of relevant hands-on work experience. You can download the Work Experience Form at www.ase.com/expform.

Any expired certification can be reinstated by taking the corresponding recertification test. If you have any questions, please contact us.

Sincerely,
ASE Customer Service
E-mail: contactus@ase.com

Phone: 1-800-390-6789
Fax: (703) 669-6122

CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM

This is to certify that

JESSE F. COSS

successfully completed the

California State Fire Marshal accredited course

FIRE MECHANIC 1
Fire Pumps and Accessories

ON
April 4, 2014

Course Number C130637



Tanya L. Hoover
Tanya L. Hoover
State Fire Marshal

**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

JESSE F. COSS

successfully completed the

California State Fire Marshal accredited course

FIRE MECHANIC 2B

Allison Transmissions

ON
March 27, 2015



Course Number C149728



Tanya L. Hoover
Tanya L. Hoover
State Fire Marshal

**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

JESSE COSS


successfully completed the

California State Fire Marshal accredited course

FIRE MECHANIC 2A (2004)
Fire Apparatus Electrical Systems

on
October 28, 2016




Michael J. Richwine
Acting State Fire Marshal

Course Number C160460

CERTIFICATE OF COURSE ATTENDANCE

Jesse Coss

has received 36 hours of state approved instruction in the subject of

AERIAL APPARATUS

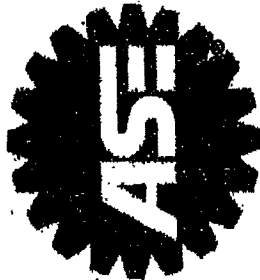


PRESENTED BY:

George M. Schmeltz, CFMA President

TRAINING DATES:

April 3 - 7, 2017



National Institute for
**AUTOMOTIVE
SERVICE
EXCELLENCE**

Be it known that

JESSE F COSS

has successfully passed the examinations and met the work experience requirement prescribed by the National Institute for Automotive Service Excellence and is hereby ASE CERTIFIED in the service areas listed below.

MASTER MEDIUM/HEAVY TRUCK TECHNICIAN

AREAS OF DEMONSTRATED ACHIEVEMENT

GASOLINE ENGINES

DIESEL ENGINES

DRIVE TRAIN

BRAKES

SUSPENSION AND STEERING

ELECTRICAL/ELECTRONIC SYSTEMS

HEATING, VENTILATION, AND A/C

PREVENTIVE MAINTENANCE AND INSPECTION

EXPIRES

DECEMBER 31, 2020

DECEMBER 31, 2020

DECEMBER 31, 2020

DECEMBER 31, 2020

DECEMBER 31, 2020

DECEMBER 31, 2020

DECEMBER 31, 2020

DECEMBER 31, 2020

GIVEN THIS 26TH DAY OF AUGUST 2015, AT LEESBURG, VIRGINIA

ASE-5536-7575

ASE IDENTIFICATION NUMBER

Trudy A. Zyl
TECHNICAL MANAGER

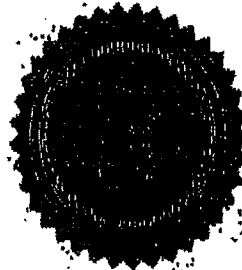
THIS CERTIFICATE ACKNOWLEDGES THAT

Jesse Coss



HAS SUCCESSFULLY COMPLETED CHP & FMCSA
COMMERCIAL VEHICLE LEVEL 1, LEVEL 5 & DOT ANNUAL
INSPECTION QUALIFICATION TRAINING

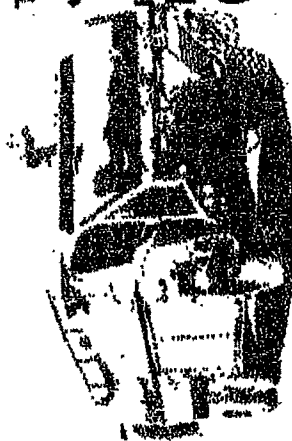
ON DECEMBER 14, 2015

This On-site training program provides information on the requirements and processes for performing a CHP & FMCSA periodic inspection on qualifying commercial motor vehicles. Course includes but is not limited to instruction in the application sections of the FMCSA Part 393, 395 and the Appendix G including but not limited to Definitions and Identification of a CMV, inspection requirements identification of required and defective components, identification of failing conditions, proper completion of inspection reports, record keeping and required qualifications of inspectors. Participant has scored 80% or above to meet course requirements and receive this certification.



December 14, 2015
Date Completed


PAM CARLSON
SAFER-R COMPLIANCE
TRAINING ADMINISTRATOR
909-754-4036
DATE Dec 14 2015
Training Specialist: ED CARLSON 



This certifies that
Jesse Coss

Has successfully completed:

**Legacy Striker Maintenance Course
(40 hours)**

Derek Kraege

Derek Kraege, Product Training Manager

June 9-13, 2014

Date



This certifies that:
Jesse Coss

Has successfully completed:
**Legacy Striker Advanced Electrical and Hydraulic
Course (40 hours)**

Derek Kraege
Derek Kraege, Product Training Manager

June 18-20, 2014
Date



Certificate of Training



This Certificate Declares That

Jesse Coss

Has successfully completed a training program on
DD Engine Repair, Service & Troubleshoot - 5071

Conducted by
Valley Power Systems, Inc.
November 2 - 5, 2015


Andy Quintones/ Distributor - Product Trainer
Valley Power Systems, Inc.

CERTIFICATE OF COURSE ATTENDANCE

Jesse Coss

has received 32 hours of state approved instruction in the subject of

DETROIT DIESEL ENGINE SERVICE & TROUBLESHOOTING



PRESENTED BY:

George M. Schmeltz, CFMA President

TRAINING DATES:

November 2 - 6, 2015

**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

WILLIAM R. DAWSON

successfully completed the

California State Fire Marshal accredited course

FIRE MECHANIC 1
Fire Pumps and Accessories

on
November 7, 2014

Course Number C140290



Tonya L. Hoover
Tonya L. Hoover
State Fire Marshal

**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

William R Dawson

SFT ID 2005-0596

successfully completed the

**California State Fire Marshal accredited course
Fire Mechanic 2B (2004): Allison Transmissions**

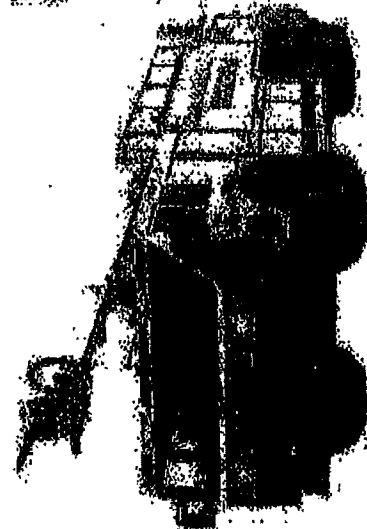
**on
November 9, 2018**



A handwritten signature in black ink, appearing to read "D. Mathisen", written over a horizontal line.

**Dennis Mathisen
State Fire Marshal**





This course is for:

William Dawson

Has successfully completed:

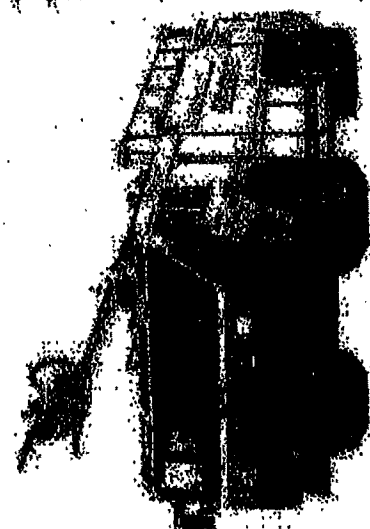
**Legacy Sinker Electrical Troubleshooting Course
(40 hours)**

Cal Hubbard

Cal Hubbard, Product Training Specialist

Aug. 01, 2016 to Aug. 01, 2016

Date



This certifies that
William Dawson

Has successfully completed:

**Legacy Sinker Maintenance Course
(40 hours)**

Carl H. Miller

Carl H. Miller, Product Training Specialist

Jul 2017, 2017 to Aug 2018

Date

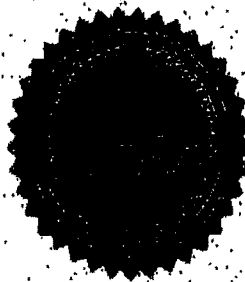
THIS CERTIFICATE ACKNOWLEDGES THAT

Will Dawson

HAS SUCCESSFULLY COMPLETED CHP & FMCSA
COMMERCIAL VEHICLE LEVEL 1, LEVEL 5 & DOT ANNUAL
INSPECTION QUALIFICATION TRAINING

ON DECEMBER 14, 2015

This On-site training program provides information on the requirements and processes for performing a CHP & FMCSA periodic inspection on qualifying commercial motor vehicles. Course includes but is not limited to instruction in the application sections of the FMCSA Part 393, 396 and the Appendix G including but not limited to Definitions and Identification of a CMV, inspection requirements Identification of required and defective components, Identification of failing conditions, proper completion of inspection reports, record keeping and required qualifications of inspectors. Participant has scored 80% or above to meet course requirements and receive this certification.



December 14, 2015
Date Completed

PAM CARLSON
SAFER-R COMPLIANCE
TRAINING ADMINISTRATOR
909-754-4036

DATE Dec 14 20 15

Training Specialist: ED CARLSON

**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

JUAN C. ESPINO

successfully completed the


California State Fire Marshal's accredited course

FIRE MECHANIC 1
Fire Pump and Accessories

on
April 22, 2011

Course Number C100810




Tonya L. Hoover
Acting State Fire Marshal

CALIFORNIA FIRE SERVICE TRAINING AND EDUCATION SYSTEM

This is to certify that

Juan C Espino

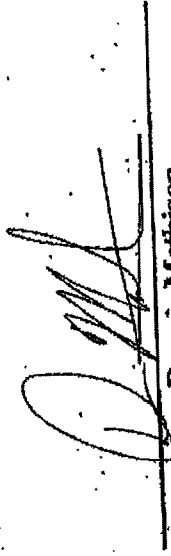
SFT ID 1001-4066

successfully completed the

California State Fire Marshal accredited course
Fire Mechanic 2A (2004): Fire Apparatus Electrical Systems

on

November 9, 2018



Dennis Mathisen
State Fire Marshal



**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

JUAN C. ESPINO

successfully completed the

California State Fire Marshal accredited course

FIRE MECHANIC 2B
Allison Transmissions

on
November 9, 2012

Course Number C120364



Tonya L. Hoover
Tonya L. Hoover
State Fire Marshal



1541 Payco's Road Charlotte, MI 48824
SPARTANCHASSIS.COM
517.543.8400

Certificate of Recognition on August 23, 2012

This certificate is presented to

Juan Espino

For the successful completion of the Spartan Chassis
Technical Training Seminar MH/FT specific – 34 hours consisting of:

- ♦ Spartan Warranty
- ♦ Wabco Air Systems
- ♦ Wabco ABS Brakes
- ♦ Chassis Electrical Systems
- ♦ Cummins Engines
- ♦ Chassis Electrical-VMUX
- ♦ Basic Electrical
- ♦ Driveline Analysis
- ♦ Wheel Seal Install
- ♦ Hadley System

- ♦ Chassis Maintenance & Brakes (D.O.T.)
- ♦ Schematic Reading
- ♦ Air Conditioning Principles
- ♦ SRS RollTek
- ♦ Spartan Warranty
- ♦ Spartan/OEM Integration
- ♦ Revco Graining
- ♦ DTS Hydraulics
- ♦ Hendrickson HTB
- ♦ Spartan Controller

Michael O'Neil
Spartan Chassis Technical Trainer

**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

Juan C Espino

SFT ID 1001-4066

successfully completed the

**California State Fire Marshal accredited course
Fire Mechanic 2A (2004): Fire Apparatus Electrical Systems**

on

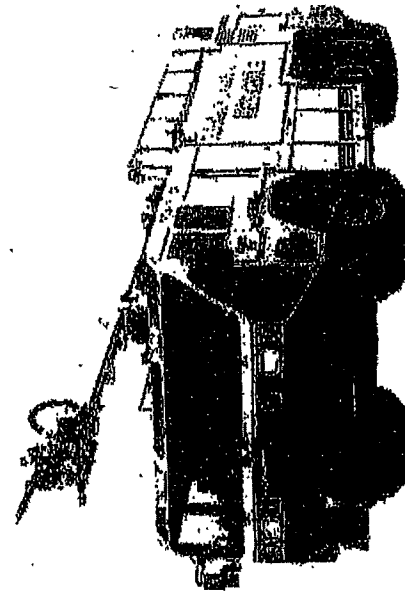
November 9, 2018



A handwritten signature in black ink, appearing to read "D. Mathisen", written over a horizontal line.

**Dennis Mathisen
State Fire Marshal**





This certifies that:
Juan Espino

Has successfully completed:

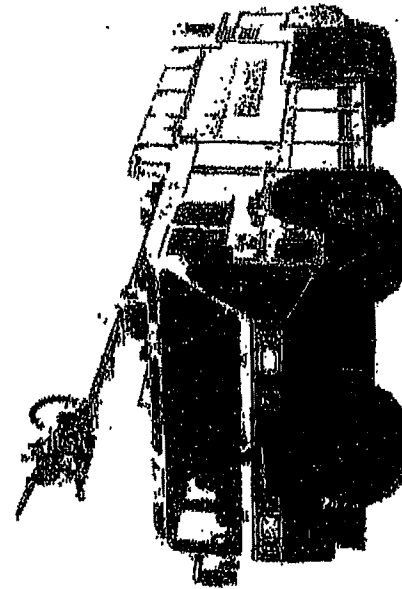
**Legacy Striker Electrical Troubleshooting Course
(40 hours)**

Carl Hubbell

Carl Hubbell, Product Training Specialist

Aug 06, 2018 to Aug 10, 2018

Date



This certifies that
Juan Espino

Has successfully completed:

Legacy Striker Maintenance Course
(40 hours)

Carl Hubbell

Carl Hubbell, Product Training Specialist

Jul 30, 2018 to Aug 03, 2018

Date

CERTIFICATE OF COURSE ATTENDANCE

Javier Prieto

has received 4 hours of state approved instruction in the subject of

LAWS, REGULATIONS & STANDARDS



Joe Pastore, CFMA President

PRESENTED BY:

April 5, 2019

TRAINING DATES:

**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

JAVIER PRIETO JR

successfully completed the

California State Fire Marshal's accredited course

FIRE MECHANIC 3B

Aeiral Apparatus

on
November 6, 2009



A handwritten signature in black ink, appearing to read "Kate Dargan".

Kate Dargan
California State Fire Marshal

Course Number C090426

**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

Javier Prieto Jr Jr.

successfully completed the

California State Fire Marshal accredited course

Company Officer 2A: Human Resource Management (2014)

on

April 13, 2018



A handwritten signature in black ink, appearing to read "D. Mathisen", written over a horizontal line.

**Dennis Mathisen
State Fire Marshal**



SFT ID 1000-0349

**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

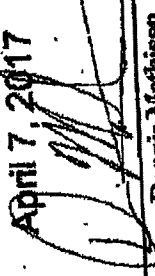
JAVIER PRIETO JR

successfully completed the

California State Fire Marshal accredited course

**FIRE MECHANIC 3A (2004)
Ambulance Service and Maintenance**

**ON
April 7, 2017**



**Dennis Mathisen
State Fire Marshal**



Course Number C-180926

**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

This is to certify that

JAVIER PRIETO JR

successfully completed the

California State Fire Marshal's accredited course

FIRE MECHANIC 2A

Fire Apparatus Electrical Systems

**on
April 11, 2009**




Kate Dargan
California State Fire Marshal

**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**


This is to certify that

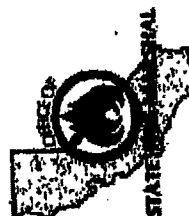
JAVIER PRIETO JR
successfully completed the

California State Fire Marshal's accredited course

FIRE MECHANIC 2B
Allison Transmissions

on
March 21, 2008


Kate Dargan
California State Fire Marshal



CALIFORNIA FIRE SERVICE TRAINING AND EDUCATION SYSTEM

This is to certify that

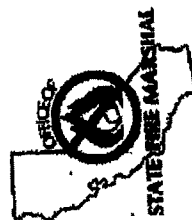
JAVIER PRIETO

successfully completed the

California State Fire Marshal's accredited course

FIRE MECHANIC 1
Fire Pumps and Accessories

on
April 6, 2007



Ruben Grijalva
RUBEN GRIJALVA
California State Fire Marshal

**CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM**

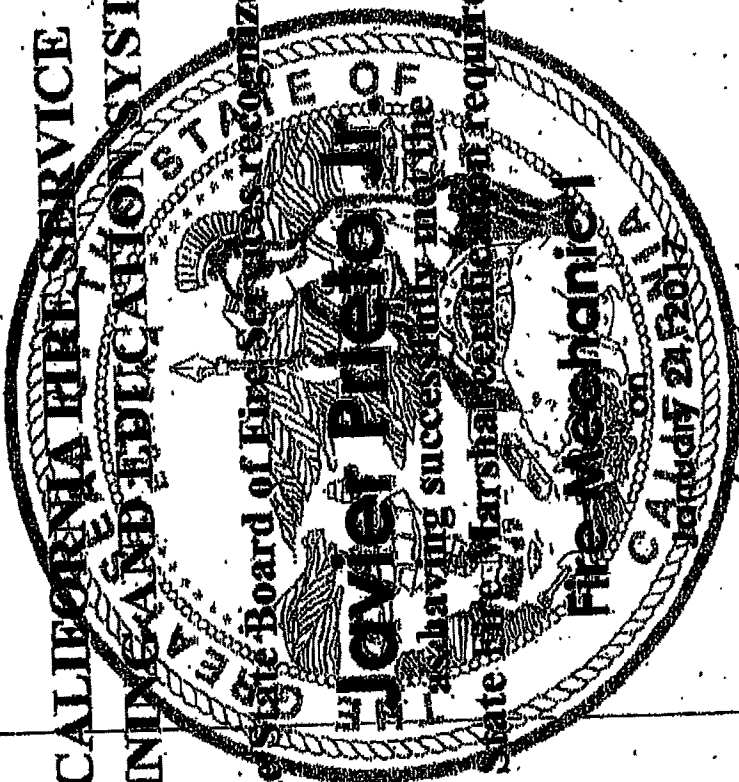
The State Board of Fire Service recognizes

Javier Prieto Jr.

for having successfully met the

California State Fire Marshal Certification requirements for

Fire-Mechanical



Michael J. Richwine

Michael J. Richwine
Acting State Fire Marshal

#140-9625

This Certificate is Valid for five (5) Years

CERTIFICATE OF COURSE ATTENDANCE

Javier Prieto

has received 32 hours of state approved instruction in the subject of

MULTIPLEXING DIAMOND LOGIC



PRESENTED BY:

Joe Pastore, CFMA President

TRAINING DATES:

April 1-4, 2019

Certificate of Attendance

awarded to

JAVIER PRIETO, JR.

FALL ACADEMY 2008



Course Number

FM-109

Course Hours

32

BASIC AUTO & TRUCK ELECTRONICS

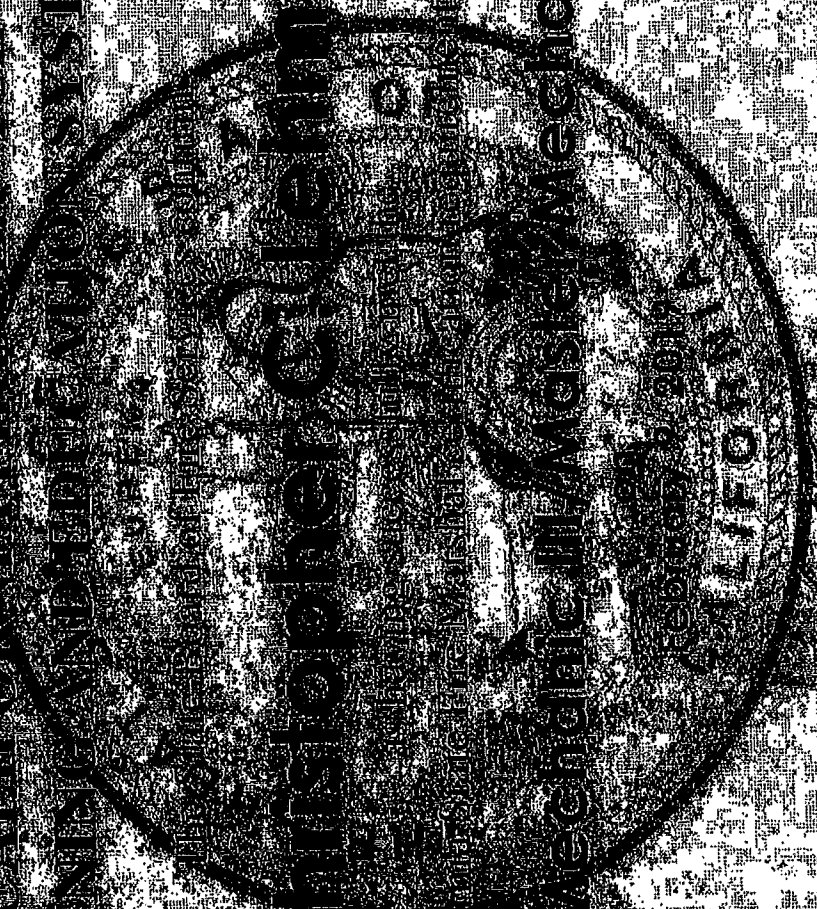
Orange County Fire Authority
Irvine, California
November 8-7, 2008

David VanGroenenbergh
CFEMA President

CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM

Christopher Cullemann

Fire Mechanic III / Master Mechanic



SEP 19 1968

AMERICAN VULCANIZING CO.

NEW YORK, N. Y.

REGISTERED PATENT

CHARLES F. BETHMAN

U. S. PATENT OFFICE

COMMUNICATIONS BY TELEPHONE

FIRE-RECHARGE

RECHARGE



CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM

This is to certify that

CHRISTOPHER C. LEHMAN

successfully completed the

California State Fire Marshal accredited course

FIRE MECHANIC 2B (2004)

Allison Transmissions

On

October 28, 2016



Michael J. Kitchyine

Michael J. Kitchyine

Acting State Fire Marshal

CSFMS 1504

THE NATIONAL ASSOCIATION OF
TRAINING AND EDUCATION SYSTEMS

San Francisco, California

CHRISTOPHER C. LEBLANC

Executive Director

1000 North Van Ness Street, Suite 1000

San Francisco, California 94109

Telephone (415) 774-1100



CALIFORNIA FIRE SERVICE
TRAINING AND EDUCATION SYSTEM

has awarded the

Christopher C. Lehman

membership in the

California Fire Training Institute

Company Officer 2A, Irvine Fire Department, Irvine, California

is

January 1, 2014





THE INTERNATIONAL TELEGRAPHIC UNION

OF AMSTERDAM AND THE INTERNATIONAL TELEGRAPHIC UNION

CHRONOLOGICAL TABLE

OF THE TELEGRAPHIC UNION

AND THE INTERNATIONAL TELEGRAPHIC UNION

OF AMSTERDAM AND THE INTERNATIONAL TELEGRAPHIC UNION

1864





National Institute for
AUTOMOTIVE SERVICE EXCELLENCE

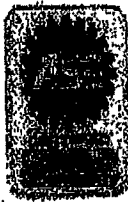
ASE Certification Status

Christopher C Lehman
Redlands, GA 92874-3843
ASE ID: ASE-5567-1752

Created: October 15, 2016

11:52:14 PM

This individual currently has the ASE certification status shown below:



Current ASE Designations

Certificates	Test Series
Master Medium/Heavy Truck Technician	T: Medium/Heavy Truck

ASE Certification Details

Test	Description	Expiration Date	Status
T1	Gasoline Engines	12/31/2021	Current
T3	Drive Train	12/31/2021	Current
T5	Suspension & Steering	12/31/2021	Current
T7	Heating Ventilation & Air Conditioning	12/31/2021	Current

To become ASE certified, you must pass an ASE test and have the required amount of relevant hands-on work experience. You can download the Work Experience Form at www.ase.com/expform.

Any expired certification can be reinstated by taking the corresponding recertification test. If you have any questions, please contact us.

Sincerely,
ASE Customer Service
E-mail: contactus@ase.com

Emergency Relief Ordinance

Certification Commission, Inc.

Chris Lehman

President of the Board of Directors

Member of the Board of Directors

Chris Lehman
President of the Board of Directors

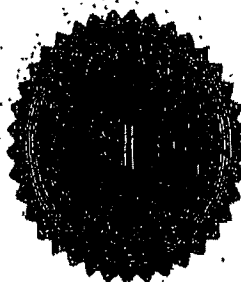
THIS CERTIFICATE ACKNOWLEDGES THAT

Chris Lehman

HAS SUCCESSFULLY COMPLETED CHP & FMCSA
COMMERCIAL VEHICLE LEVEL 1, LEVEL 5 & DOT ANNUAL
INSPECTION QUALIFICATION TRAINING

ON NOVEMBER 30, 2015

This On-site training program provides information on the requirements and processes for performing a CHP & FMCSA periodic inspection on qualifying commercial motor vehicles. Course includes but is not limited to instruction in the application sections of the FMCSA Part 393, 396 and the Appendix G including but not limited to Definitions and Identification of a CMV, inspection requirements identification of required and defective components, identification of failing conditions, proper completion of inspection reports, record keeping and required qualifications of inspectors. Participants must score 80% or better overall to meet course requirements and receive this certification.



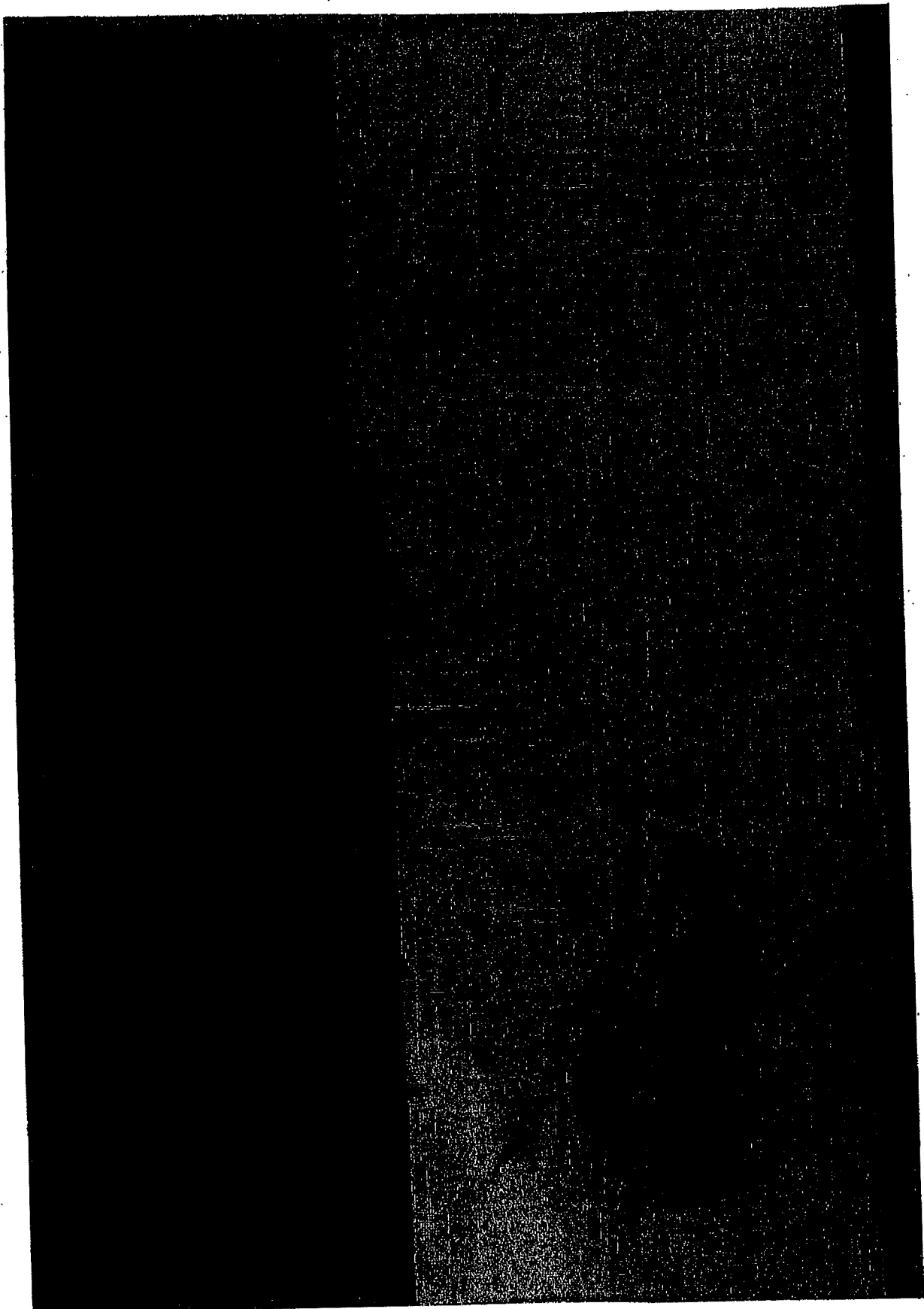
Date Completed November 30, 2015

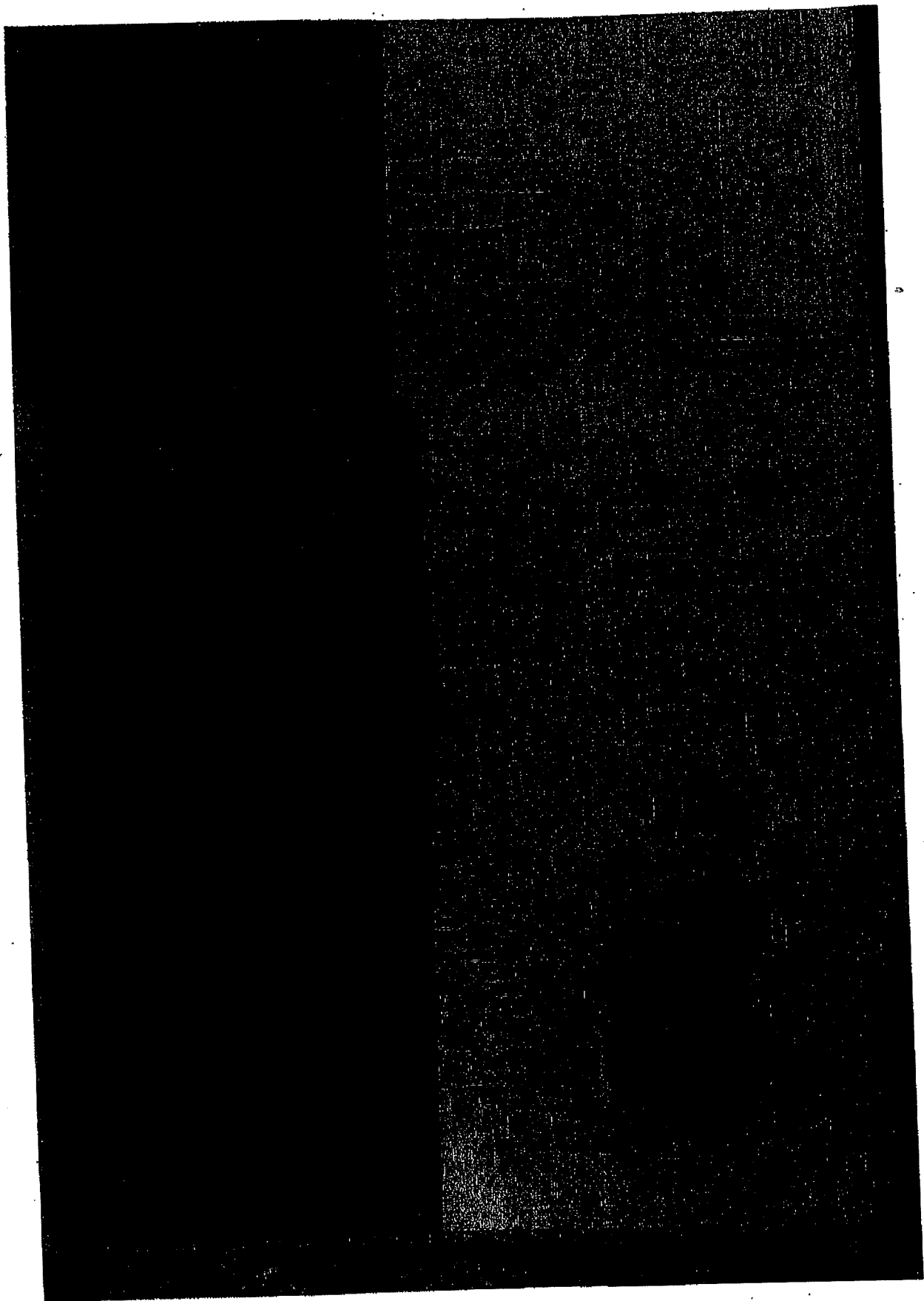

PAM CARLSON

SAFER-R COMPLIANCE
TRAINING ADMINISTRATOR
909-754-4036

DATE: 11-30 2015

Training Specialist: ED CARLSON 





Attachment A

Debarment, Suspension, Ineligibility and Voluntary Exclusion Certification

Please read Acceptance of Certification and Instructions for Certification before completing

As a current or potential vendor for the City of Long Beach (City) your firm, through its business relationship with the City, may be the recipient of federal grant funds. As such, the City is required to document that neither your business entity or organization, nor any of your principals are debarred, suspended, ineligible, or have voluntarily been excluded from receiving federal grant funds. Consistent with Executive Order No. 12549 Title 2 CFR Part 180 Subpart C, all potential recipients of federal grant funds are required to comply with the requirements specified below. By submission of proposal/bid/agreement, the undersigned, under penalty of perjury, certifies that the participant, nor any of its principals in the capacity of owner, director, partner, officer, manager, or other person with substantial influence in the development or outcome of a covered transaction, whether or not employed by the participant:

- Are not currently under suspension, debarment, voluntary exclusion, or determination of ineligibility by any Federal department or agency;
- Have not, within a three (3) year period preceding this bid/agreement/proposal, been suspended, debarred, voluntarily excluded or declared ineligible by a federal agency;
- Do not presently have a proposed debarment proceeding pending;
- Have not, within a three (3) year period preceding this bid/agreement/proposal, been indicted or convicted, or had a civil judgment rendered against it by a court of competent jurisdiction in any matter involving fraud or official misconduct;
- Have not, within a three (3) year period preceding this bid/agreement/proposal, had one or more public transactions (Federal, State, or local) terminated for cause or default.

If reorganization, management turnover, or a shift or change of principals' status occurs, written notice must be submitted within 21 days. Subsequent disclosure of unfavorable information will be subject to thorough review and remedial action. Updated versions of this certification may be requested on a routine basis.

Where the potential prospective recipient of Federal assistance funds is unable to certify to any of the statement in this certification, such prospective participant shall attach an explanation to the applicable bid/agreement/proposal.

Southern California Fleet Services, Inc.

Business/Contractor/Agency

Tom Franchina

President

Name of Authorized Representative

Title of Authorized Representative

Signature of Authorized Representative

Date

r20141001



City of Long Beach
Purchasing Division
333 W Ocean Blvd/7th Floor
Long Beach CA 90802

ATTACHMENT B

Reference Information Form

Client/Contractor Name City of Long Beach

Project Manager/Contact Name Tim Duggan E-mail tim.duggan@longbeach.gov Ph. No. 562-570-5406

Address 2600 Temple Ave. Long Beach CA 90806

Project Description Maintenance and repair of Seagrave Fire Apparatus

Project Dates (Start and End) 2/1/16 Contract Term(s) 1/31/20 Contract Amount \$600,000

Client/Contractor Name Riverside County Fire Dept.

Project Manager/Contact Name Randy Baker E-mail randy.baker@fire.ca.gov Ph. No. 951-435-9997

Address 210 W. San Jacinto Ave. Perris Ca 92570

Project Description Fire apparatus maintenance and repair contract

Project Dates (Start and End) 4/2018 Contract Term(s) 4/20/2020 Contract Amount \$1,200,000 shared annually

Client/Contractor Name Los Angeles County Fire Dept.

Project Manager/Contact Name Robert Shubin E-mail robert.shubin@fire.lacounty.gov Ph. No. 213-247-8875

Address 5801 S. Eastern Ave. Ste 100 Commerce CA

Project Description Emergency Vehicle Repair Contract

Project Dates (Start and End) 1/2017-12/2019 Contract Term(s) 3 years Contract Amount \$600,000 annually
Contract was awarded to SCFS 9/2019 for an additional 3 years. New contract amount \$980,000 annually

Client/Contractor Name City of Redlands

Project Manager/Contact Name Aaron Jenkins E-mail ajenkins@cityofredlands.org Ph. No. 909-841-4752

Address 1270 Park Ave. ste A Redlands 92373

Project Description Fleet maintenance for city fleet including fire apparatus

Project Dates (Start and End) 6/2/15 Contract Term(s) 6/4/20 Contract Amount \$700,000 annually

Client/Contractor Name Orange County Fire Authority

Project Manager/Contact Name Don Friedline E-mail donfriedline@ocfa.org Ph. No. 949-430-1201

Address 1 Fire Authority Way Rd. Irvine 92602

Project Description Fire apparatus repair contract

Project Dates (Start and End) 1/21/15 Contract Term(s) 2/31/20 Contract Amount \$100k

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

Southern California Fleet Services, Inc.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☒ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ►

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

PO Box 2208

6 City, state, and ZIP code

Decatur, AL 35609-2208

7 List account number(s) here (optional)

Requester's name and address (optional)

Print or type.
See Specific Instructions on page 3.

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

____ - ____ - ____

or

Employer identification number

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign
Here

Signature of
U.S. person ►

Date ►

5-13-19

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

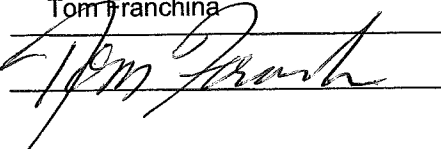
If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.



City of Long Beach
Purchasing Division
333 W. Ocean Blvd 7th Floor
Long Beach, CA 90802

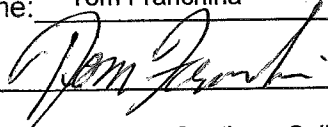
- and conditional surplus funds of greater than \$10 million) or greater rating as reported by A.M. Best Company or equivalent, unless waived in writing by City's Risk Manager, or
- Non-admitted in the State of California with a current financial responsibility rating of A (Excellent) or better and a current financial size category (FSC) of VIII (capital surplus and conditional surplus funds of greater than \$100 million) or greater rating as reported by A.M. Best Company or equivalent, unless waived in writing by the City's Risk Manager.
 - All coverages for Subcontractors shall be subject to the requirements stated herein and shall be maintained at no expense to the City.
 - Contractor shall furnish the City with certificates of insurance and original endorsements providing coverage as required above. The certificates and endorsements for each insurance policy are to be signed by a person authorized by that insurer to bind coverage on its behalf.
 - Before any of Contractor's or Subcontractor's employees shall do any work on the City's property, Contractor shall furnish the City with the required certificates evidencing that such insurance is being maintained. Such certificates shall specify the date when such insurance expires. Such insurance shall be maintained until after the Work under the Contract has been completed and accepted.
 - Such insurance as required herein or in any other documents to be considered a part hereof shall not be deemed to limit Contractor's liability under this Contract.
 - Contractor shall defend, indemnify and hold harmless the City, its officials and employees from and against any and all liability for claims for bodily injury and property damage arising out of negligent acts, omissions or errors of any employee of Contractor at the Site.
 - Contractor shall list the name and location of the place of business of each Subcontractor who will perform work, labor or services for Contractor, or who specially fabricates and installs a portion of the Work or improvement in an amount in excess of one-half of one percent of Contractor's total contract cost. The Subcontractor list shall be submitted with Contractor's Bid.

By submitting a signature below, Bidder promises that insurance requirements can be provided as requested.

Printed Name:	Tom Franchina	Title:	President
Signature:		Date:	10-22-19

If a contractor has not received a waiver from complying with the EBO and the timeframe within which it can delay implementation has expired but it has failed to comply with the EBO, the Contractor may be deemed to be in material breach of the Contract. In the event of a material breach, the City may cancel, terminate or suspend the City agreement, in whole or in part. The City also may deem the Contractor an irresponsible bidder and disqualify the Contractor from contracting with the City for a period of three years. In addition, the City may assess liquidated damages against the Contractor which may be deducted from money otherwise due the Contractor. The City may also pursue any other remedies available at law or in equity.

By my signature below, I acknowledge that the Contractor understands that to the extent it is subject to the provisions of the Long Beach Municipal Code section 2.73, the Contractor shall comply with this provision.

Printed Name: Tom Franchina Title: President
Signature:  Date: 10-22-19
Business Entity Name: Southern California Fleet Services, Inc.

EQUAL BENEFITS ORDINANCE CERTIFICATION OF COMPLIANCE

Section 1. CONTRACTOR/VENDOR INFORMATION

Name: Southern California Fleet Services, Inc. Federal Tax ID No [REDACTED]
Address: 2855 Sampson Ave.
City: Corona State: CA ZIP: 92879
Contact Person: Tom Franchina Telephone: 951-272-8655
Email: tfranchina@socalfleet.com Fax: 951-272-8408

Section 2. COMPLIANCE QUESTIONS

- A. The EBO is inapplicable to this Contract because the Contractor/Vendor has no employees. Yes x No
- B. Does your company provide (or make available at the employees' expense) any employee benefits? x Yes No
(If "yes," proceed to Question C. If "no," proceed to section 5, as the EBO does not apply to you.)
- C. Does your company provide (or make available at the employees' expense) any benefits to the spouse of an employee?
 x Yes No
- D. Does your company provide (or make available at the employees' expense) any benefits to the domestic partner of an employee?
 x Yes No (If you answered "no" to both questions C and D, proceed to section 5, as the EBO is not applicable to this contract. If you answered "yes" to both Questions C and D, please continue to Question E. If you answered "yes" to Question C and "no" to Question D, please continue to section 3.)
- E. Are the benefits that are available to the spouse of an employee identical to the benefits that are available to the domestic partner of an employee?
 x Yes No
(If "yes," proceed to section 4, as you are in compliance with the EBO. If "no," continue to section 3.)

Section 3. PROVISIONAL COMPLIANCE

- A. Contractor/vendor is not in compliance with the EBO now but will comply by the following date:

_____ By the first effective date after the first open enrollment process following the contract start date, not to exceed two years, if the Contractor/vendor submits evidence of taking reasonable measures to comply with the EBO; or

_____ At such time that the administrative steps can be taken to incorporate nondiscrimination in benefits in the Contractor/vendor's infrastructure, not to exceed three months; or

_____ Upon expiration of the contractor's current collective bargaining agreement(s).

- B. If you have taken all reasonable measures to comply with the EBO but are unable to do so, do you agree to provide employees with a cash equivalent? (The cash equivalent is the amount of money your company pays for spousal benefits that are unavailable for domestic partners.)

_____ Yes _____ No

Section 4. REQUIRED DOCUMENTATION

At time of issuance of purchase order or contract award, you may be required by the City to provide documentation (copy of employee handbook, eligibility statement from your plans, insurance provider statement, etc.) to verify that you do not discriminate in the provision of benefits.

Section 5. CERTIFICATION

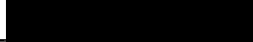
I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that I am authorized to bind this entity contractually. By signing this certification, I further agree to comply with all additional obligations of the Equal Benefits Ordinance that are set forth in the Long Beach Municipal Code and in the terms of the contract of purchase order with the City.

Executed this 22 day of OCTOBER, 2019, at 2pm

Name Tom Franchina

Signature 

Title President

Federal Tax ID No. 



State of California Secretary of State

S

Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

FE87315**FILED**

In the office of the Secretary of State
of the State of California

JUL-22 2016**1. CORPORATE NAME**

SOUTHERN CALIFORNIA FLEET SERVICES, INC.

2. CALIFORNIA CORPORATE NUMBER

C1916974

This Space for Filing Use Only

No Change Statement (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

Complete Addresses for the Following (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
2855 SAMPSON AVENUE, CORONA, CA 92879			
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
2855 SAMPSON AVENUE, CORONA, CA 92879			
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

Names and Complete Addresses of the Following Officers (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
TOM FRANCHINA	2855 SAMPSON AVENUE, CORONA, CA 92879			
8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
TOM FRANCHINA	2855 SAMPSON AVENUE, CORONA, CA 92879			
9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
TOM FRANCHINA	2855 SAMPSON AVENUE, CORONA, CA 92879			

Names and Complete Addresses of All Directors, Including Directors Who are Also Officers (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME	ADDRESS	CITY	STATE	ZIP CODE
TOM FRANCHINA	2855 SAMPSON AVENUE, CORONA, CA 92879			
11. NAME	ADDRESS	CITY	STATE	ZIP CODE
12. NAME	ADDRESS	CITY	STATE	ZIP CODE

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

Agent for Service of Process If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS
GORGE M. REYES

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE
3390 UNIVERSITY AVENUE, FIFTH FLOOR, RIVERSIDE, CA 92507			

Type of Business

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION
TRUCK REPAIR SERVICE

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

07/22/2016

GEORGE M. REYES

ATTORNEY

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE



State of California Secretary of State

S

Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

G912067**FILED**

In the office of the Secretary of State
of the State of California

SEP-04 2019**1. CORPORATE NAME**

SOUTHERN CALIFORNIA FLEET SERVICES, INC.

2. CALIFORNIA CORPORATE NUMBER

C1916974

This Space for Filing Use Only

No Change Statement (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.



If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

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4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY STATE ZIP CODE

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

Names and Complete Addresses of the Following Officers (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE

8. SECRETARY ADDRESS CITY STATE ZIP CODE

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE

Names and Complete Addresses of All Directors, Including Directors Who are Also Officers (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME ADDRESS CITY STATE ZIP CODE

11. NAME ADDRESS CITY STATE ZIP CODE

12. NAME ADDRESS CITY STATE ZIP CODE

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

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14. NAME OF AGENT FOR SERVICE OF PROCESS

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

Type of Business

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

09/04/2019

DALE HUFFMAN

CPA

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE