



Great By Choice

Brenda Allen, Director

Office of Purchasing and Supply Services

Facilities Administration Building (FAB)

13300 Old Marlboro Pike, Room 20

Upper Marlboro, MD 20772

301-952-6560 Fax: 301-952-6605

www1.pgcps.org

NOTICE OF AWARD

RENEWAL NO: 1

Eastern Food Services, Inc.
8660 Cherry Lane, Suite 39
Laurel, MD 20707
Telephone: (301) 953-7699
Fax: (301) 776-3030
Email judy@easternfood.com

Subject: Notice of Renewal for IFB NO.: 126-14: Ala Carte Food Products and Canned Beverages

Attention: Judy Lee

This contract is effective from OCTOBER 1, 2015 through SEPTEMBER 3, 2016.

The Board of Education of Prince George's County is exercising its option to RENEW the current contract for one (1) year on the above-mentioned IFB. This signed agreement is your consummation of the contract renewal. The terms and conditions set forth in the contract award remain the same. The contract will be on an "as needed" basis.

The intent of the contract and renewal is to provide the Board with an expedited means of procuring supplies and /or services at the lowest cost. This contract is for the convenience of the Board and is considered by Purchasing Department to be a "Non-Exclusive" use contract. The Board does not guarantee any usage. The Board will not be held to purchase any particular brand, in any groups, prices or discount ranges, but reserves the right to purchase any item/items listed in the price schedule submitted.

OLD ESTIMATED TOTAL VALUE OF THIS CONTRACT \$111,551.75
NEW ESTIMATED TOTAL VALUE OF THIS CONTRACT \$111,551.75

A NEW Certificate of Insurance, made in favor of the BOARD OF EDUCATION OF PRINCE GEORGE'S COUNTY, UPPER MARLBORO, MARYLAND 20772-9983, must be submitted to the PURCHASING OFFICE within fifteen (15) days.

FOR THE BOARD OF EDUCATION OF PRINCE GEORGE'S COUNTY, UPPER MARLBORO, MARYLAND 20772-9983

Brenda Allen signature line and label SIGNATURE

DIRECTOR OF PURCHASING AND SUPPLY TITLE

BRENDA ALLEN NAME

SEPTEMBER 17, 2015 DATE

(FOOD SERVICE)NH



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
5/20/2015

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 Georgetown Insurance Service, Inc. 10010 Colesville Road Suite A Silver Spring MD 20901		CONTACT NAME: Kathy Albaugh, CISR PHONE (A/C, No, Ext): (301) 681-9645 FAX (A/C, No): (301) 593-2590 E-MAIL ADDRESS: kathy@georgetownins.com PRODUCER CUSTOMER ID#: 00008716	
INSURED Eastern Food Services, Inc. Eastern Food Management Inc. 8660 Cherry Lane #39 - 45 Laurel MD 20707-4951		INSURER(S) AFFORDING COVERAGE INSURER A: Harleysville Insurance INSURER B: Allied Insurance 42579 INSURER C: Accident Fund INSURER D: Cincinnati Insurance 10677 INSURER E: INSURER F:	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			MPA0000022085V	3/1/2015	3/1/2016	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/PROP AGG \$ 2,000,000
	GENL AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			BAA7163220882	3/1/2015	3/1/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ PIP-Basic \$ Uninsured motorist combined \$
	CONFIRMATION COPY						
D	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 0			EUP0235218	3/1/2015	3/1/2016	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A	WCV2282844	5/27/2015	5/27/2016	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E L EACH ACCIDENT \$ 100,000 E L DISEASE - EA EMPLOYEE \$ 100,000 E L DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
RE: BID# IFB 018-13, DELIVERY OF COMMODITY FOODS

CERTIFICATE HOLDER**CANCELLATION**

BOARD OF EDUCATION OF PRINCE GEORGE'S COUNTY 13300 OLD MARLBORO PIKE UPPER MARLBORO, MD 20772-9983	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 Pat Keightley/KATHY