

COPY



In Re: RFP 042815
Scanning Services
Gila County Recorder's Office

Presented By:
Benjamin Ross
Vice President of Complex Litigation
Litigation Services LLC
3770 Howard Hughes Pkwy, Ste 300
Las Vegas, NV 89169



I. Company Overview

Litigation Services LLC was founded in 1999 with an inspired vision by our current owners, Ken and Monice Campbell: to become the premier court reporting agency throughout the United States by focusing on the development of zealous human capital and integrating technological innovation into our product mix. In growing within the industry, Ken and Monice noticed a substantial need for a quality firm to handle the scanning, copying and reproduction of their client's legal documents. Upon this realization, they set in motion the plans that would result in a premier reprographics department that now facilitates both private and public document reproduction throughout the continental United States. What began as a court reporting agency soon evolved into the full-service agency capable of both transcription and document production that it has become today.

Our approach is simple but effective: our over fifteen (15) years of experience, in tangent with personnel that can't imagine working anywhere else, makes us an industry leader. Needless to say, our clientele have come to rely upon our ability to turn around key legal and public documents quickly, efficiently, and accurately. This is especially key to our legal clients who require these documents in the building of their cases, sometimes within hours of their trials, arbitrations, or depositions. Additionally, our ability to scan and enhance microfiche, which can be difficult for smaller firms to perform due to equipment constraints, provides our clients with the one-stop-shop they need for the production of essential documents.

Finally, all public contracts are given a specific case manager, allowing all work performed for the Gila County Recorder's Office to be supervised by a single individual. It is our experience that case managers allow for immediate and direct contact between us and our public clientele, and allows the expeditious answering of questions and concerns. Furthermore, having a single point of contact allows Litigation Services more efficient contact with the Recorder's Office regarding job status updates. This will be especially relevant as we move through the various phases required by the SOW.

We at Litigation Services LLC understand the dexterity and quality necessitated in performing work with a public agency such as the Gila County Recorder's Office and look forward to assisting with a smooth and quick transition of microfiche records to the digitized format desired.

II. Experience and Capability

A. Locations

All work performed under this contract would be occur at the following locations:

- 1) No Rush Charge Reprographics, Inc.
510 W. 6th St., Ste 430
Los Angeles, CA 90014

B. Personnel

Litigation Services LLC is known throughout the legal and public markets for having the most qualified and experienced personnel in the industry. Our reprographics department has been producing the highest quality work for over fifteen (15) years for clients who have the highest standards when it comes to their finished product.

Additionally, the personnel of No Rush Charge Reprographics, Inc. (the subcontractor for this job) are also thoroughly experienced in scanning and producing various types of documents, including microfilm and microfiche.

C. Plan of Performance

Litigation Services LLC has created the following plan of performance for work performed under RFP 042815 for the Gila County Recorder's Office:

- 1) All 34 boxes will be shipped from Saginaw, MI to the No Rush Charge Office in Los Angeles (mentioned above), where Phase 1 will begin. They will be shipped using UPS Hundredweight Service with Next Day Air service. The specific care and transportation of the sheets will be handled by either Benjamin Ross, or his designated **representative**, to ensure the safety of the sheets.
- 2) The microfiche sheets will be processed through our Canon NP Printer 880 machine (specs available upon request), where the images come out as good as the condition of the originals.
- 3) These images get printed to paper and are then scanned into JPEG and TIFF formats. The images are then saved to two separate USB **hard** drives, one of which will be shipped to the Recorder's office and the other will remain at our office as a back-up.
- 4) Once all microfiche images are scanned, we will then complete the full scope of work detailed in both Phase 2 and Phase 3. This shall include cropping, inspection, image reporting, enhancing, rescanning, etc. as detailed in the RFP.
- 5) Upon completion, Litigation Services will then ship the microfiche back to the Saginaw, MI location, again via UPS Hundredweight Services, with the oversight of either Benjamin Ross, or his designated representative.

D. Experience

Our involvement in the construction defect area of the legal industry requires that we scan, copy and enhance thousands upon thousands of legal documents that must meet certain legal specifications. We have handled cases throughout California, Nevada, and Arizona, and are proficient at handling large quantities of documents with delicate hands. We know that our clients need quick turnaround of their documents in addition to special care placed on how those documents are handled.

To date, Litigation Services LLC has performed over \$16,000,000.00 (\$16 Million) worth of reprographics work, which includes document scanning and production, demonstrative creation, data hosting, etc.

III. Subcontractors

Due to the scope and size of the work necessitated by the Gila County Recorder's Office, Litigation Services LLC will employ one of its subcontractors. Litigation Services LLC has worked with the following company for over three (3) years and believe in their competency and experience in document reproduction.

- 1) No Rush Charge Reprographics, Inc.
510 W. 6th St, Ste 430
Los Angeles, CA 90014
(213)258-2790

Additionally, a Certificate of Insurance from the above mentioned subcontractor can be provided, upon request from the Recorder's Office.

BIDDER CHECKLIST & ADDENDA ACKNOWLEDGMENT

NOTICE IS HEREBY GIVEN that all Bid Documents shall be completed and/or executed and submitted with this Request for Proposals (RFP). If Contractor fails to complete and/or execute any portion of the Bid documents, all with original signatures, the RFP may be determined to be "non-responsive" and rejected.

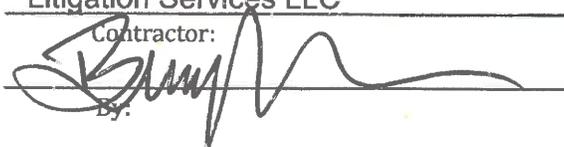
CHECKLIST:

<u>REQUIRED DOCUMENT</u>	<u>COMPLETED / EXECUTED</u>
QUALIFICATION & CERTIFICATION FORM	✓
PRICE SHEET	✓
REFERENCE LIST	✓
NO COLLUSION IN BIDDING	✓
INTENTIONS IN SUBCONTRACTING	✓
LEGAL ARIZONA WORKERS ACT COMPLIANCE	✓
BIDDER'S CHECKLIST & ADDENDA ACKNOWLEDGMENT	✓
OFFER AND ACCEPTANCE PAGE	✓
BACKGROUND AUTHORIZATION	✓
W-9	✓

ACKNOWLEDGMENT OF RECEIPT OF ADDENDA:

INITIALS	<u> <i>ML</i> </u>	<u> <i>ML</i> </u>	<u> <i>ML</i> </u>	#4	#5
DATE	<u> 6-23-2015 </u>	<u> 6-23-2015 </u>	<u> 6-23-2015 </u>		

Signed and dated this 23 day of June , 2015.

Litigation Services LLC
 Contractor:

 By: _____

Each proposal shall be sealed in an envelope addressed to the Gila County Finance Department and bearing the following statement on the outside of the envelope: *Company Name, Request for Sealed Proposals No. 042815 Document Scan Conversion for the Gila County Recorder's Office.* All proposals shall be filed with Gila County Finance at 1400 E. Ash St., Guerrero Building, Globe, AZ on or before June 17, 2015, 11:00 AM.

QUALIFICATION AND CERTIFICATION FORM

This exhibit shall serve as a requirement to enable the evaluation team to assess the qualifications of Contractors under consideration for final award.

The information may or may not be a determining factor in award.

Contract Number 042815 Document Scan Conversion for the Gila County Recorder's Office

The applicant submitting this Proposal warrants the following:

1. Name, Physical Address, E-Mail Address and Telephone Number of Principal Contractor:
Litigation Services LLC
3770 Howard Hughes Pkwy, Ste 300, Las Vegas, NV 89169
Phone: 800.330.1112 Ext 11222 Email: ben@litigationservices.com

2. Has Contractor (under its present or any previous name) ever failed to complete a contract?
 Yes No. If "Yes, give details, including the date, the contracting agency, and the reasons Contractor failed to perform in the narrative part of this Contract.

3. Has Contractor (under its present or any previous name) ever been disbarred or prohibited from competing for a contract? Yes No. If "Yes", give details, including the date, the contracting agency, the reasons for the Contractors disqualification, and whether this disqualification remains in effect in the narrative part of this Contract.

4. Has a contracting agency ever terminated a contract with the Contractor prior to contract expiration date (under your Contractor's present or any previous name)? Yes No. If "Yes", give details including the date, the contracting agency, and the reasons Contractor was terminated in the narrative part of this Contract.

5. **CONTRACTOR MUST ALSO PROVIDE AT LEAST THE FOLLOWING INFORMATION ALONG WITH THEIR PROPOSAL SUBMITTAL:**
 - a. A brief history of the Company.
 - b. A Cost Proposal shall be submitted on the Price Sheet, attached herein and made a full part of this contract by this reference.
 - c. A list of previous and current customers, which are considered identical or similar to the Scope of Services described herein, shall be submitted on the Reference List, attached herein and made a full part of this contract by this reference.
 - d. List the specific qualifications the Contractor has in supplying the specified services.
 - e. A list of any subcontractors (if applicable) to be used in performing the service must accompany the Proposal.

6. Contractor Experience Modifier (e-mod) Rating in Arizona:

(If Applicable)

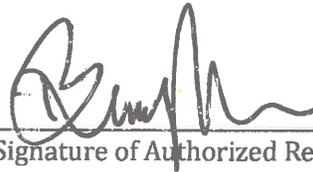
A method the National Council on Compensation Insurance (NCCI) uses to measure a business' computed loss ratio and determine a factor, which when multiplied by premium, can reward policyholders with lower losses. E-mod rate may be a determining factor in bid award.

7. Current Contractor Business License Number:

L16466152

(If Applicable)

8. Contractor must provide copies of all required Arizona Certifications and Licenses in performing the scope of services provided in this request for proposals.



Signature of Authorized Representative

Benjamin Ross

Printed Name

Vice President of Complex Litigation

Title

PRICE SHEET

Please complete price sheet in its entirety for the services provided in RFP 042815 Document Scan Conversion for the Gila County Recorder's Office.

Contractor Name: Litigation Services LLC

Phone No.: 800.330.1112

Description	Cost
Phase I	\$.76/image
Phase II	\$0.00 (Included in Phase I Price)
Phase III	\$ 0.00 (Included in Phase I Price)
TOTAL COST	\$ 760,000.00

All applicable taxes shall be included in proposed amount.

REFERENCES LIST

References

Please list a minimum of three (3) references for contracts of similar size and scope as this Request for Proposals during the past twenty-four (24) months, in or as close to Gila County as possible. Bidder may attach further reference information as necessary.

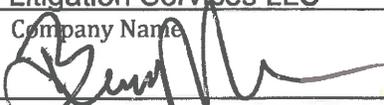
1. Company Name: Lee Hernandez Landrum & Garofalo
Contact: Jennifer Mullin, Managing Partner
Phone: 602.216.8460 Address: 1825 E. Northern Ave., Ste. 205, Phoenix, AZ 85020
Job Length of Time: 6 Months Years
Job Description: Perform document scanning and production, demonstrative creation and various other services for Lee Hernandez throughout the United States

2. Company Name: Russell & Associates
Contact: Brian Russell, AIG Staff Counsel- AZ
Phone: 602.512.2301 Address: 20 E. Thomas Road, Ste 2200 Phoenix, AZ 85012
Job Length of Time: 6 Months 1 Years
Job Description: Perform document scanning and production, demonstrative creation and various other services for AIG staff counsel in Arizona

3. Company Name: Snell & Wilmer
Contact: Patrick Byrne, Partner
Phone: 702.784.5200 Address: 3883 Howard Hughes Pkwy, Ste 1100 Las Vegas, NV 89169
Job Length of Time: 10 Months 13 Years
Job Description: Perform document scanning and production, demonstrative creation and various other services for Snell & Wilmer offices throughout California, Nevada, and Arizona

Litigation Services LLC

Company Name


Signature of Authorized Representative

Vice President of Complex Litigation

Title

**AFFIDAVIT BY CONTRACTOR
CERTIFYING THAT THERE WAS NO COLLUSION
IN BIDDING FOR CONTRACT**

STATE OF: Nevada)
)ss
COUNTY OF: Clark)

Benjamin Ross
(Name of Individual)

being first duly sworn, deposes and says:

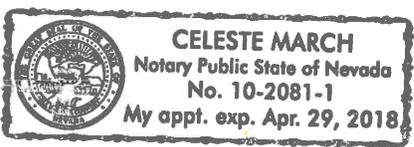
That he/she is Vice President of Complex Litigation
(Title)
of Litigation Services LLC and
(Name of Business)

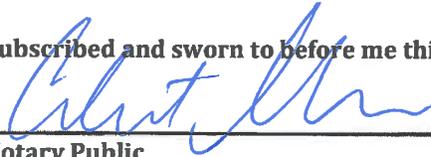
That he/she is bidding on **Gila County BID NO. 042815 DOCUMENT SCAN CONVERSION FOR THE GILA COUNTY RECORDER'S OFFICE, GLOBE, AZ, and,**

That neither he/she nor anyone associated with the said
Litigation Services LLC
(Name of Business)

has, directly or indirectly entered into any agreement, participated in any collusion or otherwise taken any action in restraint of free competitive bidding in connection with the above mentioned project.

Litigation Services LLC
Name of Business
Benjamin Ross 
By
Vice President of Complex Litigation
Title



Subscribed and sworn to before me this 23rd day of June, 2015.

Notary Public
My Commission expires:
4/29/2018

CERTIFICATION: INTENTIONS CONCERNING SUBCONTRACTING

At the time of the submission of bids for Request for Proposals No. 042815, Document Scan Conversion for the Gila County Recorder's Office, my intention concerning subcontracting a portion of the work is as indicated below.

In indicating that it is my intention to subcontract a portion of the work, this will acknowledge that such subcontractor will be identified and approved by the Facilities Manager prior to award of the contract; and that documentation, such as copies of letters, requests for quotations, quotations, etc., substantiating the actions taken and the responses to such actions is on file and available for review.

A list of any subcontractors (if applicable) to be used in performing the service must accompany the Proposal response. The list must include the subcontractors name, address, and phone number.

Any subcontractor not listed with the bid must be approved by the County Facilities Manager prior to providing any work pursuant to this contract. Further, contractor warrants that all subcontractors will comply with all terms and conditions of this contract including but not limited to all insurance and worker's compensation coverage provisions of this contract. The County reserves the right to terminate the contract if the contractor fails to comply with the provisions of this certification.

- It is my intention to subcontract a portion of the work.
- It is not my intention to subcontract a portion of the work.

Litigation Services LLC

Name of Firm



By: (Signature)

Vice President of Complex Litigation

Title

LEGAL ARIZONA WORKERS ACT COMPLIANCE

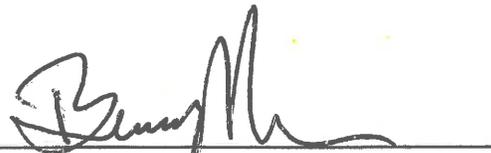
Contractor hereby warrants that it will at all times during the term of this Contract comply with all federal immigration laws applicable to Contractor's employment of its employees, and with the requirements of A.R.S. § 23-214 (A) (together the "State and Federal Immigration Laws"). Contractor shall further ensure that each subcontractor who performs any work for Contractor under this contract likewise complies with the State and Federal Immigration Laws.

County shall have the right at any time to inspect the books and records of Contractor and any subcontractor in order to verify such party's compliance with the State and Federal Immigration Laws.

Any breach of Contractor's or any subcontractor's warranty of compliance with the State and Federal Immigration Laws, or of any other provision of this section, shall be deemed to be a material breach of this Contract subjecting Contractor to penalties up to and including suspension or termination of this Contract. If the breach is by a subcontractor, and the subcontract is suspended or terminated as a result, Contractor shall be required to take such steps as may be necessary to either self-perform the services that would have been provided under the subcontract or retain a replacement subcontractor as soon as possible so as not to delay delivery of services.

Contractor shall advise each subcontractor of County's rights, and the subcontractor's obligations, under this Article by including a provision in each subcontract substantially in the following form: "Subcontractor hereby warrants that it will at all times during the term of this contract comply with all federal immigration laws applicable to Subcontractor's employees, and with the requirements of A.R.S. § 23-214 (A). Subcontractor further agrees that County may inspect the Subcontractor's books and records to insure that Subcontractor is in compliance with these requirements. Any breach of this paragraph by Subcontractor will be deemed to be a material breach of this contract subjecting Subcontractor to penalties up to and including suspension or termination of this contract."

Any additional costs attributable directly or indirectly to remedial action under this Article shall be the responsibility of Contractor.



Signature of Authorized Representative

Benjamin Ross

Printed Name

Vice President of Complex Litigation

Title

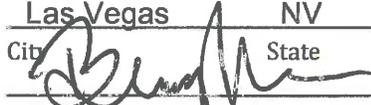
OFFER AND ACCEPTANCE

TO GILA COUNTY:

The undersigned hereby offers and agrees to furnish the material or service in compliance with all terms and conditions, instruction, specifications, and any amendments contained in this Request for Proposal document.

Signature also certifies the Contractors bid proposal is genuine, and is not in any way collusive or a sham; that the bid proposal is not made with the intent to restrict or prohibit competition; that the Contractor submitting the proposal has not revealed the contents of the proposal to, or in any way colluded with, any other Contractor which may compete for the contract; and that no other Contractor which may compete for the contract has revealed the contents of a proposal to, or in any way colluded with, the Contractor submitting this proposal.

Contractor Submitting Proposal:

Litigation Services LLC
Company Name
3770 Howard Hughes Pkwy, Ste 300
Address
Las Vegas NV 89169
City State Zip

Signature of Person Authorized to Sign
Benjamin Ross
Printed Name
Vice President of Complex Litigation
Title

For Clarification of this Offer, Contact:

Name: Benjamin Ross
Title: Vice President of Complex Litigation
Phone No.: 800.330.1112 Ext 11222
Fax: 702.631.7351
Email: ben@litigationsservices.com

ACCEPTANCE OF OFFER
(For Gila County use only)

The Contractor is now bound to provide the materials or services listed in RFP No.: 042815 including all terms and conditions, specifications, amendments, etc. and the Contractor's Offer as accepted by County/public entity. The contract shall henceforth be referenced to as Contract No. 042815.

GILA COUNTY BOARD OF SUPERVISORS

ATTEST

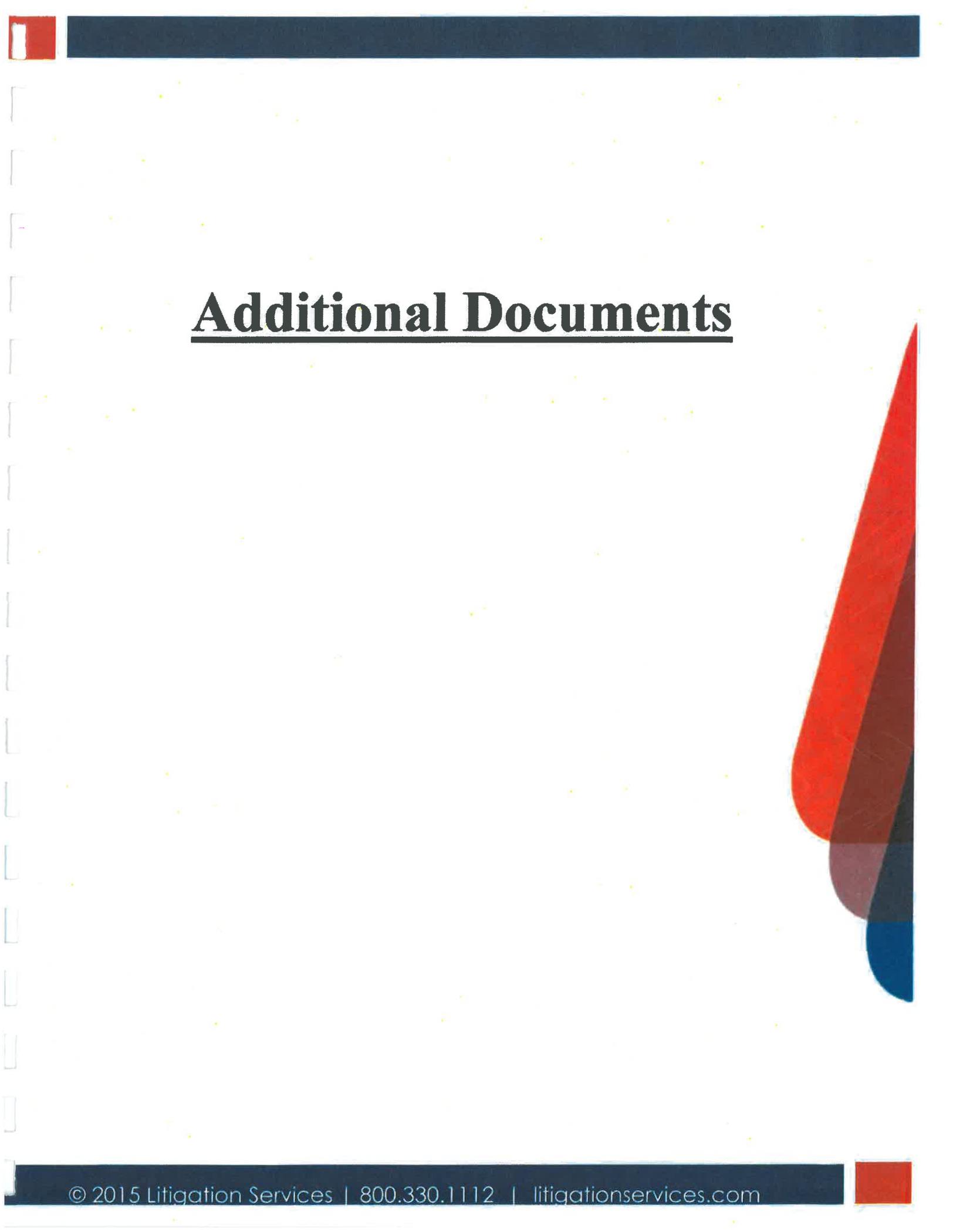
Awarded this _____ day of _____, 2015

Marian Sheppard, Clerk of the Board

Michael A. Pastor, Chairman, Board of Supervisors

APPROVED AS TO FORM

Bryan B. Chambers, Deputy County Attorney/Civil
Bureau Chief
for Bradley D. Beauchamp, County Attorney



Additional Documents

Search Date and Time:
6/12/2015 12:25:34 PM

File Number:
L16466152

Corporation Name:
LITIGATION SERVICES & TECHNOLOGIES OF ARIZONA, LLC

[Collapse](#) | [Expand](#)

Corporate Inquiry

File Number L16466152

Corporation Name LITIGATION SERVICES & TECHNOLOGIES OF ARIZONA, LLC

Standing

Domestic Address

% PARACORP INCORPORATED
638 N 5TH AVE
PHOENIX, AZ 85003

Statutory Agent Information

Agent Name: PARACORP INCORPORATED

Agent Mailing/Physical Address:
300 W CLARENDON AVE #230
PHOENIX, AZ 85013

Agent Status: APPOINTED 12/15/2010

Agent Last Updated: 01/31/2011

Additional Entity Information

Entity Type: DOMESTIC L.L.C.

Business Type:

Incorporation Date: 12/15/2010

Corporation Life Period: PERPETUAL

Domicile: ARIZONA

County: MARICOPA

Approval Date: 12/20/2010

Original Publish Date: 1/19/2011

Manager/Member Information

Name	LITIGATION SERVICES LLC
Title	MEMBER
Address	A NV LLC 3770 HOWARD HUGHES PKWY STE 300 LAS VEGAS, NV 89169
Date of Taking Office	01/27/2011
Last Updated	01/31/2011
Name	LITIGATION SERVICES LLC
Title	MEMBER
Address	3770 HOWARD HUGHES PKWY #300 LAS VEGAS, NV 89169
Date of Taking Office	12/15/2010
Last Updated	12/20/2010

Scanned Documents

Click on a gold button below to view a document. If the button is gray, the document is not yet available. Please check back again later.

Document Number

03610405

Description

GLOBAL AGENT ADDRESS CHANGE

Date Received

6/1/2011

Document Number

03457401

Description

PUB OF AMENDED ARTICLES OF ORGANIZATION

Date Received

4/11/2011

Document Number

03372639

Description

AMENDMENT

Date Received

1/27/2011

Document Number

03361872

Description

PUB OF ARTICLES OF ORGANIZATION

Date Received

1/19/2011

Document Number

03334512

Description

ARTICLES OF ORGANIZATION

Date Received

12/15/2010

Microfilm

Location	Entered	Description
32247037017	12/15/2010	ARTICLES OF ORGANIZATION
32249003048	1/19/2011	PUB OF ARTICLES OF ORGANIZATION
32249084049	1/27/2011	AMENDMENT
32261099037	4/11/2011	PUB OF AMENDED ARTICLES OF ORGANIZATION

32281050001 6/1/2011 GLOBAL AGENT ADDRESS CHANGE

Amendments

Amendment Date	1/27/2011
Amendment Type	NAME CHANGE
Publish Date	4/11/2011
Publish Exception	

Name Changes/Restructuring

Description	CHANGED FROM
Corporation Name	LITIGATION SERVICES OF ARIZONA, LLC (/Details/corp?corpid=L16466152)
Date	1/27/2011

Privacy Policy (<http://www.azcc.gov/Divisions/Administration/Privacy.asp>) | Contact Us
(<http://www.azcc.gov/divisions/corporations/contact-us.asp>)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
5/18/2015

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 Commercial Lines - (713) 507-4700 Wells Fargo Insurance Services USA, Inc. 24 Greenway Plaza, Suite 1100 Houston, TX 77046-2401	CONTACT NAME: Yvonne McClintock PHONE (A/C, No, Ext): 713-507-4795 E-MAIL ADDRESS: yvonne.mcclintock@wellsfargo.com	FAX (A/C, No): 866-588-7980
	INSURER(S) AFFORDING COVERAGE	
INSURED The LIT Group, LLC 3770 Howard Hughes Pkwy #300 Las Vegas NV 89169	INSURER A: Travelers Indemnity Co of America	NAIC # 25666
	INSURER B: Travelers Property Casualty Insurance Company	NAIC # 36161
	INSURER C: Travelers Casualty Ins Co of America	NAIC # 19046
	INSURER D: Travelers Property Casualty Co of America	NAIC # 25674
	INSURER E: National Union Fire Ins. Co. of Pittsburgh, PA	NAIC # 19445
	INSURER F: U.S. Specialty Insurance Company	NAIC # 29599

COVERAGES **CERTIFICATE NUMBER:** 9113269 **REVISION NUMBER:** See below

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY			680-9B890337 Nevada	06/30/2014	06/30/2015	EACH OCCURRENCE \$ 1,000,000
B	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			680-9B887032 - California	06/30/2014	06/30/2015	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:							
C	AUTOMOBILE LIABILITY			BA-5C544967	06/30/2014	06/30/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS		<input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS				
D	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB		<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE	CUP-5C544851	06/30/2014	06/30/2015	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000
	DED		RETENTION \$				
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			UB-5C50848-3-14	06/30/2014	06/30/2015	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				
E	Professional Liability (E&O)			013313925	06/30/2014	06/30/2015	\$5,000,000 Occurrence:

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER State of Nevada, Purchasing Division 515 E. Musser Street, Suite 300 Carson City, NV 89701 Attn: Nancy Feser	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 
--	---

Certificate of Insurance (Con't)

OTHER Coverage

INSR LTR	TYPE OF INSURANCE	ADDL INSR	WVD SUBR	POLICY NUMBER	EFFECTIVE DATE (MM/DD/YY)	EXPIRATION DATE (MM/DD/YY)	LIMIT
F	D&O, Fiduciary & EPLI			14MGU14A32316	06/29/2014	06/30/2015	\$1,000,000 \$80,000 retention

Request for Taxpayer Identification Number and Certification

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

Print or type
See Specific Instructions on page 2.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Litigation Services and Technologies of Nevada, LLC	
2 Business name/disregarded entity name, if different from above 	
3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ P <small>Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.</small> <input type="checkbox"/> 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) _____ <small>(Applies to unremittable withholding countries (U.S.))</small>	
5 Address (number, street, and apt. or suite no.) P.O. Box 843298	Requester's name and address (optional) REMITTANCE ADDRESS: P.O. Box 843298 Los Angeles, CA. 90084-3298
6 City, state, and ZIP code Los Angeles, CA. 90084-3298	
7 List account number(s) here (optional)	

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 Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number											
or											
Employer identification number											
2	7		5	1	1	4	7	5	5		

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

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 on page 3.

Sign Here Signature of U.S. person ▶

Date ▶ 1-8-15

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

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? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.