

AMENDMENT TO CONTRACT
Hall of Justice Courtroom Audio Replacement
Bid No. 17-130
Lancaster County
Extension and Additional Services
Midwest Sound & Lighting

This Amendment is hereby entered into by and between Midwest Sound & Lighting, Inc., 2322 O St., Lincoln, NE 68510 (hereinafter "Contractor") and Lancaster County (hereinafter "County"), for the purpose of amending the Contract dated May 30, 2017, executed under County Contract No. C-17-0378, for Hall of Justice Courtroom Audio Replacement, Bid No. 17-130, which is made a part hereof by this reference.

WHEREAS, the original term of the Contract is May 30, 2017 through December 1, 2017; and

WHEREAS, the Contract was amended by County Contract C-17-0898 on November 21, 2017 to extend the contract from December 2, 2017 through January 31, 2018; and

WHEREAS, the parties hereby extend the Contract beginning February 1, 2018 with final completion being March 1, 2018; and

WHEREAS, the parties hereby amend the Contract to reflect additional services, per items A and B listed on Attachment A; and

WHEREAS, the expenditures for Lancaster County for the term of this extension shall not exceed \$2,344.00 without prior approval by the Lancaster County Board of Commissioners; and

NOW, THEREFORE, IN CONSIDERATION of the mutual covenants contained in the Contract, under County Contract C-17-0378, and stated herein the parties agree as follows:

- 1) The parties hereby extend the Contract beginning February 1, 2018 with final completion being March 1, 2018.
- 2) The parties hereby amend the Contract to reflect additional services, per items A and B listed on Attachment A.
- 3) The expenditures for Lancaster County for the term of this extension shall not exceed \$2,344.00 without prior approval by the Lancaster County Board of Commissioners.
- 4) All other terms of the Contract, not in conflict with this Amendment, shall remain in full force and effect.

The Parties do hereby agree to all the terms and conditions of this Amendment. This Amendment shall be binding upon the parties, their heirs, administrators, executors, legal and personal representatives, successors, and assigns.

IN WITNESS WHEREOF, the Parties do hereby execute this Amendment upon completion of signatures on:

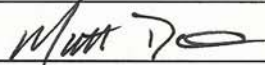
Vendor Signature Page
Lancaster County Signature Page

Vendor Signature Page

**AMENDMENT TO CONTRACT
Hall of Justice Courtroom Audio Replacement
Bid No. 17-130
Lancaster County
Extension and Additional Services
Midwest Sound & Lighting**

Please sign, date and return within 5 days of receipt.

Mail to: City/County Purchasing
Attn: Chris Lollar
440 So. 8th St., Suite 200
Lincoln, NE 68508
Or email to: clollar@lincoln.ne.gov

Company Name:	MIDWEST SOUND AND LIGHTING, INC.
By: (Please Sign)	
By: (Please Print)	MATT DAVIS
Title:	SYSTEMS DESIGNER
Company Address:	2322 O STREET, LINCOLN, NE 68510
Company Phone & Fax:	402.474.4918 402.474.5874
E-Mail Address:	mattd@mwsound.com
Date:	2-8-18
Contact Person for: Orders or Service	MATT DAVIS
Contact Phone Number:	402-474-4918

Lancaster County Signature Page

**AMENDMENT TO CONTRACT
Hall of Justice Courtroom Audio Replacement
Bid No. 17-130
Lancaster County
Extension and Additional Services
Midwest Sound & Lighting**

EXECUTION BY LANCASTER COUNTY, NEBRASKA

Contract Approved as to Form:

The Board of County Commissioners of
Lancaster, Nebraska

Deputy Lancaster County Attorney

dated _____



4318 S. 80th Street
Omaha, NE 68117
Phone: (402) 731-6268
Fax: (402) 731-9766
Toll Free: (800) 981-9521
www.mwsound.com

2322 O. Street
Lincoln, NE 68510
Phone: (402) 474-4918
Fax: (402) 474-5874
Toll Free: (800) 617-4298
info@mwsound.com

Client City of Lincoln/Lancaster County - Hall of Justice	Contact Name Jared Gavin	Date January 29, 2018
Address 575 S. 10th Street	Phone 402-441-7291	Fax
City, State, Zip Lincoln, NE 68508	Email jgavin@lancaster.ne.gov	
Submitted By Matt Davis	Customer No. LANCOU	Proposal No. 1451

A. Cabinet Fans for Courtroom 38

Qty.	Description
1	Middle Atlantic CAB-COOL-2 dual fan cabinet cooling system with thermostatic controller
1	Qty. Misc. Fasteners, Hardware, and Materials
1	Qty. labor, including NICET and/or CTS certified personnel to install, optimize performance, and provide initial user training

Notes: Cabinet fans will be installed in front cabinet door where audio equipment is installed. One fan will be installed in lower part of door for intake and one fan will be installed in upper part of door for exhaust. Thermostatic controller will be mounted in upper part of cabinet. System will be tested for proper functionality.

TOTAL... \$ 360

B. RF Hearing Assistance System

Qty.	Description
1	Listen LS-55-072 iDSP Prime Level III Stationary RF System (72 MHz)
	System Includes:
	• One (1) LT-800-072-01 Stationary RF Transmitter (72 MHz)
	• One (1) LA-122 Universal Antenna Kit (72 MHz and 216 MHz)
	• One (1) LA-326 Universal Rack Mounting Kit
	• Four (4) LR-4200-072 Intelligent DSP RF Receiver (72 MHz)
	• Four (4) LA-401 Universal Ear Speaker
	• Two (2) LA-430 Intelligent Earphone/Neck Loop Lanyard
	• One (1) LPT-A107-B Dual RCA to Dual RCA Cable 6.6 ft. (2 m)
	• One (1) LA-381-01 Intelligent 12-Unit Charging Tray
	• One (1) LA-304 Assistive Listening Notification Signage Kit

Notes: This option includes delivery of hearing assistance system to customer, but no installation is included. System is intended to be portable for use in any courtroom via existing system outputs.

TOTAL... \$ 1,984



4318 S. 50th Street
 Omaha, NE 68117
 Phone: (402) 731-6268
 Fax: (402) 731-9766
 Toll Free: (800) 981-9521
 www.mwsound.com

2322 O. Street
 Lincoln, NE 68510
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 Fax: (402) 474-5874
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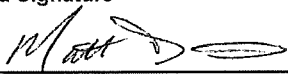




C. Additional Lapel Wireless Microphone System

Qty.	Description
1	Shure ULXS14/85 Bodypack/Lapel Wireless Microphone System
1	Rapco 25' XLR Microphone Cable

Notes: This option includes delivery of wireless system to customer, but no installation is included. System is intended to be portable for use in any courtroom via existing microphone receptacle.

TOTAL... \$ 761

- Sales tax has not been included

<p>Amount (All Options): \$3,105.00 Three Thousand One Hundred Five Dollars and 00/100 Cents.</p>	<p>Terms: Progressive Per Contract</p>
<p>All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any deviation from above specifications will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workman's Compensation Insurance.</p> <p>Note: This proposal may be withdrawn by us if not accepted within 30 days.</p> <p>Acceptance of Proposal: The above prices, specifications and conditions are satisfactory and hereby accepted. You are authorized to do the work as specified. Payment will be as specified above.</p>	<p>Midwest Sound & Lighting, Inc. Authorized Signature </p>
	<p>City of Lincoln/Lancaster County - Hall of Justice Authorized Signature</p>
	<p>Date of Acceptance:</p>
<p><i>When considering audio, video or lighting solutions, look for these logos to be assured that you are discussing your problems with a qualified professional certified to know what they are talking about. Midwest Sound & Lighting employs certified personnel to ensure your satisfaction.</i></p>	
<div style="display: flex; justify-content: space-around; align-items: center;">     </div>	



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
2/06/2018

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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER INSPRO Insurance P.O. Box 6847 Lincoln, NE 68506 402 483-4500	CONTACT NAME: Kate Greenwald
	PHONE (A/C, No, Ext): 402-483-4500 FAX (A/C, No): 402-483-7977 E-MAIL ADDRESS: kgreenwald@insproins.com
INSURED Midwest Sound & Lighting, Inc. 2322 "O" Street Lincoln, NE 68510	INSURER(S) AFFORDING COVERAGE NAIC #
	INSURER A : Employers Mutual Insurance 21415
	INSURER B :
	INSURER C :
	INSURER D :
	INSURER E :

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	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> OCP GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X		3D67494	01/01/2018	01/01/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 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 \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			3E67494	01/01/2018	01/01/2019	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 <input checked="" type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10000			3J67494	01/01/2018	01/01/2019	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000 \$
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE/OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y / <input checked="" type="checkbox"/> N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		X	3H67494	01/01/2018	01/01/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

City of Lincoln/Lancaster County and Public Building Commission is listed as an additional insured including Completed Operations. Coverage is on a Per Project basis. City of Lincoln/Lancaster County and Public Building Commission is listed as an additional insured on Automobile Liability. Waiver of Subrogation in favor of City of Lincoln/Lancaster County and Public Building Commission is also provided.

CERTIFICATE HOLDER

CANCELLATION

Lancaster County 555 South 10th Street Lincoln, NE 68508	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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EMPLOYERS MUTUAL CASUALTY COMPANY

POLICY NUMBER: 3D6-74-94---19

MIDWEST SOUND & LIGHTING, INC.

EFF DATE: 01/01/18

EXP DATE: 01/01/19

GENERAL LIABILITY POLICY
DECLARATIONS

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ENDORSEMENT SCHEDULE

FORM	EDITION DATE	DESCRIPTION/ADDITIONAL INFORMATION	PREMIUM
*CG0001	04-13	COMMERCIAL GEN LIABILITY COV FORM	
*CG2106	05-14	EXCL-ACCESS/DISCL OF CONFID/PERSONAL	
*CG2147	12-07	EXCL-EMPLOYMENT RELATED PRACTICES	
*CG2167	12-04	FUNGI OR BACTERIA EXCLUSION	
*CG2170	01-15	CAP/LOSSES FROM CERT ACTS/TERRORISM	
*CG2176	01-15	EXCL PUNITIVE DMGS ACTS OF TERRORISM	
*CG7001A	10-12	GENERAL LIABILITY SCHEDULE	
*CG7003	10-13	GL QUICK REFERENCE (OCCURRENCE)	
*CG7141	05-90	EXTENDED PROPERTY DAMAGE COVERAGE	
*CG7191	08-14	GENERAL LIAB ESSENTIAL EXTENSION	
*CG7193.1	10-13	AI-OWN/LESS/CONTR - INCL COMP OPS NAME: ANY OR ALL PERSONS OR ORGANIZATIONS SUBJECT TO A WRITTEN CONTRACT REQUIRING SUCH AN ADDITIONAL INSURED AGREEMENT.	
*CG7253	12-96	CONTRACTORS EXTENDED PROPERTY DAMAGE	
*CG7429	11-98	AMEND - AGGREGATE LIMIT PER PROJECT	
*CG7482	10-13	AUTOMATIC AI-CONST CONTRACT-VICAR	
*CG7555	10-13	BLKT WAIV SUBRO WRITTEN CONT/AGREE	
*CG8081	04-06	FUNGI/BACTERIA NOTICE TO POLICYHOLDER	
*IL0021	05-02	NUCLEAR ENERGY LIAB EXCL/BROAD FORM	
*IL0259	09-07	NE CHANGES - CANCELLATION/NONRENEWAL	
*IL7028	05-15	ASBESTOS EXCLUSION	
*IL7131A	04-01	COMM'L POLICY ENDORSEMENT SCHEDULE	
*IL8021	04-88	ASBESTOS NOTICE	
*IL8383.2A	01-15	DISCL PURSUANT TERRSM RISK INS. ACT	\$ 32
*IL8384A	01-08	TERRORISM NOTICE	
*IL8576	09-09	MEDICARE IMPT NOTICE TO POLICYHOLDER	
*IL8745	03-17	IMPORTANT NOTICE TO POLICYHOLDERS	

DATE OF ISSUE: 12/27/17

FORM: IL7131A (ED. 04-01)

017 CG

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS
INCLUDING COMPLETED OPERATIONS –
PRIMARY AND NONCONTRIBUTORY**

This endorsement modifies the insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s): City of Lincoln/Lancaster County and PBC
Project: Hall of Justice Courtroom Audio Replacement, Bid No. 17-130
Location Of Project: 575 S. 10th St., Lincoln, NE
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. **Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability arising out of “your work” performed for that additional insured by or for you at the location designated and described in the Schedule of this endorsement.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or

2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

C. The following is added to the **Other Insurance** Condition and supersedes any provision to the contrary:

Primary and Noncontributory Insurance

This insurance is primary to and will not seek contribution from any other insurance available to an additional insured under your policy provided that:

- (1) The additional insured is a Named Insured under such other insurance; and
- (2) You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the additional insured.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

AMENDMENT — AGGREGATE LIMITS OF INSURANCE (PER PROJECT)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

The General Aggregate Limit under LIMITS OF INSURANCE (Section III) applies separately to each of your projects away from premises owned by or rented to you.

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EMPLOYERS MUTUAL CASUALTY COMPANY

POLICY NUMBER: 3E6-74-94---19

MIDWEST SOUND & LIGHTING, INC.

EFF DATE: 01/01/18

EXP DATE: 01/01/19

COMMERCIAL AUTO POLICY
DECLARATIONS

ENDORSEMENT SCHEDULE

FORM	EDITION DATE	DESCRIPTION/ADDITIONAL INFORMATION	PREMIUM
*0405B	08-15	PRIVACY NOTICE	
*3003C	05-10	GLASS REPAIR FORM	
*CA0001	10-13	BUSINESS AUTO COVERAGE FORM TERRORISM COVG INCL IN MAIN COV FORM	\$ 16
*CA0156	11-13	NEBRASKA CHANGES	
*CA0221	10-13	NEBRASKA CHANGES - CANCELLATION	
*CA2001	10-13	LESSOR-ADDITIONAL INSURED/LOSS PAYEE DESIGNATION OR DESCRIPTION OF "LEASED AUTOS"	
*CA2170	10-13	NE UNINSURED/UNDERINS MOTORISTS COV	
*CA7001A	11-15	COMM AUTO DECLARATIONS/ADDIT'L ITEMS	
*CA7002A	11-15	COMM AUTO DECLARATIONS - ITEMS 4 & 5	
*CA7007	11-15	QUICK REFERENCE BUSINESS AUTO FORM	
*CA7093A	03-09	UM/UIM SUPPLEMENTAL SCHEDULE	
*CA7270	11-15	COMMERCIAL AUTO AMENDMENT	
*CA7312	11-15	RENTAL VEHICLE EXTENSIONS	
*CA7313	11-15	PREJUDGMENT INTEREST	
*CA8112.2	11-15	IMPT NOTICE -PAYMENT FOR AFTERMARKET	
*CA9933	10-13	EMPLOYEES AS INSUREDS	
*CA9935	11-13	NEBRASKA AUTO MEDICAL PAYMENTS	
*CA9944	10-13	LOSS PAYABLE CLAUSE	
*CA9948	10-13	POLLUTION LIAB BROADND COV/COV AUTOS	
*IL0021	05-02	NUCLEAR ENERGY LIAB EXCL/BROAD FORM	
*IL7131A	04-01	COMM'L POLICY ENDORSEMENT SCHEDULE	
*IL8576	09-09	MEDICARE IMPT NOTICE TO POLICYHOLDER	
*MCS-90	-	PUBLIC LIABILITY ENDST FOR MOTOR CAR	

DATE OF ISSUE: 12/27/17

FORM: IL7131A (ED. 04-01)

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

COMMERCIAL AUTO ESSENTIAL EXTENSION

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

The BUSINESS AUTO COVERAGE FORM is amended to include the following clarifications and extensions of coverage. With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

A. BLANKET ADDITIONAL INSURED

Section II – Covered Autos Liability Coverage, A.1. Who Is An Insured is amended by adding the following:

Any person or organization who is a party to a written agreement or contract with you in which you agree to provide the type of insurance afforded under this Business Auto coverage Form.

This provision applies to claims for "bodily injury" or "property damage" which occur after the execution of any written agreement or contract.

B. NEWLY FORMED OR ACQUIRED ORGANIZATIONS

Section II – Covered Autos Liability Coverage, A.1. Who Is An Insured is amended by adding the following:

e. Any organization which you acquire or form after the effective date of this policy in which you maintain ownership or majority interest. However:

1. Coverage under this provision is afforded only up to 180 days after you acquire or form the organization, or to the end of the policy period, whichever is earlier.
2. Any organization you acquire or form will not be considered an "insured" if:
 - a. The organization is a partnership or a joint venture; or
 - b. That organization is covered under other similar insurance.
3. Coverage under this provision does not apply to any claim for "bodily injury" or "property damage" resulting from an "accident" that occurred before you formed or acquired the organization.

C. SUBSIDIARIES AS INSUREDS

Section II – Covered Autos Liability Coverage, A.1. Who Is An Insured is amended by adding the following:

Any legally incorporated subsidiary in which you own more than 50% of the voting stock on the effective date of this policy. However, "insured" does not include any subsidiary that is an "insured" under any other automobile liability policy or was an "insured" under such a policy but for termination of that policy or the exhaustion of the policy's limits of liability.

D. SUPPLEMENTARY PAYMENTS

Section II – Covered Autos Liability Coverage, A.2.a. Coverage Extensions, Supplementary Payments (2) and (4) are replaced by the following:

- (2) Up to \$3,000 for cost of bail bonds (including bonds for related traffic law violations) required because of an "accident" we cover. We do not have to furnish these bonds.
- (4) All reasonable expenses incurred by the "insured" at our request, including actual loss of earnings up to \$350 a day because of time off from work.

E. TOWING

Section III – Physical Damage Coverage, A.2. Towing is replaced with the following:

We will pay for towing and labor costs incurred, subject to the following:

- a. Up to \$100 each time a covered "auto" of the private passenger type is disabled; or
- b. Up to \$500 each time a covered "auto" other than the private passenger type is disabled.

However, the labor must be performed at the place of disablement.

F. LOCKSMITH SERVICES

Section III – Physical Damage Coverage, A.4. Coverage Extensions is amended by adding the following:

We will pay up to \$50 per occurrence for necessary locksmith services for keys locked inside a covered private passenger "auto" for which Comprehensive coverage is provided. The deductible is waived for these services.

G. TRANSPORTATION EXPENSES

Section III – Physical Damage Coverage, A.4. Coverage Extensions Subparagraph a. Transportation Expenses is replaced by the following:

- (1) We will pay up to \$75 per day to a maximum of \$1,000 for temporary transportation expense incurred by you because of the total theft of a covered "auto" of the private passenger type. We will pay only for those covered "autos" for which you carry either Comprehensive or Specified Cause Of Loss Coverage. We will pay for temporary transportation expenses

incurred during the period beginning 48 hours after the theft and ending, regardless of the policy's expiration, when the covered "auto" is returned to use or we pay for its "loss".

- (2) If the temporary transportation expenses you incur arise from your rental of an "auto" of the private passenger type, the most we will pay is the amount it costs to rent an "auto" of the private passenger type which is of the same like kind and quality as the stolen covered "auto".

H. AUDIO, VISUAL, AND DATA ELECTRONIC EQUIPMENT COVERAGE ADDED LIMITS

Audio, Visual, And Data Electronic Equipment Coverage Added Limits of \$1,000 Per "Loss" are in addition to the sublimit in Paragraph C.1.b. of the Limits Of Insurance Provision under Section III – Physical Damage Coverage.

I. HIRED AUTO PHYSICAL DAMAGE

Section III – Physical Damage Coverage, A.4. Coverage Extensions is amended by adding the following:

If hired "autos" are covered "autos" for Liability Coverage, and if Comprehensive, Specified Causes of Loss, or Collision coverage is provided for any "auto" you own, then the Physical Damage coverages provided are extended to "autos" you hire, subject to the following limit and deductible:

1. The most we will pay for loss to any hired "auto" is the lesser of Actual Cash Value, \$75,000, or Cost of Repair, minus the deductible.
2. The deductible will be equal to the largest deductible applicable to any owned "auto" for that coverage. No deductible applies to "loss" caused by fire or lightning.
3. Subject to the above limit and deductible provisions, we will provide coverage equal to the broadest coverage applicable to any covered "auto" you own.

J. PERSONAL PROPERTY OF OTHERS

Section III – Physical Damage Coverage, A.4. Coverage Extensions is amended by adding the following:

We will pay up to \$500 for loss to personal property of others in or on your covered "auto".

This coverage applies only in the event of "loss" to your covered "auto" caused by fire, lightning, explosion, theft, mischief or vandalism, the covered "auto's" collision with another object, or the covered "auto's" overturn.

No deductibles apply to this coverage.

K. RENTAL REIMBURSEMENT

Section III – Physical Damage Coverage, A.4. Coverage Extensions is amended by adding the following:

1. This coverage applies only to a covered "auto" for which **Physical Damage Coverage** is provided on this policy.
2. We will pay for rental reimbursement expenses incurred by you for the rental of an "auto" because of "loss" to a covered "auto". Payment applies in addition to the otherwise applicable amount of each coverage you have on a covered "auto". No deductibles apply to this coverage.
3. We will pay only for those expenses incurred during the policy period beginning 24 hours after the "loss" and ending, regardless of the policy's expiration, with the lesser of the following number of days:
 - a. The number of days reasonably required to repair or replace the covered "auto". If "loss" is caused by theft, this number of days is added to the number of days it takes to locate the covered "auto" and return it to you; or
 - b. 30 days.
4. Our payment is limited to the lesser of the following amounts:
 - a. Necessary and actual expenses incurred; or
 - b. \$50 per day, subject to a \$1,500 limit.
5. This coverage does not apply while there are spare or reserve "autos" available to you for your operations.
6. If "loss" results from the total theft of a covered "auto" of the private passenger type, we will pay under this coverage only that amount of your rental reimbursement expenses which is not already provided for under the Physical Damage – Transportation Expense coverage extension included in this endorsement.
7. Coverage provided by this extension is excess over any other collectible insurance and/or endorsement to this policy.

L. AIRBAG COVERAGE

Section III – Physical Damage Coverage, B.3.a. Exclusions is amended by adding the following:

If you have purchased Comprehensive or Collision Coverage under this policy, the exclusion relating to mechanical breakdown does not apply to the accidental discharge of an airbag.

M. LOSS TO TWO OR MORE COVERED AUTOS FROM ONE ACCIDENT

Section III – Physical Damage Coverage, D. Deductible is amended by adding the following:

If a Comprehensive, Specified Causes of Loss or Collision Coverage "loss" from one "accident" involves two or more covered "autos", only the highest deductible applicable to those coverages will be applied to the "accident".

If the application of the highest deductible is less favorable or more restrictive to the insured than the separate deductibles as applied in the standard form, the standard deductibles will apply.

This provision only applies if you carry Comprehensive, Collision or Specified Causes of Loss Coverage for those vehicles, and does not extend coverage to any covered "autos" for which you do not carry such coverage.

N. WAIVER OF DEDUCTIBLE – GLASS REPAIR OR REPLACEMENT

Section III – Physical Damage Coverage, D. Deductible is amended by adding the following:

If a Comprehensive Coverage deductible is shown in the Declarations it does not apply to the cost of repairing or replacing damaged glass.

O. DUTIES IN THE EVENT OF ACCIDENT, CLAIM, SUIT, OR LOSS

Section IV – Business Auto Conditions, A.2. Duties In The Event Of Accident, Claim, Suit Or Loss is amended by adding the following:

- d. Your obligation to notify us promptly of an "accident", claim, "suit" or "loss" is satisfied if you send us the required notice as soon as practicable after your Insurance Administrator or anyone else designated by you to be responsible for insurance matters is notified, or in any manner made aware, of an "accident", claim, "suit" or "loss".

P. UNINTENTIONAL FAILURE TO DISCLOSE EXPOSURES

Section IV – Business Auto Conditions, B.2. Concealment, Misrepresentation, Or Fraud is amended by adding the following:

If you unintentionally fail to disclose any exposures existing at the inception date of this policy, we will not deny coverage under this Coverage Part solely because of such failure to disclose. However, this provision does not affect our right to collect additional premium or exercise our right of cancellation or non-renewal.

Q. MENTAL ANGUISH

Section V – Definitions, C. is replaced by the following:

"Bodily injury" means bodily injury, sickness or disease sustained by a person, including mental anguish or death resulting from bodily injury, sickness or disease.

R. LIBERALIZATION

Paragraph B.3. Liberalization is amended for this endorsement as follows:

If we revise this endorsement to provide greater coverage without additional premium charge, we will automatically provide the additional coverage to all endorsement holders as of the day the revision is effective in your state.



EMPLOYERS MUTUAL CASUALTY COMPANY (15539)

POLICY NUMBER: 3H6-74-94---19

MIDWEST SOUND & LIGHTING, INC.

EFF DATE: 01/01/18

EXP DATE: 01/01/19

WORKERS COMPENSATION POLICY DECLARATIONS

ENDORSEMENT SCHEDULE

FORM	EDITION DATE	DESCRIPTION/ADDITIONAL INFORMATION	PREMIUM
*0405B	08-17	PRIVACY NOTICE	
*IL7004	09-16	MUTUAL POLICY PROVISIONS	
*IL7131A	04-01	COMM'L POLICY ENDORSEMENT SCHEDULE	
*IL8383.2A	01-15	DISCL PURSUANT TERRSM RISK INS. ACT	\$ 190
*IL8576	09-09	MEDICARE IMPT NOTICE TO POLICYHOLDER	
*WC000000C	01-15	WC AND EMPLOYERS LIABILITY INSURANCE	
*WC000310	04-84	SOLE PROPRIETORS/PARTNERS/OFFICERS SOLE PROPRIETORS, PARTNERS, OFFICERS AND OTHERS INCLUDED BELOW (NAME, TYPE & STATE): FIRST NAME: JOHN P. KNUTHE PRESIDENT PERSON: OFFICERS STATE(S):NE FIRST NAME: JAMES C. KNUTH SECRETARY/TREASURER PERSON: OFFICERS STATE(S):NE	
*WC000313	04-84	WAIVER OF OUR RIGHT TO RECOVER "ANY OR ALL PERSONS OR ORGANIZATIONS SUBJECT TO A WRITTEN CONTRACT REQUIRING SUCH A WAIVER AGREEMENT"	
*WC000406A	07-95	PREMIUM DISCOUNT ENDORSEMENT	
*WC000414	07-90	NOTIFICATION OF CHANGE IN OWNERSHIP	
*WC000419	01-01	PREMIUM DUE DATE ENDORSEMENT	
*WC000421D	01-15	CATASTROPHE O/T CERT ACTS TERRORISM	
*WC000422B	01-15	TERRORISM REAUTHORIZATION ACT END.	
*WC000424	01-17	AUDIT NONCOMPLIANCE CHARGE STATE(S): NE BASIS OF AUDIT NONCOMPLIANCE CHARGE: ESTIMATED ANNUAL PREMIUM MAXIMUM AUDIT NONCOMPLIANCE CHARGE MULTIPLIER: 2.000	
*WC000425	05-17	EXPERIENCE RATING MOD FACTOR REVISIO	
*WC260402	01-95	NE CONTRACTORS CLASS PREM ADJUSTMENT	
*WC260403	05-17	NE EXPERIENCE RATING MOD FACTOR REV	
*WC260601C	07-96	NE CANCELLATION & NONRENEWAL ENDST	
*WC7003A	09-86	WORKERS COMPENSATION SCHEDULE	
*WC7005	07-11	WC QUICK REFERENCE	
*WC8065	05-17	NE-PREMIUM CREDIT APPLICATION	
*WC8130	10-14	IMPORTANT NOTICE	

DATE OF ISSUE: 12/27/17

FORM: IL7131A (ED. 04-01)

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WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

Schedule

City of Lincoln/Lancaster County and PBC

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement
Insured

Effective Policy No.

Endorsement No.
Premium

Insurance Company

Countersigned by _____