Tracking No. 19040282

AMENDMENT TO CONTRACT Business Card and Letterhead Printing (Business Cards Only) Bid No. 18-082

City of Lincoln, Lancaster County and
City of Lincoln-Lancaster County Public Building Commission
Renewal
Firespring

This Amendment is hereby entered into by and between Firespring, 1201 Infinity Court, 1201 Infinity Court, Lincoln, NE 68512 (hereinafter "Contractor") and the City of Lincoln, Lancaster County and the City of Lincoln-Lancaster County Public Building Commission (hereinafter "Owners"), for the purpose of amending the Contract dated June 12, 2018 executed under City Directorial Order No. 19455, and County Contract C-18-0272, dated June 12, 2018, and executed by the City of Lincoln-Lancaster County Public Building Commission, on June 5, 2018, for Business Cards and Letterhead Printing, Bid No. 18-082, which is made a part of this amendment by this reference.

WHEREAS, the original term of the Contract is June 12, 2018 through June 11, 2019, with the option to renew for three (3) additional one (1) year terms upon written mutual consent by all parties; and

WHEREAS, the parties hereby renew the Contract for an additional one (1) year term beginning June 12, 2019 through June 11, 2020; and

WHEREAS, the expenditures for the City of Lincoln for the term of this renewal shall not exceed \$10,000.00 without approval by the City of Lincoln; and

WHEREAS, the expenditures for Lancaster County for the term of this renewal shall not exceed \$15,000.00 without approval by the Lancaster County Board; and

WHEREAS, the expenditures for the City of Lincoln-Lancaster County Public Building Commission for the term of this renewal shall not exceed \$1,000.00 without approval by the Public Building Commission; and

NOW, THEREFORE, IN CONSIDERATION of the mutual covenants contained in the Contract under City Directorial Order No. 19455 and County Contract C-18-0272, all amendments thereto, and as stated herein, the parties agree as follows:

- 1) The parties hereby renew the Contract for an additional one (1) year term beginning June 12, 2019 through June 11, 2020.
- 2) The expenditures for the City of Lincoln for the term of this renewal shall not exceed \$10,000.00 without approval by the City of Lincoln.
- The expenditures for Lancaster County for the term of this renewal shall not exceed \$15,000.00 without approval by the Lancaster County Board.
- 4) The expenditures for the City of Lincoln-Lancaster County Public Building Commission for the term of this renewal shall not exceed \$1,000.00 without approval by the Public Building Commission.
- 5) All other terms of the Contract, not in conflict with this Amendment, shall remain in 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 City of Lincoln Signature Page Lancaster County Signature Page City of Lincoln-Lancaster County Public Building Commission Signature Page

Vendor Signature Page

AMENDMENT TO CONTRACT
Business Card and Letterhead Printing
(Business Cards Only)
Bid No. 18-082
City of Lincoln, Lancaster County and
City of Lincoln-Lancaster County Public Building Commission
Renewal
Firespring

Please sign, date and return within 2 days of receipt.

Mail to: City/County Purchasing Attn: Lori L. Irons 440 So. 8th St., Ste. 200 Lincoln, NE 68508

Or email to: Ilirons@lincoln.ne.gov

Company Name:	Firespina
By: (Please Sign)	Patei o Wenzel
By: (Please Print)	Patti Jo Wenzel
Title:	Inside Account, Manager
Company Address:	1201 Infinity Court
Company Phone & Fax:	402-437-0000 n
E-Mail Address:	Patti. Weuzel @ firespring.com
Date:	May 1, 2019
Contact Person for Orders or Service	Patti Wenzel
Contact Phone Number:	402 -434-8513

City of Lincoln Signature Page

AMENDMENT TO CONTRACT
Business Card and Letterhead Printing
(Business Cards Only)
Bid No. 18-082
City of Lincoln, Lancaster County and
City of Lincoln-Lancaster County Public Building Commission
Renewal
Firespring

EXECUTION BY THE CITY OF LINCOLN, NEBRASKA

ATTEST:	
City Clerk	
	CITY OF LINCOLN, NEBRASKA
	Finance Director
	Approved by Directorial Order No
	Apploted by Billocollal Older No.
	dated

Lancaster County Signature Page

AMENDMENT TO CONTRACT
Business Card and Letterhead Printing
(Business Cards Only)
Bid No. 18-082
City of Lincoln, Lancaster County and
City of Lincoln-Lancaster County Public Building Commission
Renewal
Firespring

EXECUTION BY LANCASTER COUNTY, NEBRASKA

Contract Approved as to Form:	The Board of County Commissioners of Lancaster, Nebraska
Deputy Lancaster County Attorney	

City of Lincoln-Lancaster County Public Building Commission Signature Page

AMENDMENT TO CONTRACT
Business Card and Letterhead Printing
(Business Cards Only)
Bid No. 18-082
City of Lincoln, Lancaster County and
City of Lincoln-Lancaster County Public Building Commission
Renewal
Firespring

EXECUTION BY LINCOLN-LANCASTER COUNTY PUBLIC BUILDING COMMISSION

ATTEST:	10
Public Building Commission Attorney	Vavare Moss
Public Building Commission Attorney	Chairperson, Public Building Commission
	-14/10
	dated 5 (14)19



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 06/28/2018

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 rights to the certificate holder in lieu of such endorsement(s).											
PRODUCER				CONTACT Cheryl Talbott							
UN	СО	Group, Inc.				PHONE (A/C, No	(402)43	4-7200	FAX (A/C No.)	(402)4	34-7272
		coln Mall				E-MAIL ADDRE	ctalbott@i	unicogroup.coi	(A/C, No):	(10-)	
Sui	e 20	0					INS	SURER(S) AFFOR	RDING COVERAGE		NAIC #
Line	coln				NE 68508	INSURE	RA: Philadelp	hia Indemnity			18058
INSU	RED					INSURE	RB: Accident	Fund Insurance	ce Co.		10166
		Firespring Print, Inc.				INSURE	R C :				
		1201 Infinity Ct.				INSURER D :					
							RE:				
		Lincoln			NE 68512-9340	INSURER F:					
					NUMBER: 18/19 All Lines				REVISION NUMBER:		
IN C E	IDIC <i>A</i> ERTII XCLU	S TO CERTIFY THAT THE POLICIES OF I NTED. NOTWITHSTANDING ANY REQUIF FICATE MAY BE ISSUED OR MAY PERTA ISIONS AND CONDITIONS OF SUCH PO	REME AIN, TI LICIE	:NT, TE HE INS S. LIM	ERM OR CONDITION OF ANY SURANCE AFFORDED BY THE ITS SHOWN MAY HAVE BEEN	CONTR. E POLIC	ACT OR OTHER IES DESCRIBEI CED BY PAID CL	DOCUMENT NO HEREIN IS S LAIMS.	WITH RESPECT TO WHICH T	HIS	
INSR LTR		TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
	×	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$ 1,00	0,000
		CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	_{\$} 300,	000
									MED EXP (Any one person)	\$ 10,0	00
Α			Υ		PHPK1843484		07/01/2018	07/01/2019	PERSONAL & ADV INJURY	\$ 1,000,000	
	GEN	N'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,000,000	
	×	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$ 2,000,000	
		OTHER:							Employee Benefits	\$ 1,00	0,000
	AUT	TOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
	×	ANY AUTO							BODILY INJURY (Per person)	\$	
Α		OWNED SCHEDULED AUTOS ONLY	Υ		PHPK1843484	07/01/2018	07/01/2019	BODILY INJURY (Per accident)	\$		
		HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$		
									Underinsured motorist BI	\$ incl w/UM	
	×	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$ 5,00	0,000
Α		EXCESS LIAB CLAIMS-MADE			PHUB636210		07/01/2018 07/01/20		AGGREGATE	\$ 5,00	0,000
		DED RETENTION \$ 10,000							\$		
		RKERS COMPENSATION EMPLOYERS' LIABILITY Y/N	N/A		07/01/2018		PER STATUTE OTH-				
В	ANY	PROPRIETOR/PARTNER/EXECUTIVE ICER/MEMBER EXCLUDED?		WCV6113892		07/01/2018	07/01/2019	E.L. EACH ACCIDENT	\$ 500,000		
	(Mar	ndatory in NH) s, describe under							E.L. DISEASE - EA EMPLOYEE		
	DES	CRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$ 500,000	
_	Tec	chnology Professional			DUDK1043466		07/04/2049	07/01/2019	Foot Claim	4.00	0.000
A			PHPK1843466			07/01/2018	07/01/2019			0,000	
<u> </u>									Aggregate	1,000,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) City of Lincoln, Lancaster County and Lincoln/ Lancaster County Public Building Commission as additional insured on the General Liability and Auto. A Waiver of subrogation is included on the Workers Compensation.											
CERTIFICATE HOLDER CANCELLATION											
City of Lincoln, Lancaster County Lincoln/Lancaster County Public Building Commission 555. So. 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							
LITICOTT INE 08308				l		man	سمسمعل ا				

POLICY NUMBER: PHPK1843484

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location(s) Of Covered Operations				
City of Lincoln, Lancaster County					
Lincoln/Lancaster County					
Public Building Commission					
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 for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:
 - 1. Your acts or omissions; or
 - 2. The acts or omissions of those acting on your behalf:

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

However:

- 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 additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

- All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
- 2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

- C. 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.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

DESIGNATED INSURED

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM GARAGE COVERAGE FORM MOTOR CARRIER COVERAGE FORM TRUCKERS COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by this endorsement.

This endorsement identifies person(s) or organization(s) who are "insureds" under the Who Is An Insured Provision of the Coverage Form. This endorsement does not alter coverage provided in the Coverage Form.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Endorsement Effective:		Countersigned By:	
Named Insured:			
			(Authorized Representative)
	SCHE	DULE	
Name of Person(s) or Organization((s): City of Linco	ln, Lancaster County;	
		caster County	
	Public buildi	ng Commission	

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to the endorsement.)

Each person or organization shown in the Schedule is an "insured" for Liability Coverage, but only to the extent that person or organization qualifies as an "insured" under the Who Is An Insured Provision contained in **Section II** of the Coverage Form.

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 LINCOLN/LACASTER COUNTY

PUBLIC BUILDING COMMISSION

555 SO 10TH STREET LINCOLN NE 68508

ANY WRITTEN CONTRACT REQUIRING ENDORSEMENT FROM OUR INSURED 1201 INFINITY CT LINCOLN NE 68512

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 Effective 07/01/2018
Insured FIRESPRING PRINT INC

Policy No. WCV 6113892

Endorsement No. 000

Premium \$ 29,970.00

Insurance Company ACCIDENT FUND INS CO OF AMER

Countersigned by_