

SCHEDULE A

Statement of Prime Submitter Regarding Its MBE/WBE Utilization Plan

TO BE COMPLETED BY SUBMITTER ONLY

Submitter: Chicago City Skating, LLC Project: Management and operation of The Dr. Martin Luther King, Jr. Family Entertainment Center
P-15017

Is the submitter a certified MBE/WBE?

MBE: ☐ Yes ☒ No WBE: ☐ Yes ☒ No

If yes, attach all current Letters of Certification.

NOTE:

Certification of the submitter as an MBE satisfies only the MBE goal; the WBE goal must still be met. Certification of the submitter as a WBE satisfies only the WBE goal; the MBE goal must still be met. Certification of the submitter as both MBE and WBE may satisfy one goal only.

The submitter intends to perform work in connection with this project as a:

GENDER:

☒ Male
☐ Female

RACE/ETHNICITY:

☐ Black/African American
☐ Hispanic American
☐ Asian American
☒ White American
☐ Other _____

TYPE OF FIRM:

☐ Partnership
☐ Sole Proprietorship
☐ Corporation
☐ Joint Venturer
☒ Other Limited Liability Company

All MBE/WBE firms included in the following plan must be certified as such by a public or private organization such as the City of Chicago, Chicago Minority Supplier Development Council (CMSDC), Women Business Development Center (WBDC), and the Small Business Administration.

I. Participation of MBE/WBE Firms

In determining the manner of MBE/WBE participation in the performance of this contract, the submitter shall consider involvement with MBE/WBE firms as joint venture partners, subcontractors, and suppliers of goods and services, either directly or indirectly.

- A. If submitter is a joint venturer and one or more joint venture partners are certified MBEs or WBEs, attach copies of Letters of Certification and a copy of the Joint Venture Agreement clearly describing the role of the MBE/WBE firm(s) and its ownership interest in the joint venture.
- B. Proposing MBE/WBE subcontractors/suppliers/consultants to perform work or supply goods or services not directly related to the performance of this contract is considered to be indirect participation.

MBE/WBE Subcontractors/Suppliers/Consultants:

1. Name of MBE/WBE: Tact 1, LLC
 Address: 8900 S. Bennett Ave, Chicago, IL 60617
 Contact Person: Jerry Brown Phone: 773-968-7031
 E-mail: tact1security@gmail.com Fax: 773-530-0264
 MBE/WBE Participation: Dollars \$ 630,000 Percent: 47 %

Will this subcontractor be used for direct or indirect participation? (circle one)Schedule B and all current certification letters attached? ☒ Yes ☐ No

2. Name of MBE/WBE: Consolidated Printing Company
Address: 5942 N. Northwest Hwy, Chicago, IL 60631
Contact Person: Jennifer Paoletti Phone: 773-631-2800
E-mail: jennifer@consolidatedprinting.com Fax: 773-631-2822
MBE/WBE Participation: Dollars \$ 105,000 Percent: 8 %
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☒ Yes ☐ No
3. Name of MBE/WBE: _____
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBE/WBE Participation: Dollars \$ _____ Percent: _____ %
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No
4. Name of MBE/WBE: _____
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBE/WBE Participation: Dollars \$ _____ Percent: _____ %
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No
5. Name of MBE/WBE: _____
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBE/WBE Participation: Dollars \$ _____ Percent: _____ %
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No

6. Name of MBE/WBE: _____
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBE/WBE Participation: Dollars \$ _____ Percent: _____ %
Will this subcontractor be used as direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No
7. Name of MBE/WBE: _____
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBE/WBE Participation: Dollars \$ _____ Percent: _____ %
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No
8. Name of MBE/WBE: _____
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBE/WBE Participation: Dollars \$ _____ Percent: _____ %
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No
9. Name of MBE/WBE: _____
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBE/WBE Participation: Dollars \$ _____ Percent: _____ %
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No

Attach additional sheets as needed.

II. Summary of MBE/WBE Plan:**A. MBE Participation:**

<u>MBE Firm Name</u>	Dollar Amount of Participation	Percent Amount of Participation
<u>Tact 1, LLC</u>	<u>\$ 630,000</u>	<u>47</u> %
_____	<u>\$ _____</u>	<u>_____</u> %
_____	<u>\$ _____</u>	<u>_____</u> %
_____	<u>\$ _____</u>	<u>_____</u> %
_____	<u>\$ _____</u>	<u>_____</u> %
_____	<u>\$ _____</u>	<u>_____</u> %
_____	<u>\$ _____</u>	<u>_____</u> %
_____	<u>\$ _____</u>	<u>_____</u> %
Total MBE Participation:	<u>\$ _____</u>	<u>_____</u> %

B. WBE Participation:

<u>WBE Firm Name</u>	Dollar Amount of Participation	Percent Amount of Participation
<u>Consolidated Printing Company</u>	<u>\$ 105,000</u>	<u>8</u> %
_____	<u>\$ _____</u>	<u>_____</u> %
_____	<u>\$ _____</u>	<u>_____</u> %
_____	<u>\$ _____</u>	<u>_____</u> %
_____	<u>\$ _____</u>	<u>_____</u> %
_____	<u>\$ _____</u>	<u>_____</u> %
_____	<u>\$ _____</u>	<u>_____</u> %
_____	<u>\$ _____</u>	<u>_____</u> %
Total WBE Participation:	<u>\$ _____</u>	<u>_____</u> %

The submitter designates the following person as its MBE/WBE Liaison Officer:

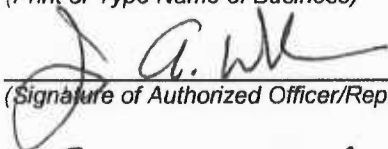
Bruce Aster, Vice President of Operations (440) 725-7462
 (Name and Title) (Phone Number)

baster@usa-skating.com
 (E-mail address)

To the best of my knowledge, information and belief, the facts and representations contained in this Schedule are true, and no material facts have been omitted.

Any material misrepresentation will be grounds for terminating any contract that may be awarded and for initiating action under federal or state laws concerning false statements.

Submitter: Chicago City Skating, LLC
(Print or Type Name of Business)

Signature:  Date: 6/16/15
(Signature of Authorized Officer/Representative)

Name/Title: James A. Duorak, General Manager
(Print or Type Name and Title of Person Signing Statement)

NOTE

If submitter is a MBE/WBE operating as a joint venture with a non-MBE/WBE firm, then use the signature page that follows instead.

End of Schedule A

SCHEDULE B

Statement of Intent from MBE/WBE to Perform as Subcontractor, Supplier and/or Consultant
DO NOT FILL OUT OR SIGN THIS FORM IF YOU ARE THE PRIME SUBMITTER

Project: P-15017 Management and Operation of The Dr. Martin Luther King, Jr. Family Entertainment Center

From: Consolidated Printing Company MBE: ☐ Yes ☒ No
(Name of MBE/WBE Firm) WBE: ☒ Yes ☐ No

To: Chicago City Skating, LLC and the Chicago Park District:
(Name of Prime Contractor-Submitter)

The undersigned intends to perform work in connection with the above projects as a:

GENDER:
☐ Male
☒ Female

RACE/ETHNICITY (CHECK ONE):
☐ Black/African American
☐ Hispanic American
☐ Asian American
☒ White American
☐ Other _____

TYPE OF FIRM (CHECK ONE):
☐ Partnership
☐ Sole Proprietorship
☒ Corporation
☐ Joint Venturer
☐ Other _____

The MBE/WBE status of the undersigned is confirmed by the attached current Letters of Certification from public or private entities such as the City of Chicago, Cook County, the Chicago Minority Supplier Development Council (CMSDC), the Women's Business Development Center (WBDC), Illinois Department of Central Management Services (CMS), The Metropolitan Water Reclamation District of Greater Chicago, and the Small Business Administration (SBA).

Attach all current certification letters behind Schedule B.

The undersigned is prepared to provide the following services or supply the following goods in connection with the above project/contract:

Printing

The above described performance is offered for the following price and described terms of payment:

\$105,000 paid as services provided

If more space is needed to fully describe the MBE/WBE firm's proposed scope of work and/or payment schedule, attach additional sheets.

SCHEDULE B

The undersigned will enter into a written agreement for the above work with you as prime contractor, conditioned upon your execution of a contract with the Chicago Park District, and will do so within three (3) working days of receipt of a signed contract from the Chicago Park District.

Signature: Marilyn C. Jones Date: 06/15/15
(Signature of Owner or Authorized Agent of MBE/WBE)

Name/Title: Marilyn K. Jones
(Print or Type Name and Title)

Address: 5942 N Northwest Highway

Telephone: 773 631-2800 Fax: 773 631-2822

End of Schedule B



DEPARTMENT OF PROCUREMENT SERVICES

CITY OF CHICAGO

Ms. Marilyn K. Jones
Consolidated Printing Company, Inc.
5942 North Northwest Highway
Chicago, IL 60631

Dear Marilyn K. Jones:

The City of Chicago has reviewed your annual *No Change Affidavit* and supporting documentation and is pleased to inform you that your firm, **Consolidated Printing Company, Inc.**, continues to meet the **Disadvantaged Business Enterprise ("DBE")** program certification eligibility standards set forth in 49 CFR Part 26. Your next No Change Affidavit is due **March 31, 2016**.

This certification allows your firm to participate as a **DBE** in the Illinois Unified Certification Program (IL UCP). The participating agencies include the Illinois Department of Transportation, the City of Chicago, the Chicago Transit Authority, Metra and Pace.

If there is any change in circumstances during the course of your certification period that affect your ability to meet size, disadvantaged status, ownership, or control requirements or any material change in the information provided in your initial application, you must provide written notification to this agency within **thirty (30) days** of the occurrence of the change. Failure to provide this information is a ground for denial of certification based on failure to cooperate pursuant to 49 CFR 26.109(c).

Your firm's name will appear in the IL UCP DBE Directory under the following category name(s):

NAICS Code(s)

323111 – Commercial Printing

323111 – Job Printing, Offset

The Directory is used by prime contractors/consultants, as well as other agencies, to solicit participation of DBE, and ACDBE firms. The Directory can be accessed on the Internet at <http://www.idot.illinois.gov/doing-business/certifications/disadvantaged-business-enterprise-certification/il-ucp-directory/index>.

Your participation on contracts will only be credited toward **DBE** contract goals when you perform in your firm's approved area(s) of specialty. Credit for participation in an area outside your specialty requires prior approval (verification of resources, expertise, and corresponding support documentation, etc.).

Sincerely,


Jamie L. Rhee
Chief Procurement Officer
JLR/cm



DEPARTMENT OF PROCUREMENT SERVICES
CITY OF CHICAGO

JUL - 1 2018

Ms. Marilyn K. Jones
Consolidated Printing Company, Inc.
5942 North Northwest Highway
Chicago, IL 60631-2664

Dear Ms. Jones:

We are pleased to inform you that **Consolidated Printing Company, Inc.** has been re-certified as a **Woman Business Enterprise ("WBE")** by the City of Chicago ("City"). This **WBE** certification is valid until **{five year expiration date 06/30/2018}**; however your firm's certification must be re-validated annually. In the past the City has provided you with an annual letter confirming your certification; such letters will no longer be issued. As a consequence, we require you to be even more diligent in filing your **annual No-Change Affidavit** 60 days before your annual anniversary date.

It is now your responsibility to check the City's certification directory and verify your certification status. As a condition of continued certification during the five-year period stated above, you must file an annual No-Change Affidavit. Your firm's **annual No-Change Affidavit** is due by **06/30/2014**. Please remember, you have an affirmative duty to file your No-Change Affidavit 60 days prior to the date of expiration. Failure to file your annual No-Change Affidavit may result in the suspension or rescission of your certification.

Your firm's five year certification will expire on **06/30/2018**. You have an affirmative duty to file for recertification 60 days prior to the date of the five year anniversary date. Therefore, you must file for recertification by **04/30/2018**.

It is important to note that you also have an ongoing affirmative duty to notify the City of any changes in ownership or control of your firm, or any other fact affecting your firm's eligibility for certification **within 10 days** of such change. These changes may include but are not limited to a change of address, change of business structure, change in ownership or ownership structure, change of business operations, gross receipts and or personal net worth that exceed the program threshold. Failure to provide the City with timely notice of such changes may result in the suspension or rescission of your certification. In addition, you may be liable for civil penalties under Chapter 1-22, "False Claims", of the Municipal Code of Chicago.

Please note -- you shall be deemed to have had your certification lapse and will be ineligible to participate as a **WBE** if you fail to:

- File your annual No-Change Affidavit within the required time period;
- Provide financial or other records requested pursuant to an audit within the required time period;
- Notify the City of any changes affecting your firm's certification within 10 days of such change; or
- File your recertification within the required time period.

Please be reminded of your contractual obligation to cooperate with the City with respect to any reviews, audits or investigation of its contracts and affirmative action programs. We strongly encourage you to assist us in maintaining the integrity of our programs by reporting instances or suspicions of fraud or abuse to the City's Inspector General at chicagoinspectorgeneral.org, or 866-IG-TIPLINE (866-448-4754).

Be advised that if you or your firm is found to be involved in certification, bidding and/or contractual fraud or abuse, the City will pursue decertification and debarment. In addition to any other penalty imposed by law, any person who knowingly obtains, or knowingly assists another in obtaining, a contract with the City by falsely representing the individual or entity, or the individual or entity assisted, is a minority-owned business or a woman-owned business, is guilty of a misdemeanor, punishable by incarceration in the county jail for a period not to exceed six months or a fine of not less than \$5,000 and not more than \$10,000 or both.

Your firms' name will be listed in the City's Directory of Minority and Women-Owned Business Enterprises in the specialty area(s) of:

NAICS Code(s):

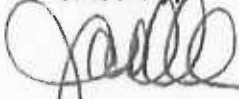
323110 Offset Printing (Except Books, Manifold Business Forms, Printing Grey Goods)

323110 Printing (Commercial and Lithographic)

Your firms' participation on City contracts will be credited only toward Woman Business Enterprise goals in your area(s) specialty. While your participation on City contracts is not limited to your area of specialty, credit toward goals will be given only for work that is self-performed and providing a commercially useful function that is done in the approved specialty category.

Thank you for your interest in the City's Minority and Women-Owned Business Enterprise (MBE/WBE) Program.

Sincerely,



Jamie L. Rhee
Chief Procurement Officer

JLR/cm

SCHEDULE B

Statement of Intent from MBE/WBE to Perform as Subcontractor, Supplier and/or Consultant
DO NOT FILL OUT OR SIGN THIS FORM IF YOU ARE THE PRIME SUBMITTER

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From: Tact 1, LLC
(Name of MBE/WBE Firm)

MBE: ☒ Yes ☐ No
WBE: ☐ Yes ☒ No

To: Chicago City Skating, LLC and the Chicago Park District:
(Name of Prime Contractor-Submitter)

The undersigned intends to perform work in connection with the above projects as a:

GENDER:
☒ Male
☐ Female

RACE/ETHNICITY (CHECK ONE):
☒ Black/African American
☐ Hispanic American
☐ Asian American
☐ White American
☐ Other _____

TYPE OF FIRM (CHECK ONE):
☐ Partnership
☐ Sole Proprietorship
☐ Corporation
☐ Joint Venturer
☒ Other Limited Liability Company

The MBE/WBE status of the undersigned is confirmed by the attached current Letters of Certification from public or private entities such as the City of Chicago, Cook County, the Chicago Minority Supplier Development Council (CMSDC), the Women's Business Development Center (WBDC), Illinois Department of Central Management Services (CMS), The Metropolitan Water Reclamation District of Greater Chicago, and the Small Business Administration (SBA).

Attach all current certification letters behind Schedule B.

The undersigned is prepared to provide the following services or supply the following goods in connection with the above project/contract:

Security guard service

The above described performance is offered for the following price and described terms of payment:

\$630,000 paid as service provided

If more space is needed to fully describe the MBE/WBE firm's proposed scope of work and/or payment schedule, attach additional sheets.

SCHEDULE B

The undersigned will enter into a written agreement for the above work with you as prime contractor, conditioned upon your execution of a contract with the Chicago Park District, and will do so within three (3) working days of receipt of a signed contract from the Chicago Park District.

Signature: Jerry Brown, Jr. CEO Date: 06-15-15
(Signature of Owner or Authorized Agent of MBE/WBE)

Name/Title: JERRY BROWN, JR CEO
(Print or Type Name and Title)

Address: 8900 S. Bennett Ave. Chgo, IL 60617

Telephone: 773-908-7031 Fax: 773-530-0264

End of Schedule B



CHICAGO MINORITY SUPPLIER DEVELOPMENT COUNCIL

THIS CERTIFIES THAT

TACT 1, LLC

Has met the requirements for certification as a bona fide Minority Business Enterprise as defined by the National Minority Supplier Development Council, Inc. (NMSDC) and as adopted by the Chicago Minority Supplier Development Council.

****NAICS Codes: 561612, 541690**

****Description of their product/services as defined by the North American Industry Classification System (NAICS)**

Product/Service Description: PROVIDE SECURITY AND SECURITY-RELATED CONSULTING SERVICES

10/31/2014

Issued Date

CH2961

Certificate Number

10/31/2015

Expiration Date

[Signature]
President, ChicagoMSDC

By using your assigned (through NMSDC only) password, NMSDC Corporate Members may view the original certificate by logging in at: <http://www.nmsdc.org>