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AMENDMENT NO. 2 TO JANITORIAL SERVICES AGREEMENT WITH KARLA'S JANITORIAL AND SUPPLIERS LLC

THIS AMENDMENT No. 2 ("Amendment No. 2"), made in duplicate and entered into effective on the 9th day of February, 2026, amends the agreement dated October 31, 2022 ("Agreement") by and between the CITY OF BURLINGAME ("CITY") and KARLA'S JANITORIAL AND SUPPLIERS LLC ("CONTRACTOR"). CITY and CONTRACTOR are collectively referred to as the "Parties."

RECITALS

WHEREAS, on October 31, 2022, the Parties entered into an Agreement to provide janitorial services, which is attached ("Agreement"); and

WHEREAS, the Agreement set forth a three-year term, ending on November 30, 2025, with an option for the City to extend the Agreement for an additional two years; and

WHEREAS, the Parties agreed to extend the expiration of the Agreement by two months from November 30, 2025 to January 31, 2026 to allow sufficient time for the City to complete the competitive bidding process and implement a new contract for the provision of janitorial services at City buildings without interruption to services as set forth in Amendment No. 1 (City Council Resolution No. 129-2025); and

WHEREAS, the City rejected all proposals received in response to the City's solicitation seeking bids for a new contract to provide janitorial services following the expiration of the Agreement with Contractor, and intends to re-advertise the solicitation; and

WHEREAS, the Parties have agreed to extend the expiration of the Agreement by two additional months from January 31, 2026 to March 31, 2026 to allow sufficient time for the City to complete the re-advertising process and implement a new contract for the provision of janitorial services at City buildings without interruption to services; and

WHEREAS, the Parties have negotiated and agree to amend the Agreement as set forth below.

NOW, THEREFORE, IT IS AGREED AS FOLLOWS:

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1. The Agreement is amended to extend the time of performance by two additional months, extending the expiration of the Agreement from January 31, 2026 to March 31, 2026;

2. The cost of the two additional months of service from January 31, 2026 through March 31, 2026 shall not exceed $92,785. The total not-to-exceed value for year 3 is thus amended to reflect the additional cost of $92,785, for a total not-to-exceed value for year three of $726,484.

3. Due to the additional cost of the two-month extension herein described, the Contract Price of $1,591,132.00, indicated in Section 3 of the Agreement, is replaced with $1,776,702.00.

4. In all other respects, the provisions of the Agreement dated October 31, 2022 shall remain in full force and effect to the extent they are not in conflict with this Amendment.

IN WITNESS WHEREOF, the Parties have executed this Amendment No. 2 on the day and year first above written.

CITY OF BURLINGAME
A municipal corporation

By Lisa K. Goldman
Lisa K. Goldman
City Manager

CONTRACTOR

Sheyla Garcia
Karla's Janitorial and Suppliers, LLC
Print Name: Sheyla Garcia
Title: Project Manager

Approved as to form:

Tamsen Burke
City Attorney – Michael Guina

ATTEST:

Meaghan Hassel-Shearer

City Clerk - Meaghan Hassel-Shearer

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RESOLUTION NO. 003-2026

RESOLUTION AUTHORIZING AMENDMENT NO. 2 TO THE JANITORIAL SERVICES AGREEMENT BETWEEN THE CITY OF BURLINGAME AND KARLA'S JANITORIAL AND SUPPLIERS, LLC TO EXTEND JANITORIAL SERVICE FOR A PERIOD OF AN ADDITIONAL TWO MONTHS

WHEREAS, on October 31, 2022, the City of Burlingame and Karla's Janitorial and Suppliers, LLC (KJS) executed an agreement for janitorial services (Agreement), providing for a maximum not-to-exceed amount of $1,591,132 for a three-year period ending on November 30, 2025, with the option to extend for an additional two years if elected by the City; and

WHEREAS, on November 17, 2025, the City Council approved Amendment No. 1 to extend the contract for an additional two months to January 31, 2026, and to increase the contract amount by $92,785, for a total not-to-exceed amount of $1,683,917, to ensure continuity of janitorial services during the RFP process and the transition to a new contract (Resolution No. 129-2025); and

WHEREAS, in response to the City's solicitation seeking bids for a new contract to provide janitorial services, on November 21, 2025, the City received several bids; and

WHEREAS, on January 20, 2025, the City Council rejected all 16 proposals received on November 21, 2025; and

WHEREAS, to ensure janitorial services remain uninterrupted during the re-advertising process and the transition to a new contract, the City Council hereby authorizes the City Manager to execute Amendment No. 2 to the Agreement to extend the current termination date of the Agreement from January 31, 2026, to March 31, 2026, and increase the contract amount by $92,785, resulting in a revised not-to-exceed total of $1,776,702.

NOW, THEREFORE, BE IT RESOLVED AND ORDERED:

1. The City Manager is authorized and directed to enter into Amendment No. 2 to the Janitorial Services Agreement with Karla's Janitorial and Suppliers, LLC in the form or substantially the same form as attached hereto and take such actions necessary in furtherance of this Resolution.

Michael Brownrigg, Mayor

I, Meaghan Hassel-Shearer, City Clerk of the City of Burlingame, certify that the foregoing resolution was introduced at a regular meeting of the City Council, held on the 20th day of January, 2026 and as adopted thereafter by the following vote:

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AYES: COUNCILMEMBERS: Brownrigg, Colson, Pappajohn, Stevenson, Thayer

NAYES: COUNCILMEMBERS: None

ABSENT: COUNCILMEMBERS: None

Meaghan Hassel-Shearer

Meaghan Hassel-Shearer, City Clerk

Docusign Envelope ID: F3DFA6DB-FC8F-4475-86AE-EACD887AEFE4

AMENDMENT NO. 2 TO JANITORIAL SERVICES AGREEMENT WITH KARLA'S JANITORIAL AND SUPPLIERS LLC

THIS AMENDMENT No. 2 ("Amendment No. 2"), made in duplicate and entered into effective on the_____ day of _____, 2026, amends the agreement dated October 31, 2022 ("Agreement") by and between the CITY OF BURLINGAME ("CITY") and KARLA'S JANITORIAL AND SUPPLIERS LLC ("CONTRACTOR"). CITY and CONTRACTOR are collectively referred to as the "Parties."

RECITALS

WHEREAS, on October 31, 2022, the Parties entered into an Agreement to provide janitorial services, which is attached ("Agreement"); and

WHEREAS, the Agreement set forth a three-year term, ending on November 30, 2025, with an option for the City to extend the Agreement for an additional two years; and

WHEREAS, the Parties agreed to extend the expiration of the Agreement by two months from November 30, 2025 to January 31, 2026 to allow sufficient time for the City to complete the competitive bidding process and implement a new contract for the provision of janitorial services at City buildings without interruption to services as set forth in Amendment No. 1 (City Council Resolution No. 129-2025); and

WHEREAS, the City rejected all proposals received in response to the City's solicitation seeking bids for a new contract to provide janitorial services following the expiration of the Agreement with Contractor, and intends to re-advertise the solicitation; and

WHEREAS, the Parties have agreed to extend the expiration of the Agreement by two additional months from January 31, 2026 to March 31, 2026 to allow sufficient time for the City to complete the re-advertising process and implement a new contract for the provision of janitorial services at City buildings without interruption to services; and

WHEREAS, the Parties have negotiated and agree to amend the Agreement as set forth below.

NOW, THEREFORE, IT IS AGREED AS FOLLOWS:

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1. The Agreement is amended to extend the time of performance by two additional months, extending the expiration of the Agreement from January 31, 2026 to March 31, 2026;

2. The cost of the two additional months of service from January 31, 2026 through March 31, 2026 shall not exceed $92,785. The total not-to-exceed value for year 3 is thus amended to reflect the additional cost of $92,785, for a total not-to-exceed value for year three of $726,484.

3. Due to the additional cost of the two-month extension herein described, the Contract Price of $1,591,132.00, indicated in Section 3 of the Agreement, is replaced with $1,776,702.00.

4. In all other respects, the provisions of the Agreement dated October 31, 2022 shall remain in full force and effect to the extent they are not in conflict with this Amendment.

IN WITNESS WHEREOF, the Parties have executed this Amendment No. 2 on the day and year first above written.

CITY OF BURLINGAME
A municipal corporation

By_____
Lisa K. Goldman
City Manager

CONTRACTOR

_____
Karla's Janitorial and Suppliers, LLC
Print Name:
Title:

Approved as to form:

_____
City Attorney – Michael Guina

ATTEST:

Docusign Envelope ID: F3DFA6DB-FC8F-4475-86AE-EACD887AEFE4

_____

City Clerk - Meaghan Hassel-Shearer

Docusign Envelope ID: F3DFA6DB-FC8F-4475-86AE-EACD887AEFE4

UNITED CASUALTY AND SURETY INSURANCE COMPANY
US Casualty and Surety Insurance Company
United Surety Insurance Company

303 Congress Street, Suite 502, Boston, MA 02210

BOND RIDER

This Rider Shall Be Attached To And Form A Part Of The Following Bond

BOND NO: UCSX372X6418

BOND TYPE: Annual Renewable Performance & Payment Bond

PRINCIPAL: Karla's Janitorial & Suppliers, LLC

OBLIGEE: City of Burlingame, California

EFFECTIVE DATE OF CHANGE: 01/31/2026

THE ABOVE REFERENCED BOND IS HEREBY AMENDED AND MODIFIED AS FOLLOWS:

Contract Amount Increase:
From $633,699.00 to $726,484.00

Contract Extension Term Dates:
1/31/2026-3/31/2026

Signed and sealed this 30th day of January, 2026

UNITED CASUALTY AND SURETY INSURANCE COMPANY
US Casualty and Surety Insurance Company
United Surety Insurance Company

Kelly Specht

Kelly Specht Attorney-in-Fact

Docusign Envelope ID: F3DFA6DB-FC8F-4475-86AE-EACD887AEFE4

TEXAS ORDINARY CERTIFICATE OF ACKNOWLEDGMENT
CIVIL PRACTICE & REMEDIES CODE § 121.007

The State of Texas

County of Bexar

Before me,

Delanie Davis-McCrossan, Notary Public,
Name and Character of Notarizing Officer, e.g., "John Smith, Notary Public"

on this day personally appeared

Kelly Specht,
Name of Signer

☒ known to me
☐ proved to me on the oath of

_____
Name of Credible Witness

☐ proved to me through _____

_____
Description of Identity Card or Document

to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this

30th day of January, 2026.
Day *Month* *Year*

Delanie Davis McCrossan
Signature of Notarizing Officer

DELANIE DAVIS MC CROSSAN
Notary ID #133477012
My Commission Expires
December 6, 2029

Place Notary Seal and/or Stamp Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Rider, Bond #UCSX372X6418

Document Date: January 30, 2026 Number of Pages: 1

Signer(s) Other Than Named Above: No Other Signers

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UCS

POWER OF ATTORNEY

171372

KNOW ALL MEN BY THESE PRESENTS: That United Casualty and Surety Insurance Company, a corporation of the State of Nebraska, and US Casualty and Surety Insurance Company and United Surety Insurance Company, assumed names of United Casualty and Surety Insurance Company (collectively, the Companies), do by these presents make, constitute and appoint:

Kelly Specht, Kandis Gregory, Anthony Balzano, JoAnn Smith, Cynthia S. Richter, Richard J. Taylor, Madeline Brown, Zachary R. Bradley, Donna Stolzenbach Felicia Thomas, Dawn E. Gittens, Rick Bredow, Ralph Earl Brown III, Ann Robertson, Kenda Freeman, Alexis Estrada, Deborah Perry, Shaun Sullivan

its true and lawful Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, with full power and authority hereby conferred in its name, place and stead, to execute, acknowledge and deliver **any and all bonds, recognizances, undertakings or other instruments or contracts of suretyship to include riders, amendments, and consents of surety, providing the bond penalty does not exceed Three Million Five Hundred Thousand & 00/100 Dollars ($3,500,000.00).** This Power of Attorney shall expire without further action on December 31st, 2026.

This Power of Attorney is granted under and by authority of the following resolutions adopted by the Board of Directors of the Companies at a meeting duly called and held on the 1st day of July, 1993:

Resolved that the President, Treasurer, or Secretary be and they are hereby authorized and empowered to appoint Attorneys-in-Fact of the Company, in its name and as its acts to execute and acknowledge for and on its behalf as Surety any and all bonds, recognizances, contracts of indemnity, waivers of citation and all other writings obligatory in the nature thereof, with power to attach thereto the seal of the Company. Any such writings so executed by such Attorneys-in-Fact shall be binding upon the Company as if they had been duly executed and acknowledged by the regularly elected Officers of the Company in their own proper persons.

That the signature of any officer authorized by Resolutions of this Board and the Company seal may be affixed by facsimile to any power of attorney or special power of attorney or certification of either given for the execution of any bond, undertaking, recognizance or other written obligation in the nature thereof; such signature and seal, when so used being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

IN WITNESS WHEREOF, the Companies have caused this instrument to be signed and their corporate seals to be hereunto affixed, this 14th day of March, 2025

UNITED CASUALTY AND SURETY INSURANCE COMPANY
US Casualty and Surety Insurance Company
United Surety Insurance Company

Corporate Seals

R. Kyle Fowler
R. Kyle Fowler, Treasurer

Commonwealth of Massachusetts
County of Suffolk ss:

On this 14th day of March, 2025, before me, Colleen A. Cochrane, a notary public, personally appeared, R. Kyle Fowler, Treasurer of United Casualty and Surety Insurance Company, US Casualty and Surety Insurance Company and United Surety Insurance Company, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person(s), or the entity on behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the Commonwealth of Massachusetts that the foregoing paragraph is true and correct.
WITNESS my hand and seal.

(Seal)
Notary Public Commission Expires: 10/27/2028

COLLEEN A. COCHRANE
Notary Public, Commonwealth of Massachusetts
My Commission Expires 10/27/2028

I, Robert F. Thomas, President of United Casualty and Surety Insurance Company, US Casualty and Surety Insurance Company and United Surety Insurance Company do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Companies, which is still in full force and effect; furthermore, the resolutions of the Board of Directors, set out in the Power of Attorney are in full force and effect.

In Witness Whereof, I have hereunto set my hand and affixed the seals of said Companies at Boston, Massachusetts this 30th day of January, 2026.

Corporate Seals

Robert F. Thomas, President

TO CONFIRM AUTHENTICITY OF THIS BOND OR DOCUMENT EMAIL: CONFIRMBOND@UNITEDCASUALTY.COM

Docusign Envelope ID: F3DFA6DB-FC8F-4475-86AE-EACD887AEFE4

UNITED SURETY INSURANCE COMPANY
NEWTON, MASSACHUSETTS

PERFORMANCE BOND

Bond No: UCSX372X6418

KNOW ALL MEN BY THESE PRESENTS: That Karla's Janitorial and Suppliers, LLC (hereinafter called the Principal), and UNITED SURETY INSURANCE COMPANY, a corporation organized under the laws of the State of Nebraska with their principal offices located at 233 Needham Street, Suite 440, Newton, MA 02464 (hereinafter called Surety), are held and firmly bound unto The City of Burlingame (hereinafter called Obligee), in the full and just sum of Five Hundred Forty Thousand Nine Hundred Fourteen Dollars $540,914.00 to the payment of which sum, well and truly be made, the said Principal and Surety bind themselves, their and each of their heirs, their administrators, executors, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, the above bounded Principal has entered into a certain written contract with the above mentioned Obligee for:

Janitorial Services

WHEREAS, the Obligee, by virtue of acceptance of this bond, agrees to accept a bond guaranteeing the performance of said contract on an annual basis.

NOW, THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH, that if the above bounded Principal shall well and truly keep, do and perform, each and every, all and singular matters and things in said contract set forth and specified to be by the said Principal kept, done and performed at the time and in the manner in said contract specified during the term of this bond, and shall pay over, make good and reimburse to the above named Obligee, all loss and damage which said Obligee may sustain by reason of failure of default on the part of the said Principal, then this obligation shall be void, otherwise to be and remain in full force and effect.

Provided, however, that this bond is subject to the following conditions and provisions:

1. This bond is for the term beginning 12/1/2024 and ending 11/30/2025

2. In the event of default by the Principal in performance on the contract during the term of this bond the Surety shall be liable only for the loss to the Obligee due to actual excess costs for performance of the contract up to the termination of the term of this bond. The amount of this bond shall be automatically reduced by the value of the work completed by the Principal.

3. No claim, action, suit, proceeding, except as hereinafter set forth, shall be had or maintained against Surety on this instrument by any person, entity or corporation other than the named Obligee, and unless same be brought or instituted and process served upon the Surety within six months after the completion of the contract during the term of this bond, unless said term is extended by Surety under condition 5.

4.. Neither nonrenewal by the Surety, nor failure, nor inability of the Principal to file a replacement bond shall constitute loss to the Obligee recoverable under this bond.

5. This bond may be extended for additional terms at the option of the Surety by continuation certificate executed by the Surety.

Signed and sealed this 26th day of November, 2024.

PRINCIPAL: Karla's Janitorial and Suppliers, LLC

BY: _____

UNITED SURETY INSURANCE COMPANY

BY: Anthony Balzano

Anthony Balzano, Attorney-in-Fact

UNITED SURETY INSURANCE COMPANY CORPORATE SEAL

Docusign Envelope ID: F3DFA6DB-FC8F-4475-86AE-EACD887AEFE4

ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of Ohio
County of Hamilton)

On 11/26/24 before me, Jessica M. Doll, Notary Public
(insert name and title of the officer)

personally appeared Anthony Balzano,
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of Ohio that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

NOTARIAL SEAL STATE OF OHIO

JESSICA M. DOLL
Notary Public, State of Ohio
My Commission Expires:
April 15, 2028

Signature Jessica M Doll (Seal)

Docusign Envelope ID: F3DFA6DB-FC8F-4475-86AE-EACD887AEFE4

UNITED CASUALTY AND SURETY INSURANCE COMPANY
US Casualty and Surety Insurance Company
United Surety Insurance Company

POWER OF ATTORNEY

171372

KNOW ALL MEN BY THESE PRESENTS: That United Casualty and Surety Insurance Company, a corporation of the State of Nebraska, and US Casualty and Surety Insurance Company and United Surety Insurance Company, assumed names of United Casualty and Surety Insurance Company (collectively, the Companies), do by these presents make, constitute and appoint:

Kelly Specht, Kandis Gregory, Anthony Balzano, JoAnn Smith, Cynthia S. Richter, Richard J. Taylor, Madeline Brown, Zachary R. Bradley, Donna Stolzenbach, Felicia Thomas, Tracie J. Rutzinski, Dawn E. Gittens, Rick Bredow

its true and lawful Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, with full power and authority hereby conferred in its name, place and stead, to execute, acknowledge and deliver any and all bonds, recognizances, undertakings or other instruments or contracts of suretyship to include riders, amendments, and consents of surety, providing the bond penalty does not exceed **Three Million Five Hundred Thousand & 00/100 Dollars ($3,500,000.00)**. This Power of Attorney shall expire without further action on December 31st, 2025.

This Power of Attorney is granted under and by authority of the following resolutions adopted by the Board of Directors of the Companies at a meeting duly called and held on the 1st day of July, 1993:

Resolved that the President, Treasurer, or Secretary be and they are hereby authorized and empowered to appoint Attorneys-in-Fact of the Company, in its name and as its acts to execute and acknowledge for and on its behalf as Surety any and all bonds, recognizances, contracts of indemnity, waivers of citation and all other writings obligatory in the nature thereof, with power to attach thereto the seal of the Company. Any such writings so executed by such Attorneys-in-Fact shall be binding upon the Company as if they had been duly executed and acknowledged by the regularly elected Officers of the Company in their own proper persons.

That the signature of any officer authorized by Resolutions of this Board and the Company seal may be affixed by facsimile to any power of attorney or special power of attorney or certification of either given for the execution of any bond, undertaking, recognizance or other written obligation in the nature thereof; such signature and seal, when so used being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

IN WITNESS WHEREOF, the Companies have caused this instrument to be signed and their corporate seals to be hereunto affixed, this 13th day of May, 2024

UNITED CASUALTY AND SURETY INSURANCE COMPANY
US Casualty and Surety Insurance Company
United Surety Insurance Company

R. Kyle Fowler
R. Kyle Fowler, Treasurer

Corporate Seals

Commonwealth of Massachusetts
County of Suffolk ss:

On this 13th day of May, 2024, before me, Colleen A. Cochrane, a notary public, personally appeared, R. Kyle Fowler, Treasurer of United Casualty and Surety Insurance Company, US Casualty and Surety Insurance Company and United Surety Insurance Company, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person(s), or the entity on behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the Commonwealth of Massachusetts that the foregoing paragraph is true and correct.
WITNESS my hand and seal.

(Seal)
Notary Public Commission Expires: 10/27/2028

COLLEEN A. COCHRANE
Notary Public, Commonwealth of Massachusetts
My Commission Expires 10/27/2028

I, Robert F. Thomas, President of United Casualty and Surety Insurance Company, US Casualty and Surety Insurance Company and United Surety Insurance Company do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Companies, which is still in full force and effect; furthermore, the resolutions of the Board of Directors, set out in the Power of Attorney are in full force and effect.

In Witness Whereof, I have hereunto set my hand and affixed the seals of said Companies at Boston, Massachusetts this 26th day of November 2024.

Corporate Seals

Robert F. Thomas
Robert F. Thomas, President

TO CONFIRM AUTHENTICITY OF THIS BOND OR DOCUMENT EMAIL: CONFIRMBOND@UNITEDCASUALTY.COM

Docusign Envelope ID: F3DFA6DB-FC8F-4475-86AE-EACD887AEFE4

UNITED SURETY INSURANCE COMPANY
NEWTON, MASSACHUSETTS

PAYMENT BOND

Bond No: UCSX372X6418

KNOW ALL MEN BY THESE PRESENTS: That Karla's Janitorial and Suppliers, LLC (hereinafter called the Principal), and UNITED SURETY INSURANCE COMPANY, a corporation organized under the laws of the State of Nebraska with their principal offices located at 233 Needham Street, Suite 440, Newton, MA 02464 (hereinafter called Surety), are held and firmly bound unto The City of Burlingame (hereinafter called Obligee), in the full and just sum of Five Hundred Forty Thousand Nine Hundred Fourteen Dollars ($540,914.00) to the payment of which sum, well and truly be made, the said Principal and Surety bind themselves, their and each of their heirs, their administrators, executors, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, the above bounded Principal has entered into a certain written contract with the above mentioned Obligee to provide Janitorial Services.

NOW, THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH, that if the above bounded Principal shall pay all persons who have furnished labor and material directly to the Principal for use in the prosecution of the aforesaid work, each of which said persons shall have a right of direct action on this instrument in his/her own benefit, then this obligation shall be null and void, otherwise to be and remain in full force and effect.

Provided, however, that this bond is subject to the following conditions and provisions:

1. This bond is for the term beginning 12/1/2024 and ending 11/30/2025.

2. The amount of this bond shall be automatically reduced by and to the extent of any payment or payments made in good faith by the Surety.

3. No claim, action, suit, proceeding, except as hereinafter set forth, shall be had or maintained against Surety on this instrument unless such claim, action, suit, or proceeding is brought or instituted upon the Surety within one year from termination or expiration of the bond term; or after the expiration of ninety (90) days after the day on which any person last supplied the labor and/or materials for which the claim is made, whichever occurs first. If this limitation is void or prohibited by law, the minimum period of limitation available to the Surety as a defense in the jurisdiction of the suit shall be applicable.

4. Neither nonrenewal by the Surety, nor failure, nor inability of the Principal to file a replacement bond shall constitute loss to the Obligee recoverable under this bond.

5. This bond may be extended for additional terms at the option of the Surety by continuation certificate executed by the Surety.

Signed and sealed this 26th day of November, 2024.

Principal: Karla's Janitorial and Suppliers, LLC

BY:_____

UNITED SURETY INSURANCE COMPANY

BY: Anthony Balzamo

Anthony Balzamo ,Attorney-in-Fact

UNITED SURETY INSURANCE COMPANY CORPORATE SEAL

Docusign Envelope ID: F3DFA6DB-FC8F-4475-86AE-EACD887AEFE4

ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of Ohio
County of Hamilton)

On 11/26/24 before me, Jessica M. Doll, Notary Public
(insert name and title of the officer)

personally appeared Anthony Balzano,
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of Ohio that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

NOTARIAL SEAL STATE OF OHIO

JESSICA M. DOLL
Notary Public, State of Ohio
My Commission Expires:
April 15, 2028

Signature Jessica M Doll (Seal)

Docusign Envelope ID: F3DFA6DB-FC8F-4475-86AE-EACD887AEFE4

UNITED CASUALTY AND SURETY INSURANCE COMPANY
US Casualty and Surety Insurance Company
United Surety Insurance Company

POWER OF ATTORNEY

171372

KNOW ALL MEN BY THESE PRESENTS: That United Casualty and Surety Insurance Company, a corporation of the State of Nebraska, and US Casualty and Surety Insurance Company and United Surety Insurance Company, assumed names of United Casualty and Surety Insurance Company (collectively, the Companies), do by these presents make, constitute and appoint:

Kelly Specht, Kandis Gregory, Anthony Balzano, JoAnn Smith, Cynthia S. Richter, Richard J. Taylor, Madeline Brown, Zachary R. Bradley, Donna Stolzenbach, Felicia Thomas, Tracie J. Rutzinski, Dawn E. Gittens, Rick Bredow

its true and lawful Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, with full power and authority hereby conferred in its name, place and stead, to execute, acknowledge and deliver **any and all bonds, recognizances, undertakings or other instruments or contracts of suretyship to include riders, amendments, and consents of surety, providing the bond penalty does not exceed Three Million Five Hundred Thousand & 00/100 Dollars ($3,500,000.00).** This Power of Attorney shall expire without further action on December 31st, 2025.

This Power of Attorney is granted under and by authority of the following resolutions adopted by the Board of Directors of the Companies at a meeting duly called and held on the 1st day of July, 1993:

Resolved that the President, Treasurer, or Secretary be and they are hereby authorized and empowered to appoint Attorneys-in-Fact of the Company, in its name and as its acts to execute and acknowledge for and on its behalf as Surety any and all bonds, recognizances, contracts of indemnity, waivers of citation and all other writings obligatory in the nature thereof, with power to attach thereto the seal of the Company. Any such writings so executed by such Attorneys-in-Fact shall be binding upon the Company as if they had been duly executed and acknowledged by the regularly elected Officers of the Company in their own proper persons.

That the signature of any officer authorized by Resolutions of this Board and the Company seal may be affixed by facsimile to any power of attorney or special power of attorney or certification of either given for the execution of any bond, undertaking, recognizance or other written obligation in the nature thereof; such signature and seal, when so used being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

IN WITNESS WHEREOF, the Companies have caused this instrument to be signed and their corporate seals to be hereunto affixed, this 13th day of May, 2024

UNITED CASUALTY AND SURETY INSURANCE COMPANY
US Casualty and Surety Insurance Company
United Surety Insurance Company

R. Kyle Fowler
R. Kyle Fowler, Treasurer

Corporate Seals

Commonwealth of Massachusetts
County of Suffolk ss:

On this 13th day of May, 2024, before me, Colleen A. Cochrane, a notary public, personally appeared, R. Kyle Fowler, Treasurer of United Casualty and Surety Insurance Company, US Casualty and Surety Insurance Company and United Surety Insurance Company, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person(s), or the entity on behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the Commonwealth of Massachusetts that the foregoing paragraph is true and correct.
WITNESS my hand and seal.

Colleen A. Cochrane (Seal)
Notary Public Commission Expires: 10/27/2028

COLLEEN A. COCHRANE
Notary Public, Commonwealth of Massachusetts
My Commission Expires 10/27/2028

I, Robert F. Thomas, President of United Casualty and Surety Insurance Company, US Casualty and Surety Insurance Company and United Surety Insurance Company do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Companies, which is still in full force and effect; furthermore, the resolutions of the Board of Directors, set out in the Power of Attorney are in full force and effect.

In Witness Whereof, I have hereunto set my hand and affixed the seals of said Companies at Boston, Massachusetts this 26th day of November, 2024.

Corporate Seals

Robert F. Thomas
Robert F. Thomas, President

TO CONFIRM AUTHENTICITY OF THIS BOND OR DOCUMENT EMAIL: CONFIRMBOND@UNITEDCASUALTY.COM

Docusign Envelope ID: F3DFA6DB-FC8F-4475-86AE-EACD887AEFE4

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
As required by written contract executed and signed by all parties prior to the date of loss but only to the extent permitted by law. 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.	As designated in written contract with the Named Insured.
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:

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 additional exclusions apply:

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

1. 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.

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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;

whichever is less.

This endorsement shall not increase the applicable limits of insurance.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location And Description Of Completed Operations
As required by written contract executed prior to the date of occurrence but only to the extent permitted by law and 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.	As designated in written contract with the Named Insured.
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" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the Schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

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;

whichever is less.

This endorsement shall not increase the applicable limits of insurance.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US (WAIVER OF SUBROGATION)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
ELECTRONIC DATA LIABILITY COVERAGE PART
LIQUOR LIABILITY COVERAGE PART
POLLUTION LIABILITY COVERAGE PART DESIGNATED SITES
POLLUTION LIABILITY LIMITED COVERAGE PART DESIGNATED SITES
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART
RAILROAD PROTECTIVE LIABILITY COVERAGE PART
UNDERGROUND STORAGE TANK POLICY DESIGNATED TANKS

SCHEDULE

Name Of Person(s) Or Organization(s):
Any person or organization to whom or to which you are obligated by virtue of a written contract to waive your right of recovery.
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Paragraph **8. Transfer Of Rights Of Recovery Against Others To Us** of **Section IV – Conditions:**

We waive any right of recovery against the person(s) or organization(s) shown in the Schedule above because of payments we make under this Coverage Part. Such waiver by us applies only to the extent that the insured has waived its right of recovery against such person(s) or organization(s) prior to loss. This endorsement applies only to the person(s) or organization(s) shown in the Schedule above.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PRIMARY AND NONCONTRIBUTORY – OTHER INSURANCE CONDITION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
LIQUOR LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

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.

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ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 12/05/2025

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
Golden Capital Insurance
21800 Burbank Ave., #240
Woodland Hills, CA 91367
Phone: (818) 654-6985 Fax: (___) ___-____

CONTACT NAME: Debbie Escobar
PHONE (A/C, No, Ext): (818)654-6985 FAX (A/C, No):
E-MAIL ADDRESS: service@goldencapitalins.com

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A :	Berkley Assurance Company	39462
INSURER B :	Mt. Hawley Insurance Company	37974
INSURER C :	EVANSTON INSURANCE COMPANY	35378
INSURER D :		
INSURER E :		
INSURER F :		

INSURED
Karla's Janitorial Suppliers LLC

1485 Bayshore M.B. #205
San Francisco CA 94124-

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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY	X	X	VUMA0389130	04/29/2025	04/29/2026	EACH OCCURRENCE	$ 1,000,000
	X CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 2,000,000
	X POLICY PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$ 2,000,000
	OTHER:							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	ANY AUTO						BODILY INJURY (Per person)	$
	ALL OWNED AUTOS / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS / NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	$
								$
B	UMBRELLA LIAB X OCCUR			GXS0022578	04/29/2025	04/29/2026	EACH OCCURRENCE	$ 1,000,000
	X EXCESS LIAB CLAIMS-MADE						AGGREGATE	$ 1,000,000
	DED RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N						PER STATUTE OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N / A					E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$
C	Commercial Property			1AA344664	04/29/2025	04/29/2026	BPP	80,000
							Deductible	1,000

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

City of Burlingame, its officers, officials, employees, and volunteers are named as additional insureds in regards to General Liability. Coverage is on a primary and non-contributory basis. Waiver of subrogation applies in favor of the additional insureds. Endorsement form attached.

CERTIFICATE HOLDER
City of Burlingame
1361 N. Carolan Avenue
Burlingame, CA 94010

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
Michael Shaj

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ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 12/05/2025

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
Capital Providers Insurance
License #0H52316
20750 Ventura Blvd., Ste 305
Woodland Hills CA 91364

CONTACT NAME: Sandy McKenzie
PHONE (A/C, No, Ext): (818) 676-0016 FAX (A/C, No): (818) 676-0015
E-MAIL ADDRESS: Certs@cpisgroup.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Infinity Select Insurance Company	20260
INSURER B : ProCentury Insurance Company	21903
INSURER C : Liberty Mutual Insurance Company	23043
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Karla's Janitorial & Suppliers, LLC
1485 Bay Shore Blvd.
M.B. 205
San Francisco CA 94124

COVERAGES **CERTIFICATE NUMBER:** 25-26 Auto, WC, Bond **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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	$
	CLAIMS-MADE / OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$
	POLICY / PRO-JECT / LOC						PRODUCTS - COMP/OP AGG	$
	OTHER:							$
A	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS	Y	Y	50023879901	11/03/2025	05/03/2026	BODILY INJURY (Per accident)	$
	HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
							Uninsured motorist	$ 1,000,000
	UMBRELLA LIAB / OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB / CLAIMS-MADE						AGGREGATE	$
	DED / RETENTION $							$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						X PER STATUTE / OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N: N	N / A	Y	WCMPRO5190453	03/02/2025	03/02/2026	E.L. EACH ACCIDENT	$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000
C	Dishonesty Bond			024239399	10/15/2025	10/15/2026	Bond Limit	$50,000

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

City of Burlingame, its officers, officials, employees, and volunteers are named as Additional Insured on the Commercial Auto Policy including Primary and Non Contributory Wording and Waiver of Subrogation per attached policy forms.

Waiver of Subrogation applies on the workers compensation policy per attached policy form.

CERTIFICATE HOLDER
City of Burlingame
1361 N. Carolan Avenue
Burlingame CA 94010

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

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KEMPER Auto COMMERCIAL

Kemper Auto Commercial
11700 Great Oaks Way, Suite 450
Alpharetta, GA 30022
Underwritten by: Infinity Select Insurance Company

Customer Service: (800) 722-3391
Claims Service: (800) 353-6737

ADDITIONAL NAMED INSURED ENDORSEMENT

Copy To	Policy ID Number	Expiration Date
City of Burlingame **1361 N Carolan Ave** **Burlingame, CA 94010**	**50023879901**	05/03/2026 12:01 a.m.
	Named Insured	
	Karla's Janitorial & Suppliers LLC	
	This endorsement is attached to and forms a part of the listed policy. No changes will be effective prior to the time changes are requested.	

Additional Insured
City of Burlingame

Part A - Liability Coverage, is changed as follows:

The definition of insured is changed to include the additional insured named above. Adding an **insured** will not increase the limit of our liability. The insurance provided by this endorsement will be excess over any other valid and collectible insurance.

All other parts of this Policy remain unchanged.

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KEMPER Auto COMMERCIAL

Kemper Auto Commercial
11700 Great Oaks Way, Suite 450
Alpharetta, GA 30022
Underwritten by: Infinity Select Insurance Company

Customer Service: (800) 722-3391 Claims Service: (800) 353-6737

PRIMARY AND NONCONTRIBUTORY ENDORSEMENT

Copy To	Policy ID Number	Expiration Date
City of Burlingame 1361 N Carolan Ave Burlingame, CA 94010	**50023879901**	05/03/2026 12:01 a.m.
	Named Insured	
	Karla's Janitorial & Suppliers LLC	
	This endorsement is attached to and forms a part of the listed policy. The following endorsement applies only if Form Number 500PNCV01 appears on your Declarations Page.	

This endorsement modifies the insurance provided under your COMMERCIAL AUTO POLICY.

PART A – LIABILITY COVERAGE OTHER INSURANCE – PART A ONLY

The following is added to this section:

The coverage afforded under **your** Commercial Auto Policy is primary to and will not seek contribution from any other insurance available to an additional insured under **your** policy provided that:

a. **You** have agreed in writing in a contract or agreement that the coverage afforded under **your** Commercial Auto Policy would be primary and would not seek contribution from any other insurance available to such additional insured; and
b. Such additional insured is a named insured under such other insurance.

ALL OTHER TERMS, LIMITS, CONDITIONS, AND PROVISIONS OF THE POLICY REMAIN UNCHANGED.

Docusign Envelope ID: F3DFA6DB-FC8F-4475-86AE-EACD887AEFE4

KEMPER Auto COMMERCIAL

Kemper Auto Commercial
11700 Great Oaks Way, Suite 450
Alpharetta, GA 30022
Underwritten by: Infinity Select Insurance Company

Customer Service: (800) 722-3391 Claims Service: (800) 353-6737

BLANKET ADDITIONAL INSURED ENDORSEMENT

Copy To	Policy ID Number	Expiration Date
Karla's Janitorial & Suppliers LLC 1485 Bay Shore Blvd, # MB205 San Francisco, CA 94124	**50023879901**	05/03/2026 12:01 a.m.
	Named Insured	
	Karla's Janitorial & Suppliers LLC	
	This endorsement is attached to and forms a part of the policy. No changes will be effective prior to the time changes are requested.	

This endorsement amends the policy as follows. Please read it carefully.

1. The definition of **"Insured"** is amended to include as an **insured** any person or organization which **you** are obligated by virtue of a written contract or agreement to add as an additional **insured**. Such person or organization is an additional **insured** only with respect to liability arising out of **your** ongoing operations performed for the additional **insured**. There is no coverage for acts or omissions of any additional **insured**, their agent(s), or their employee(s). A person's or organization's status as an additional **insured** under this endorsement ends when your operations for that additional **insured** are completed.
2. The additional **Insured(s)** shall not increase **our** limits of liability.
3. **We** will pay damages only if such damages arise out of acts of omission of:

   a. **You**; or

   b. Any other insured except an additional insured added under the terms of this endorsement. We will not pay damages when the damages are caused solely by a person or organization added as an additional insured under the terms of this endorsement, their agent(s), or their employee(s).

All other terms, limits, conditions and provisions of the policy remain unchanged.

Docusign Envelope ID: F3DFA6DB-FC8F-4475-86AE-EACD887AEFE4

KEMPER Auto COMMERCIAL

Kemper Auto Commercial
11700 Great Oaks Way, Suite 450
Alpharetta, GA 30022
Underwritten by: Infinity Select Insurance Company

Customer Service: (800) 722-3391
Claims Service: (800) 353-6737

BLANKET WAIVER OF SUBROGATION ENDORSEMENT

Copy To	Policy ID Number	Expiration Date
Karla's Janitorial & Suppliers LLC 1485 Bay Shore Blvd, # MB205 San Francisco, CA 94124	**50023879901**	05/03/2026 12:01 a.m.
	Named Insured	
	Karla's Janitorial & Suppliers LLC	
	This endorsement is attached to and forms a part of the listed policy. No changes will be effective prior to the time changes are requested.	

1. In return for **your** additional fee shown below, **we** agree that **our** rights of subrogation or rights of recovery under **your** policy will not apply against any person(s) or organization(s):
   a. For whom **you** are performing operations; and
   b. For whom **you** are obligated by virtue of a written contract or agreement to waive subrogation on **your** policy.
2. A person's or organization's waiver of subrogation status under this endorsement ends when **your** operations for that person(s) or organization(s) are completed.

Additional fee in the amount of **$160.00** will be retained by **us** regardless of any early termination of this endorsement or the policy.

All other terms, and conditions of this policy remain unchanged.

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WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY INSURANCE POLICY

WC 04 03 06 (Ed. 4-84)

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT—CALIFORNIA

This endorsement changes the policy to which it is attached effective on the inception date of the policy unless a different date is indicated below.

(The following "attaching clause" need be completed only when this endorsement is issued subsequent to preparation of the policy.)

This endorsement, effective on 03/02/2025 at 12:01 A.M. standard time, forms a part of

Policy No. WCMPRO 5190453 Endorsement No.

of the ProCentury Insurance Company

issued to Karla's Janitorial & Suppliers, LLC DBA Karla's Janitorial & Suppliers, LLC

Premium (if any) $

Authorized Representative

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.)

You must maintain payroll records accurately segregating the remuneration of your employees while engaged in the work described in the Schedule.

The additional premium for this endorsement shall be 2% of the California workers' compensation premium otherwise due on such remuneration.

Blanket Waiver

AM Best Rating Services

Berkley Assurance Company

BestLink **AMB #: 014158 NAIC #: 39462 FEIN #: 591993236**

Mailing Address
7233 East Butherus Drive
Scottsdale, Arizona 85260-2410
United States

Web: www.wrberkley.com
Phone: 480-951-0905
Fax: 480-281-0910
View Additional Address Information

AM Best Rating Unit: AMB #: 058496 - W. R. Berkley Corporation
Assigned to insurance companies that have, in our opinion, a superior ability to meet their ongoing insurance obligations.

View additional news, reports and products for this company.

Based on AM Best's analysis, 058496 - W. R. Berkley Corporation is the **AMB Ultimate Parent** and identifies the topmost entity of the corporate structure. View a list of operating insurance entities in this structure.

Best's Credit Ratings

Financial Strength View Definition

Rating (Rating Category):	A+ (Superior)
Affiliation Code:	r (Reinsured)
Outlook (or Implication):	Stable
Action:	Affirmed
Effective Date:	July 03, 2025
Initial Rating Date:	June 29, 2011

Long-Term Issuer Credit View Definition

Rating (Rating Category):	aa- (Superior)
Outlook (or Implication):	Positive
Action:	Affirmed
Effective Date:	July 03, 2025
Initial Rating Date:	June 29, 2011

Financial Size Category View Definition

Financial Size Category:	XV (Greater than or Equal to USD 2.00 Billion)

Best's Credit Rating Analyst

Rating Office: A.M. Best Rating Services, Inc.

Senior Financial Analyst: Elizabeth Blamble

Senior Director: Carlos Wong-Fupuy

Note: *See the Disclosure information Form or Press Release below for the office and analyst at the time of the rating event.*

Disclosure Information

Disclosure Information Form
View AM Best's Rating Disclosure Form

Press Release
AM Best Affirms Credit Ratings of W. R. Berkley Corporation and Its Subsidiaries
July 03, 2025

u Denotes Under Review Best's Rating

Rating History

A.M. Best has provided ratings & analysis on this company since 2011.

Financial Strength Rating

Effective Date	Rating
July 03, 2025	A+
June 06, 2024	A+
June 01, 2023	A+
June 08, 2022	A+
May 27, 2021	A+

Long-Term Issuer Credit Rating

Effective Date	Rating
July 03, 2025	aa-
June 06, 2024	aa-
June 01, 2023	aa-
June 08, 2022	aa-
May 27, 2021	aa-

Best's Credit & Financial Reports

Best's Credit Report - financial data included in Best's Credit Report reflects the data used in determining the current credit rating(s) for AM Best Rating Unit: AMB #: 058496 - W. R. Berkley Corporation.

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Best's Financial Report - Archive - reports which were released prior to the current Best's Financial Report.

View additional news, reports and products for this company.

Press Releases

Date	Title
Jul 03, 2025	AM Best Affirms Credit Ratings of W. R. Berkley Corporation and Its Subsidiaries
Jun 06, 2024	AM Best Revises Issuer Credit Rating Outlook to Positive for Credit Ratings of W. R. Berkley Corporation and Its Subsidiaries
Jun 01, 2023	AM Best Affirms Credit Ratings of W. R. Berkley Corporation and Its Subsidiaries
Jun 08, 2022	AM Best Affirms Credit Ratings of W. R. Berkley Corporation and Its Subsidiaries
May 27, 2021	AM Best Affirms Credit Ratings of W. R. Berkley Corporation and Its Subsidiaries
May 19, 2020	AM Best Affirms Credit Ratings of W. R. Berkley Corporation and Its Subsidiaries
May 10, 2019	AM Best Affirms Credit Ratings of W. R. Berkley Corporation and Its Subsidiaries

1 2 Page size: 10 16 items in 2 pages

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AXIS Specialty Europe SE (Ireland) (Name changed from AXIS Specialty Europe Public Limited Company effective 09/10/2012. Name changed from AXIS Specialty Europe Limited effective 04/26/2012)	06/20/2007
AXIS Surplus Insurance Company(Illinois) (Name changed from Sheffield Insurance Corporation effective 06/09/2003)	12/15/1995
AZGUARD Insurance Company (Nebraska)	08/26/2021

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B - D

Insurer	Date Approved
Berkley Assurance Company (Iowa)	07/20/2011
Berkley Specialty Insurance Company (Delaware) (Name changed from Berkley Regional Specialty Insurance Company effective 07/01/2018	04/12/2012
Berkshire Hathaway International Insurance Limited (UK)	04/01/2008
Blue Hill Specialty Insurance Company, Inc. (Illinois)	01/28/2025
Bridgeway Insurance Company (Delaware)	07/01/2021
The Burlington Insurance Company (Illinois) (Domicile changed from North Carolina to Illinois, effective 12/31/2015)	11/17/1995
Canopius US Insurance, Inc. (Delaware) (Name changed from Omega US Insurance, Inc. effective 08/20/2012)	07/20/2011
Capitol Specialty Insurance Corporation (Wisconsin)	05/15/2008
Century Surety Company (Ohio)	09/01/1995
Chubb Custom Insurance Company (New Jersey) (Domicile changed from Delaware to New Jersey, effective 04/01/2013)	08/04/1995
Chubb European Group SE (France) (Domicile changed from U.K. to France effective 01/01/2019) (Name changed from Chubb European Group Limited effective 07/19/2018) (Name changed from ACE European Group Limited effective 05/02/2017)	06/20/2007
The Cincinnati Specialty Underwriters Insurance Company (Delaware)	01/31/2011
Clear Blue Specialty Insurance Company (Texas) (Domicile changed from North Carolina to Texas effective 12/20/2022)	06/27/2022
Colony Insurance Company (Virginia)	09/01/1995
Columbia Casualty Company (Illinois)	07/06/1995
Coverys Specialty Insurance Company (New Jersey)	07/10/2017
Covington Specialty Insurance Company (New Hampshire)	07/20/2011
Crum & Forster Specialty Insurance Company (Delaware) (Name changed from Transnational Insurance Company effective 12/26/2000) (Domicile changed from Arizona to Delaware effective 11/21/2014)	04/20/1998
CUMIS Specialty Insurance Company, Inc. (Iowa)	05/15/2008

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AM Best Rating Services

Mt. Hawley Insurance Company

BestLink **AMB #: 002591 NAIC #: 37974 FEIN #: 371072999**

Mailing Address
9025 N. Lindbergh Drive
Peoria, Illinois 61615
United States

Web: www.rlicorp.com
Phone: 309-692-1000
Fax: 309-689-8676
View Additional Address Information

AM Best Rating Unit: AMB #: 003883 - RLI Group

Assigned to insurance companies that have, in our opinion, a superior ability to meet their ongoing insurance obligations.

View additional news, reports and products for this company.

Based on AM Best's analysis, 058460 - RLI Corp. is the **AMB Ultimate Parent** and identifies the topmost entity of the corporate structure. View a list of operating insurance entities in this structure.

Best's Credit Ratings

Financial Strength View Definition

Rating (Rating Category):	A+ (Superior)
Affiliation Code:	g (Group)
Outlook (or Implication):	Positive
Action:	Affirmed
Effective Date:	January 30, 2025
Initial Rating Date:	June 30, 1980

Long-Term Issuer Credit View Definition

Rating (Rating Category):	aa (Superior)
Outlook (or Implication):	Positive
Action:	Affirmed
Effective Date:	January 30, 2025
Initial Rating Date:	June 27, 2005

Financial Size Category View Definition

Financial Size Category:	XIV (USD 1.50 Billion to Less than 2.00 Billion)

Best's Credit Rating Analyst

Rating Office: A.M. Best Rating Services, Inc.

Financial Analyst II: Christine DePalma

Director: Rosemarie Mirabella

Note: *See the Disclosure information Form or Press Release below for the office and analyst at the time of the rating event.*

Disclosure Information

Disclosure Information Form
View AM Best's Rating Disclosure Form

Press Release
AM Best Revises Outlooks to Positive for RLI Corp. and Its Subsidiaries
January 30, 2025

View AM Best's Rating Review Form

u Denotes Under Review Best's Rating

Rating History

A.M. Best has provided ratings & analysis on this company since 1980.

Financial Strength Rating

Effective Date	Rating
January 30, 2025	A+
January 11, 2024	A+
December 13, 2022	A+
November 30, 2021	A+
November 17, 2020	A+

Long-Term Issuer Credit Rating

Effective Date	Rating
January 30, 2025	aa
January 11, 2024	aa
December 13, 2022	aa
November 30, 2021	aa
November 17, 2020	aa

Best's Credit & Financial Reports

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Press Releases

Date	Title
Jan 30, 2025	AM Best Revises Outlooks to Positive for RLI Corp. and Its Subsidiaries
Jan 11, 2024	AM Best Affirms Credit Ratings of RLI Corp. and Its Subsidiaries
Dec 13, 2022	AM Best Affirms Credit Ratings of RLI Corp. and Its Subsidiaries
Nov 30, 2021	AM Best Affirms Credit Ratings of RLI Corp. and Its Subsidiaries
Nov 17, 2020	AM Best Affirms Credit Ratings of RLI Corp. and Its Subsidiaries
Nov 07, 2019	AM Best Affirms Credit Ratings of RLI Corp. and Its Subsidiaries
Oct 25, 2018	A.M. Best Affirms Credit Ratings of RLI Corp. and Its Subsidiaries
Sep 29, 2017	A.M. Best Affirms Credit Ratings of RLI Corp., RLI Ins Co., Mt. Hawley Ins Co. and Contractors Bonding and Ins Co.

1 2 3 Page size: 10 24 items in 3 pages

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M - P

Insurer	Date Approved
The Marine Insurance Company Limited (UK)	11/03/1995
Markel International Insurance Company Limited (U.K.) (Name changed from Terra Nova Insurance Company Limited, effective 11/04/2002)	10/27/1995
Maxum Indemnity Company (Connecticut) (Domicile changed from Delaware to Connecticut effective 12/01/2016) (Name changed from Caliber One Indemnity Company, effective 01/02/2003)	09/29/1998
Medical Security Insurance Company (North Carolina)	12/18/2023
Mercer Insurance Company (Pennsylvania)	06/10/2016
Mesa Underwriters Specialty Insurance Company (New Jersey) (Name changed from Montpelier U.S. Insurance Company, effective 01/01/2012.) (Domicile changed from Oklahoma to New Jersey, effective 01/01/2012)	02/05/2012
Mitsui Sumitomo Insurance Company (Europe) Limited (U.K.)	06/10/2011
Mount Vernon Fire Insurance Company (Pennsylvania)	04/02/1997
MS Transverse Specialty Insurance Company (Texas) (Name changed from Transverse Specialty Insurance Company (Texas) effective 01/18/2024)	10/31/2022
MSIG Specialty Insurance USA Inc. (New York)	10/11/2019
Mt. Hawley Insurance Company (Illinois) (Domicile changed from Delaware to Kansas, effective 12/20/1995. Domicile changed from Kansas to Illinois effective 04/21/1999)	10/27/1995
NORCAL Specialty Insurance Company (Texas) (Domicile changed from Pennsylvania to Texas effective 04/25/2018) (Name changed from PMSLIC Insurance Company, effective 12/01/2015)	12/23/2013
National Fire & Marine Insurance Company (Nebraska)	06/30/1995
Nautilus Insurance Company (Arizona)	08/04/1995
Navigators Specialty Insurance Company (New York) (Name changed from NIC Insurance Company effective 01/04/2007)	12/08/1995
Northfield Insurance Company (Iowa) (Domicile changed from Missouri to Iowa, effective 01/01/2002)	06/30/1995
North Light Specialty Insurance Company (Illinois)	10/10/2014
Nutmeg Insurance Company (Connecticut)	06/30/1995
Oklahoma Specialty Insurance Company (Oklahoma)	12/05/2024
Old Republic Union Insurance Company (Illinois)	05/24/2017
Pacific Insurance Company, Limited (Connecticut)	09/01/1995
Penn-Star Insurance Company (Pennsylvania)	11/13/2002
Point Excess & Surplus Insurance Company (Wisconsin)	11/26/2024
Prime Insurance Company (Illinois)	08/08/2018
Princeton Excess and Surplus Lines Insurance Company (Delaware)	02/09/2006

AM Best Rating Services

Evanston Insurance Company

BestLink **AMB #: 003759 NAIC #: 35378 FEIN #: 362950161**

Mailing Address
10275 W. Higgins Road, Suite 750
Rosemont, Illinois 60018
United States

Web: www.markelcorp.com
Phone: 847-572-6000
Fax: 847-572-6389
View Additional Address Information

AM Best Rating Unit: AMB #: 003191 - Markel North America Insurance Group

Assigned to insurance companies that have, in our opinion, an excellent ability to meet their ongoing insurance obligations.

View additional news, reports and products for this company.

Based on AM Best's analysis, 058405 - Markel Group Inc. is the **AMB Ultimate Parent** and identifies the topmost entity of the corporate structure. View a list of operating insurance entities in this structure.

Best's Credit Ratings

Financial Strength View Definition

Rating (Rating Category):	A (Excellent)
Affiliation Code:	g (Group)
Outlook (or Implication):	Stable
Action:	Affirmed
Effective Date:	November 21, 2025
Initial Rating Date:	June 30, 1983

Long-Term Issuer Credit View Definition

Rating (Rating Category):	a+ (Excellent)
Outlook (or Implication):	Stable
Action:	Affirmed
Effective Date:	November 21, 2025
Initial Rating Date:	June 29, 2005

Financial Size Category View Definition

Financial Size Category:	XV (Greater than or Equal to USD 2.00 Billion)

Best's Credit Rating Analyst

Rating Office: A.M. Best Rating Services, Inc.

Senior Financial Analyst: Robert Valenta, CPCU

Director: Alan Murray

Note: *See the Disclosure information Form or Press Release below for the office and analyst at the time of the rating event.*

Disclosure Information

Disclosure Information Form
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Press Release
AM Best Affirms Credit Ratings of Markel Group Inc. and Its Subsidiaries
November 21, 2025

u Denotes Under Review Best's Rating

Rating History

A.M. Best has provided ratings & analysis on this company since 1983.

Financial Strength Rating

Effective Date	Rating
November 21, 2025	A
November 22, 2024	A
October 27, 2023	A
September 30, 2022	A
September 15, 2021	A

Long-Term Issuer Credit Rating

Effective Date	Rating
November 21, 2025	a+
November 22, 2024	a+
October 27, 2023	a+
September 30, 2022	a+
September 15, 2021	a+

Best's Credit & Financial Reports

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Date	Title
Nov 21, 2025	AM Best Affirms Credit Ratings of Markel Group Inc. and Its Subsidiaries
Nov 22, 2024	AM Best Affirms Credit Ratings of Markel Group Inc. and Its Subsidiaries
Oct 27, 2023	AM Best Affirms Credit Ratings of Markel Group Inc. and Its Subsidiaries
Sep 30, 2022	AM Best Affirms Credit Ratings of Markel Corporation and its Subsidiaries
Sep 15, 2021	AM Best Affirms Credit Ratings of Markel Corporation and its Subsidiaries
Sep 11, 2020	AM Best Affirms Credit Ratings of Markel Corporation and Most Subsidiaries; Upgrades Issuer Credit Rating of Markel Bermuda Ltd
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Company Profile

EVANSTON INSURANCE COMPANY

10275 W Higgins Rd Ste 750,
Rosemont, IL 60018

-

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Name History

Legal Name	Name Status	Effective Date
EVANSTON INSURANCE COMPANY	Current	

Agent for Service

Full Name	Attn Or C/O	Full Address	Contact Phone	Effective From Date
Orly Nosrati	-	21600 Oxnard St Ste 900, Woodland Hills, CA 91367-7834	-	09/23/2024

Reference Information

Identification

Company ID (EID)
105353
CA #
4861-1
NAIC
35378
NAIC Group
785
NAIC Group Name
Markel Grp
Date Authorized in California
-

Classification

Category
Insurer
Category Type
Accredited Reinsurer
Status
N/A
License Category
Reinsurer

Location

State Name
Illinois
Origin
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Lines of Business

The company is authorized to transact business within these lines of insurance. For an explanation of any of these terms, please refer to the glossary.

Financial Statements

* Year

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AM Best Rating Services

Infinity Select Insurance Company

BestLink **AMB #: 011252 NAIC #: 20260 FEIN #: 311333017**

Mailing Address
200 East Randolph Street, Ste. 3300
Chicago, Illinois 60601
United States

Web: www.infinityauto.com
Phone: 205-870-4000
Fax: 205-803-8080
View Additional Address Information

AM Best Rating Unit: AMB #: 000914 - Kemper P&C Group

Assigned to insurance companies that have, in our opinion, an excellent ability to meet their ongoing insurance obligations.

View additional news, reports and products for this company.

Based on AM Best's analysis, 058711 - Kemper Corporation is the **AMB Ultimate Parent** and identifies the topmost entity of the corporate structure. View a list of operating insurance entities in this structure.

Best's Credit Ratings

Financial Strength View Definition

Rating (Rating Category):	A- (Excellent)
Affiliation Code:	r (Reinsured)
Outlook (or Implication):	Stable
Action:	Affirmed
Effective Date:	August 15, 2025
Initial Rating Date:	June 29, 1992

Long-Term Issuer Credit View Definition

Rating (Rating Category):	a- (Excellent)
Outlook (or Implication):	Stable
Action:	Affirmed
Effective Date:	August 15, 2025
Initial Rating Date:	April 21, 2005

Financial Size Category View Definition

Financial Size Category:	XIV (USD 1.50 Billion to Less than 2.00 Billion)

Best's Credit Rating Analyst

Rating Office: A.M. Best Rating Services, Inc.

Senior Financial Analyst: Cristian Sieira, CFA, CPCU

Director: Alan Murray

Note: *See the Disclosure information Form or Press Release below for the office and analyst at the time of the rating event.*

Disclosure Information

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Press Release
AM Best Affirms Credit Ratings of Kemper Corporation, Its Affiliates and Subsidiaries
August 15, 2025

u Denotes Under Review Best's Rating

Rating History

A.M. Best has provided ratings & analysis on this company since 1992.

Financial Strength Rating

Effective Date	Rating
August 15, 2025	A-
September 13, 2024	A-
August 24, 2023	A-
August 11, 2022	A-
February 02, 2022	A
January 28, 2021	A

Long-Term Issuer Credit Rating

Effective Date	Rating
August 15, 2025	a-
September 13, 2024	a-
August 24, 2023	a-
August 11, 2022	a-
February 02, 2022	a
January 28, 2021	a

Best's Credit & Financial Reports

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Date	Title
Aug 15, 2025	AM Best Affirms Credit Ratings of Kemper Corporation, Its Affiliates and Subsidiaries
Sep 13, 2024	AM Best Affirms Credit Ratings of Kemper Corporation, Its Affiliates and Subsidiaries
Aug 24, 2023	AM Best Affirms Credit Ratings of Kemper Corporation, Its Affiliates and Subsidiaries
Aug 11, 2022	AM Best Downgrades Credit Ratings of Kemper Corporation, Its Affiliates and Subsidiaries
Feb 02, 2022	AM Best Revises Outlooks to Negative for Kemper Corporation, Its Affiliates and Subsidiaries
Jan 28, 2021	AM Best Upgrades Credit Ratings of Kemper Corporation, Its Affiliates and Subsidiaries
Jan 23, 2020	AM Best Revises Outlooks to Positive; Affirms Credit Ratings of Kemper Corporation, Its Affiliates and Subsidiaries
Jan 18, 2019	AM Best Removes From Under Review and Affirms Credit Ratings of Kemper Corporation and Most of Its Subsidiaries

1 2 3 Page size: 10 27 items in 3 pages

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Company Profile

INFINITY SELECT INSURANCE COMPANY

500 E 96th St Ste 100, Indianapolis, IN 46240-3733

800-782-1020

Show All | Name History | Agent for Service | Reference Information | Lines of Bus

Name History

Legal Name	Name Status	Effective Date
INFINITY SELECT INSURANCE COMPANY	Current	

Agent for Service

Full Name	Attn Or C/O	Full Address	Contact Phone	Effective From Date
Melissa DeKoven, c/o Corporation Service Company	c/o Corporation Service Company	2710 Gateway Oaks Drive, Suite 150N, Sacramento, CA 95833	-	10/28/2025

Reference Information

Identification

Company ID (EID)
61557
CA #
4290-3
NAIC
20260
NAIC Group
215
NAIC Group Name
Kemper Corp Grp
Date Authorized in California
-

Classification

Category
Insurer
Category Type
Property & Casualty
Status
Unlimited-Normal
License Category
Admitted

Location

State Name
Indiana
Origin
Foreign
Country
-
Form
Stock

Lines of Business

The company is authorized to transact business within these lines of insurance. For an explanation of any of these terms, please refer to the glossary.

Lines of Business
Liability
Team And Vehicle

Lines of Business
Automobile

Financial Statements

* Year

California Department of Insurance Disclaimer
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AM Best Rating Services

ProCentury Insurance Company

BestLink **AMB #: 002180 NAIC #: 21903 FEIN #: 946078027**

Mailing Address
550 Polaris Parkway
Westerville, Ohio 43082
United States

Web: www.ameritrustgroup.com
Phone: 614-895-2000
Fax: 614-895-2707
View Additional Address Information

AM Best Rating Unit: AMB #: 018680 - AF Group

Assigned to insurance companies that have, in our opinion, an excellent ability to meet their ongoing insurance obligations.

View additional news, reports and products for this company.

Based on AM Best's analysis, 060081 - Blue Cross Blue Shield of MI Mut Ins Co is the **AMB Ultimate Parent** and identifies the topmost entity of the corporate structure. View a list of operating insurance entities in this structure.

Best's Credit Ratings

Financial Strength View Definition

Rating (Rating Category):	A (Excellent)
Affiliation Code:	r (Reinsured)
Outlook (or Implication):	Stable
Action:	Affirmed
Effective Date:	December 03, 2025
Initial Rating Date:	June 30, 1963

Long-Term Issuer Credit View Definition

Rating (Rating Category):	a (Excellent)
Outlook (or Implication):	Stable
Action:	Affirmed
Effective Date:	December 03, 2025
Initial Rating Date:	April 19, 2006

Financial Size Category View Definition

Financial Size Category:	XV (Greater than or Equal to USD 2.00 Billion)

Best's Credit Rating Analyst

Rating Office: A.M. Best Rating Services, Inc.

Senior Financial Analyst: Michael T. Venezia

Director: Doniella Pliss

Note: *See the Disclosure information Form or Press Release below for the office and analyst at the time of the rating event.*

Disclosure Information

Disclosure Information Form
View AM Best's Rating Disclosure Form

u Denotes Under Review Best's Rating

Rating History

A.M. Best has provided ratings & analysis on this company since 1963.

Financial Strength Rating

Effective Date	Rating
December 03, 2025	A
February 25, 2025	A
May 02, 2024	A
April 27, 2023	A-
April 13, 2022	A- u
May 06, 2021	A-

Long-Term Issuer Credit Rating

Effective Date	Rating
December 03, 2025	a
February 25, 2025	a
May 02, 2024	a
April 27, 2023	a-
April 13, 2022	a- u
May 06, 2021	a-

Best's Credit & Financial Reports

Best's Credit Report - financial data included in Best's Credit Report reflects the data used in determining the current credit rating(s) for AM Best Rating Unit: AMB #: 018680 - AF Group.

Best's Credit Report - Archive - reports which were released prior to the current Best's Credit Report.

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View additional news, reports and products for this company.

Press Releases

Date	Title
May 02, 2024	AM Best Upgrades Credit Ratings of AmeriTrust Group Members
Apr 27, 2023	AM Best Removes From Under Review With Positive Implications, Affirms Credit Ratings of AmeriTrust Group Members
Apr 13, 2022	AM Best Places Credit Ratings of AmeriTrust Group Members Under Review With Positive Implications
May 09, 2019	AM Best Upgrades Credit Ratings of Members of AmeriTrust Group
Apr 19, 2018	A.M. Best Revises Outlooks to Positive for Members of AmeriTrust Insurance Group
Jan 26, 2017	A.M. Best Affirms Credit Ratings of the Members of Meadowbrook Insurance Group
Nov 19, 2015	A.M. Best Removes from Under Review and Upgrades Issuer Credit Ratings of Meadowbrook Insurance Group, Inc.'s Subsidiaries

1 2 Page size: 10 18 items in 2 pages

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Company Profile

PROCENTURY INSURANCE COMPANY

26255 American Dr, Southfield, MI 48034-6112

800-633-7007

Show All | Name History | Agent for Service | Reference Information | Lines of Bus

Name History

Legal Name	Name Status	Effective Date
PROCENTURY INSURANCE COMPANY	Current	01/19/2006
FIREMAN'S FUND INSURANCE COMPANY OF TEXAS	Old	

Agent for Service

Full Name	Attn Or C/O	Full Address	Contact Phone	Effective From Date
AMANDA GARCIA	c/o C T Corporation System	330 N Brand Blvd Ste 700, Glendale, CA 91203	-	06/30/2021

Reference Information

Identification

Company ID (EID)
3647
CA #
1732-7
NAIC
21903
NAIC Group
572
NAIC Group Name
BCBS of MI Grp
Date Authorized in California
-

Classification

Category
Insurer
Category Type
Property & Casualty
Status
Unlimited-Normal
License Category
Admitted

Location

State Name
Michigan
Origin
Foreign
Country
-
Form
Stock

Lines of Business

The company is authorized to transact business within these lines of insurance. For an explanation of any of these terms, please refer to the glossary.

Lines of Business
Sprinkler
Team And Vehicle

Lines of Business
Automobile
Miscellaneous
Fire
Marine
Surety
Plate Glass
Liability
Common Carrier Liability
Boiler And Machinery
Burglary
Workers' Compensation

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The CDI does not guarantee the truth, accuracy, adequacy or completeness of the data contained in the insurers' Annual and Quarterly Financial Statements and expressly disclaims any liability for any errors, omissions, or the result obtained from the use of such data.

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AM Best Rating Services

Liberty Mutual Insurance Company

BestLink **AMB #: 002283 NAIC #: 23043 FEIN #: 041543470**

Mailing Address
175 Berkeley Street
Boston, Massachusetts 02116
United States

Web: www.LibertyMutualGroup.com
Phone: 617-357-9500
Fax: 617-574-5955
View Additional Address Information

AM Best Rating Unit: AMB #: 051114 - Liberty Mutual Holding Company Inc.

Assigned to insurance companies that have, in our opinion, an excellent ability to meet their ongoing insurance obligations.

View additional news, reports and products for this company.

Based on AM Best's analysis, 051114 - Liberty Mutual Holding Company Inc. is the **AMB Ultimate Parent** and identifies the topmost entity of the corporate structure. View a list of operating insurance entities in this structure.

Best's Credit Ratings

Financial Strength View Definition

Rating (Rating Category):	A (Excellent)
Affiliation Code:	p (Pooled)
Outlook (or Implication):	Stable
Action:	Affirmed
Effective Date:	September 10, 2025
Initial Rating Date:	June 30, 1922

Long-Term Issuer Credit View Definition

Rating (Rating Category):	a (Excellent)
Outlook (or Implication):	Stable
Action:	Affirmed
Effective Date:	September 10, 2025
Initial Rating Date:	November 23, 2004

Financial Size Category View Definition

Financial Size Category:	XV (Greater than or Equal to USD 2.00 Billion)

Best's Credit Rating Analyst

Rating Office: A.M. Best Rating Services, Inc.

Associate Director : Raymond Thomson, CPCU, ARe, ARM

Senior Director: Carlos Wong-Fupuy

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Disclosure Information

Disclosure Information Form
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Guarantor(s) - also see the Rating Disclosure Form for the following companies, as they guarantee rated debt issues for this company.

051114 - Liberty Mutual Holding Company Inc.

Press Release
AM Best Affirms Credit Ratings of Liberty Mutual Holding Company Inc. and Its Subsidiaries
September 10, 2025

u Denotes Under Review Best's Rating

Rating History

A.M. Best has provided ratings & analysis on this company since 1922.

Financial Strength Rating

Effective Date	Rating
September 10, 2025	A
August 02, 2024	A
August 10, 2023	A
July 27, 2022	A
June 29, 2021	A

Long-Term Issuer Credit Rating

Effective Date	Rating
September 10, 2025	a
August 02, 2024	a
August 10, 2023	a
July 27, 2022	a
June 29, 2021	a

Rated Issues

Issue Credit Ratings

Date Issued	Amount	Coupon	Issue	Type	Rating	Effective Date	Outlook / Implication
10/09/1997	500,000,000 USD	7.697%	Surplus Notes		**bbb+**	09/10/2025	Stable
10/16/1996	250,000,000 USD	7.875%	Surplus Notes		**bbb+**	09/10/2025	Stable

(i) Denotes Indicative Rating

Related Financial and Analytical Data

The following links provide access to related data records that AM Best utilizes to provide financial and analytical data on a consolidated or branch basis.

AMB #	Company Name	Company Description
087060	Liberty Mutual Insurance Company CAB	Represents the Property/Casualty financials for the Canada Branch of this legal entity.

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Date	Title
Sep 10, 2025	AM Best Affirms Credit Ratings of Liberty Mutual Holding Company Inc. and Its Subsidiaries
Jun 09, 2025	AM Best Assigns Credit Ratings to Liberty Mutual Surety Brasil Seguros S.A.
Aug 02, 2024	AM Best Affirms Credit Ratings of Liberty Mutual Holding Company Inc. and Its Subsidiaries
Aug 10, 2023	AM Best Affirms Credit Ratings of Liberty Mutual Holding Company Inc. and Its Subsidiaries
Jul 27, 2022	AM Best Affirms Credit Ratings of Liberty Mutual Holding Company Inc. and Subsidiaries
Jun 29, 2021	AM Best Affirms Credit Ratings of Liberty Mutual Holding Company Inc. and Its Subsidiaries
Jun 26, 2020	AM Best Affirms Credit Ratings of Liberty Mutual Holding Company Inc. and Its Subsidiaries
Oct 22, 2019	AM Best Removes from Under Review With Positive Implications and Upgrades Credit Ratings of Nationale Borg

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LIBERTY MUTUAL INSURANCE COMPANY

175 Berkeley St, Boston, MA 02116-5066

800-526-1547

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Name History

Legal Name	Name Status	Effective Date
LIBERTY MUTUAL INSURANCE COMPANY	Current	

Agent for Service

Full Name	Attn Or C/O	Full Address	Contact Phone	Effective From Date
Melissa DeKoven	Corporation Service Company	2710 Gateway Oaks Drive, Suite 150N, Sacramento, CA 95833-3505	888-690-2882	04/09/2019

Reference Information

Identification

Company ID (EID)
3090
CA #
1022-3
NAIC
23043
NAIC Group
111
NAIC Group Name
LIBERTY MUT GRP
Date Authorized in California
-

Classification

Category
Insurer
Category Type
Property & Casualty
Status
Unlimited-Normal
License Category
Admitted

Location

State Name
Massachusetts
Origin
Foreign
Country
-
Form
Stock

Lines of Business

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Lines of Business
Marine
Surety

Lines of Business
Plate Glass
Workers' Compensation
Common Carrier Liability
Burglary
Credit
Team And Vehicle
Automobile
Miscellaneous
Fire
Disability
Liability
Boiler And Machinery
Sprinkler
Aircraft

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* Year

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City of Burlingame

Account # and Status	Business Name and Information	Contact Information

20506863

Business Status: Active
Start Date: 12/1/2022
End Date:
License Status: Current
Issue Date: 7/1/2025
Expire Date: 6/30/2026
Balance Due: 0
State License # 2018-14910292
State License Type: LLC
State License Status:
State License Exp Date: 12/31/2023

KARLA'S JANITORIAL & SUPPLIERS, LLC

Business Address: 1485 BAYSHORE BLVD M B 205 SAN FRANCISCO, CA 94124
Location: Inside
Location Type:
Mailing Address: 1485 BAYSHORE BLVD M B 205 SAN FRANCISCO, CA 94124
Ownership Type: LLC
Phone Number: (415) 494-5347, (415) 305-9637
Fax Number:
Email: luisg@karlasjanitorial.com
Website: karlasjanitorial.com
Geo Areas:
License Description: JANITORIAL SERVICES
Business Type: UNKNOWN (OUTSIDE CITY)
Rate Type: STD - General License Fee (Gross Receipts)
NAICS: -
SIC: 7349001 - Building Cleaning And Maintenance Services, Not Elsewhere Classified

Owners / Officers
KARLA MEJIA

Emergency Contacts
LUIS GARCIA, OWNER, (415) 494-5347
luisg@karlasjanitorial.com

KARLA MEJIA, OWNER, (415) 285-0985
karlam@karlasjanitorial.com

Alarm Company