Release Summary Sheet

Contract (PO) Number: 15034

Release Number: 78

Specification Number: 51701

Name of Contractor: OLD VETERANS CONSTRUCTION, INC

City Department: DEPT OF GENERAL SERVICES

Title of Contract: DEPT. OF GENERAL SERVICES-JOB ORDER CONTRACT REHABILITATION OF CITY FACILITIES

Dollar Amount of Release: $96,146.97

Release Description: GENERAL CONSTRUCTION-PUBLIC WORKS RELATED

Procurement Services Contact Person: LYLIANIS RODRIGUEZ

Vendor Number: 1036761
Submission Date:
CITY OF CHICAGO
BLANKET RELEASE

SUBJECT TO SUBCONTRACTOR CERTIFICATION

Furnish the supplies and/or services described below in conformance with conditions set forth herein and in your offer.

<table>
<thead>
<tr>
<th>RELEASE DATE</th>
<th>PURCHASE ORDER</th>
<th>RELEASE NUMBER</th>
<th>SPECIFICATION NUMBER</th>
<th>VENDOR NUMBER</th>
<th>SITE NAME</th>
<th>DELIVERY DATE</th>
<th>PAGE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/27/2012</td>
<td>15034</td>
<td>78</td>
<td>51701</td>
<td>1036761</td>
<td>70</td>
<td></td>
<td>1</td>
</tr>
</tbody>
</table>

DELIVER TO: 38-038
038-0030
30 N. LA SALLE ST.
ROOM 300
Chicago, IL 60602-2500

ORDERED FROM:
OLD VETERANS CONSTRUCTION, INC
10942 S. HALSTED ST. (EFT)
CHICAGO, IL 60628

DELIVERY CHARGES to be PREPAID
TITLE TO PASS ON DELIVERY

CONTACT: 742-3126

PO DESCRIPTION: DEPT. OF GENERAL SERVICES-JOB ORDER CONTRACT REHABILITATION OF CITY FACILITIES

BLANKET RELEASE

THIS SIGNED RELEASE is your authority to furnish the specified supplies and/or services in accordance with the terms and conditions of the BLANKET AGREEMENT NUMBER: 15034

THIS PURCHASE is FOR DEPARTMENT: 38 - DEPT OF GENERAL SERVICES

SUBMIT THE ORIGINAL INVOICE TO:

---

PO Line | Ship Line | COMMODITY INFORMATION | QUANTITY | UOM | UNIT COST | TOTAL COST |
--------|----------|-----------------------|----------|-----|----------|------------|
1 | 1 | 96842 | 96,146.97 | USD | 1.00 | 96,146.97 |

GENERAL CONSTRUCTION-PUBLIC WORKS RELATED
REQ# 675658; OVC-11-0684A; PERSHING EMERGENCY NETTING; P-11-032; SMITH; NO CIP

<table>
<thead>
<tr>
<th>Dist</th>
<th>BFY</th>
<th>FUND</th>
<th>COST TR</th>
<th>APPR</th>
<th>ACNTR</th>
<th>ACTV</th>
<th>PROJECT</th>
<th>RPT CAT</th>
<th>GENRL</th>
<th>FUTR</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>011</td>
<td>0C34</td>
<td>0382005</td>
<td>7060</td>
<td>220540</td>
<td>F538</td>
<td>90015151</td>
<td>000000</td>
<td>0000</td>
<td>000</td>
</tr>
</tbody>
</table>

SHIPMENT TOTAL: 96,146.97

RELEASE TOTAL: 96,146.97

APPROVAL:

[Signature]
FEB 02 2012

SIGNATURE

DATE
02/15/12
November 21 2011

Ms. Jamie L. Rhee  
Chief Procurement Officer  
Department of Procurement Services  
City Hall, Room 403  
121 North LaSalle Street  
Chicago, IL 60602

Attn: Carolyn Johnson JOC Manager

Re: JOC Project Number: OVC-11-064.A / P-11-032
Project Title: EMERGENCY----Pershing Facade Netting & Strapping
Address: 1869 W. Pershing & PERSHING COMPLEX
Estimated Cost: $ 200,000.00
Specification Number: 51701
Funding Source: 011-OC34-38-2005-7060-0540-90015151

Dear Ms. Rhee:

We request that the above referenced project be contracted under the Job Order Contracting (JOC) Method. Attachment A describes the scope of work and the appropriateness for using JOC for this project.

Please direct all technical inquiries to Project Manager Dick Smith at (312) 744-3843 and all other inquiries to Lori Edwards at 744-8525.

If you concur with our recommendation, please sign below and return a copy for our files.

Sincerely,

David J. Reynolds
Commissioner

APPROVED:

Jamie L. Rhee  
Chief Procurement Officer

Approved: Thomas W. Vukovich  
Arthur Andros
User Dept: Department of General Services  Date: November 21, 2011

Originator: Dick Smith  Phone: (312) 744-3843

Project Number: OVC-11-064.A / P-11-032

Project Name: EMERGENCY----Pershing Facade Netting & Strapping

Project Scope: Furnish and install mesh netting and steel strapping at certain areas at the 1769-1859 Pershing Road building complex to protect against exterior brick and masonry failure.

Location/Address: 1869 W. Pershing

Justification: Emergency measures to avoid having masonry fail.

Est. Project Budget: $200,000.00

CIP #: 

Funding Strips: 011-OC34-38-2005-7060-0540-90015151  $200,000.00

Funding Verified By: [Signature]  Date: 11/22/2011

Can this request be completed by one of the following:

1. In-House Trades  Yes  No  X
2. Term Contract  Yes  No  X
3. Competitive Bid  Yes  No  X

If No, for any of the above please explain:

No term contractor, trades unable to do this type of work, to long for bidding process.

APPROVED:

[Signature]  Date: 11.23.11

Thomas W. Vukovich, City Architect

[Signature]  Date: 11/22/11

David J. Reynolds, Commissioner
### Section I: General Contract Information

<table>
<thead>
<tr>
<th>Department Name</th>
<th>DGS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department Contact Name</td>
<td>Art Andros</td>
</tr>
<tr>
<td>Department Contact Number</td>
<td>744-3843</td>
</tr>
<tr>
<td>Department Contact Email</td>
<td><a href="mailto:Richard.Smith@cityofchicago.org">Richard.Smith@cityofchicago.org</a></td>
</tr>
<tr>
<td>Contract Number</td>
<td>15034</td>
</tr>
<tr>
<td>Contract Subject Name</td>
<td>JOC – Old Veteran Construction</td>
</tr>
<tr>
<td>Contract Initiation Date</td>
<td>7/13/2007</td>
</tr>
<tr>
<td>Original Contract Amount</td>
<td>$16,000,000</td>
</tr>
<tr>
<td>Original Contract Expiration Date</td>
<td>N/A</td>
</tr>
<tr>
<td>Budgeted amount for current year</td>
<td>N/A</td>
</tr>
<tr>
<td>Year to date expenditure</td>
<td>N/A</td>
</tr>
<tr>
<td>Are funds</td>
<td>Operating  Capital  TIF  Grant</td>
</tr>
<tr>
<td>What is the funding strip?</td>
<td>011-OC34-38-2005-7060-0540</td>
</tr>
<tr>
<td>If contract modification or task request is approved, will department have enough funds to cover new expenditure?</td>
<td>YES – Emergency mesh and strapping to prevent masonry failure at the 1769 – 1859 Pershing Road exterior. $200,000.</td>
</tr>
<tr>
<td>If no, what is the plan to address the short fall?</td>
<td></td>
</tr>
</tbody>
</table>

### Section II: Contract Modifications

Complete this section if you are modifying the value of an existing contract.

| Contract Value Increase | $                                                                 |
| New total contract amount | $                                                                 |
| New contract expiration date |                                                  |
| Goods/services provided by this contract | |
| **Justification of need to modify this contract** |  |
| **Impact of denial** |  |

**Section III. Issue a Request for Services to a Master Consulting Agreement**

Complete this section if you want to issue a request for services to a Master Consulting Agreement

| **Value of planned task order request** | $ |
| **Expiration date of planned task order request** |  |
| **Scope of services** |  |
| **Justification of need to issue request for services** |  |
| **Impact of denial** |  |

**Section IV: Assessment of Office of Budget and Management Analyst**

| **Approved/Deny** | This project is approved and is funded |
| **OBM Analyst Initials** | BO'R |
| **OBM Analyst Name/number** | Beth O'Reilly 744-9571 |
**Disclosure of Retained Parties**

**A. Definitions and Disclosure Requirements**
1. As used herein, the term "Contractor" means a person or entity who has any contract lease with the City of Chicago.
2. Pursuant to Executive Order 97-4, every city contract and lease must be accompanied by a disclosure statement providing certain information and attorneys, lobbyists, accountants, consultants, subcontractors, and other persons whom the contractor has retained or expects to retain with respect to the contract or lease. In particular, the contractor must disclose the name of each such person, his or her business address, the nature of the relationship, and the amount of fees paid or estimated to be paid.
3. The Contractor is not required to disclose employees who are paid solely through the Contractor's regular payroll.
4. "Lobbyist" means any person (a) who for compensation or on behalf of any person other than himself undertakes to influence any legislative or administrative action, or (b) any part or whose duties as an employee of another includes undertaking to influence any legislative or administrative action.

**B. Certification**
Contractor hereby certifies as follows:

1. This Disclosure relates to the following transaction:
   
   **Project name:** OVC-11-064
   
   **Emergency Repairs at 1762, 1819 & 1859 W. Pershing**
   
   **Specification, loan or other identifying number:** 15034

2. **Name of Contractor:** Old Veteran Construction

3. EACH AND EVERY attorney, lobbyist, accountant, consultant, subcontractor, or other person retained or anticipated to be retained by the Contractor with respect to or in connection with the contract or lease is listed below (attach additional pages if necessary):

<table>
<thead>
<tr>
<th>Name</th>
<th>BUSINESS ADDRESS</th>
<th>MBE WBE or Non</th>
<th>RelationShip (attorney, lobbyist, subcontractor, etc.)</th>
<th>FEE (indicate whether paid or estimated)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Old Veteran Construction</td>
<td>10942 S Halsted Street, Chicago, IL 60628</td>
<td>MBE</td>
<td>Subcontractor</td>
<td>$96,146.97 Est.</td>
</tr>
</tbody>
</table>

CHECK HERE IF NO SUCH PERSONS HAVE BEEN RETAINED OR ARE ANTICIPATED TO BE RETAINED__________

4. The Contractor understands and agrees that the city may rely on the information provided herein and that providing any false or incomplete or inaccurate information shall constitute default under the contract and may result in termination of the contract or lease.

5. The Contractor understands and agrees that in any case in which the Contractor is uncertain whether a disclosure is required under the Executive order, the Contractor must either ask the city whether disclosure is required or make the disclosure.

Under the Penalties of perjury, I certify that I am authorized to execute this Disclosure on behalf of the Contractor that the information disclosed herein is true and complete, and that no relevant information has been withheld.

---

Signature: __________________________

Pete Oldendorf

Name (Type or Print)

Date: 1/18/12

Project Manager

Title

Subscribed and sworn to before me

______ 18 __ day of ______

Notary Public Signature: __________________________

[Seal]

GLORIA L. CRUZ

NOTARY PUBLIC - STATE OF ILLINOIS

I MY COMMISSION EXPIRES: 05/25/13

Disclosure Statement