

**SECOND AMENDMENT TO THE AGREEMENT TO USE LOCAL GOVERNMENT
CONTRACT NO. 605471 FOR VETERINARY SERVICES**

This Second Amendment to the Agreement to Use Local Government Contract No. 605471 For Veterinary Services (“Second Amendment”) is made and entered into on _____ (“Second Amendment Effective Date”) by and between the City of North Las Vegas, a Nevada municipal corporation (“City”), and VCA Animal Hospitals, Inc., d/b/a VCA Decatur Animal Hospital (“Vendor”).

RECITALS

WHEREAS, on May 12, 2021, the City and Vendor entered into to the Agreement to Use Local Government Contract No. 605471 for Veterinary Services (“Original Agreement”), attached hereto as **Exhibit A**; and

WHEREAS, on October 18, 2021, the City and Vendor entered into a Renewal of Agreement to use Local Government Contract No. 605471 for Veterinary Services (“First Renewal”) through November 30, 2022, attached hereto as **Exhibit B**; and

WHEREAS, on August 10, 2022, the City and Vendor entered into a Renewal of Agreement to use Local Government Contract No. 605471 for Veterinary Services (“Second Renewal”) through November 30, 2023, attached hereto as **Exhibit C**;

WHEREAS, on March 21, 2024, the City and Vendor entered into the First Amendment to the Agreement to use Local Government Contract No. 605471 for Veterinary Services (“First Amendment”) through November 30, 2025, attached hereto as **Exhibit D**; and

WHEREAS, the City and Vendor wish to amend the Agreement to increase the total not to exceed amount from Fifty Thousand Dollars and 00/100 (\$50,000.00) to Ninety Thousand Dollars and 00/100 (\$90,000.00); and

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which the parties acknowledge, the parties agree as follows:

AGREEMENT

1. Section 2.2 of the Agreement is hereby deleted and replaced with the following:

2.2. The City shall purchase the goods and services according to the prices and fees described in **Exhibit A** and **Exhibit D**. The total not-to-exceed amount of the Agreement is Ninety Thousand Dollars and 00/100 (\$90,000.00) as specified in **Schedule A** below. The prices in **Exhibit D** shall remain in effect for the duration of this Agreement. No additional compensation shall be paid, and no increase in the time of performance shall be awarded, to the Vendor for changes referenced in this Agreement without the prior written authorization of the City to proceed with such changes.

Schedule A:	
Fiscal Year:	Amount:
07/25/2021 - 11/30/2021	\$ 4,166.67
12/01/2021 - 06/30/2022 (First Renewal)	\$ 7,291.67
07/01/2022 - 11/30/2022 (First Renewal)	\$ 5,208.33
12/01/2022 - 06/30/2023 (Second Renewal)	\$ 7,291.67
07/01/2023 - 11/30/2023 (Second Renewal)	\$ 5,208.33
03/01/2024 - 06/30/2024	\$ 3,125.00
07/01/2024 - 06/30/2025	\$ 40,833.35
07/01/2025 - 11/30/2025	\$ 16,377.98
Total:	\$90,000.00

2. In all other aspects, the parties confirm and re-affirm the terms and provisions of the Original Agreement and any Amendments thereto.

IN WITNESS WHEREOF, the City and the Vendor have caused this Second Amendment to be executed as of the day and year first above written.

City of North Las Vegas
a Nevada municipal corporation

VCA Animal Hospitals Inc.,
a Delaware corporation

By: _____
Pamela Goynes-Brown, Mayor

By: Ashley Nagel
Title: Hospital Manager / LVT
Name: Ashley Nagelhoff

ATTEST:

By: _____
Jackie Rodgers, City Clerk

Approved as to Form:

By: _____
Andy Moore, City Attorney

EXHIBIT A

Original Agreement

(see attached pages)

EXHIBIT B

AGREEMENT TO USE LOCAL GOVERNMENT CONTRACT NO. 605471 FOR VETERINARY SERVICES

This Agreement to use Local Government Contract No. 605471 for Veterinary Services (“Agreement”) is made and entered into as of 05/12/2021 09:35:43 PDT (“Effective date”) by the City of North Las Vegas, a Nevada municipal corporation (“City”) and VCA Animal Hospitals, Inc., d/b/a VCA Decatur Animal Hospital (formally known as Pet’s RX, Inc., d/b/a VCA Decatur Animal Hospital), a Delaware corporation, (“Vendor”).

RECITALS

WHEREAS, the City desires to obtain services from Vendor under the terms and conditions set forth in that certain Contract No. 605471 Contract for Veterinary Services entered into between Las Vegas Metropolitan Police Department and Vendor effective October 15, 2019, with its attendant contract documents, attachments, and exhibits (collectively, the “Original Contract”). The Original Contract is attached as **Exhibit A**, the Renewal confirmation is attached as **Exhibit B**, and the Pricing List is attached as **Exhibit C**;

WHEREAS, NRS 332.195(1)(a) permits the City to enter into a contract pursuant to a solicitation by another governmental entity located within or outside this State with the authorization of the contracting Provider;

WHEREAS, Vendor can provide the goods and services that the City seeks at the rates set forth under the Original Contract; and

WHEREAS, the City and the Vendor intend to enter into an agreement using the terms, conditions, and specifications of the Original Contract, unless otherwise amended as provided herein.

NOW THEREFORE, for the mutual promises contained in this Agreement, and for other good and valuable consideration, the receipt and sufficiency the parties acknowledge, the parties agree as follows:

SECTION ONE AFFIRMATION OF ORIGINAL CONTRACT

1.1. The City and the Vendor agree to use the Original Contract so that the City may purchase the services under the same terms and provisions as the Original Contract, provided that to the extent the terms of the Original Contract conflict with the terms of this Agreement, the terms of this Agreement shall govern and the conflicting terms of the Original Contract shall be considered null and void and not applicable to this Agreement.

1.2. As required pursuant to NRS 332.195, the Vendor hereby authorizes and consents to the City using the terms, conditions and covenants of the Original Contract as the basis for this Agreement.

1.3 Vendor affirms that its current legal name is VCA Animal Hospitals, Inc., d/b/a VCA Decatur Animal Hospital, but that it is the same company as Pet's RX, Inc., d/b/a VCA Decatur Animal Hospital that is identified in the Original Contract. Vendor further affirms that the Original Contract is still in effect.

1.4. Wherever the term "Las Vegas Metropolitan Police Department" or "Owner" appear in the Original Contract, the parties deem such terms to mean the "City" or "City of North Las Vegas."

SECTION TWO ADDITIONAL PROVISIONS TO ORIGINAL CONTRACT

The Parties agree to be bound by the following provisions:

2.1. The term of this Agreement shall commence on July 25, 2021 and will continue in effect until November 30, 2021 ("Term"), unless earlier terminated in accordance with the terms herein. If the City determines, in its sole discretion, that Provider has satisfactorily performed its obligations under this Agreement, the City Manager may extend the Term for up to two (2) additional one-year period(s) upon written notice to the Provider.

2.2 The City shall purchase the goods and services according to the prices and fees described in Exhibit A ("Original Contract") and Exhibit C ("Pricing List") in an amount not to exceed Twelve Thousand, Five Hundred Dollars and 00/100 (\$12,500.00) per fiscal year, based on the **Schedule A** below. The total not-to-exceed amount of the Agreement is Twenty-Nine Thousand, One Hundred Sixty-Six Dollars and 67/100 (\$29,166.67). The prices in the Original Contract shall remain in effect for the duration of this Agreement. No additional compensation shall be paid, and no increase in the time of performance shall be awarded, to the Vendor for changes referenced in this Agreement without the prior written authorization of the City to proceed with such changes.

Schedule A:	
Fiscal Year:	Amount:
07/25/2021 - 11/30/2021	\$ 4,166.67
12/01/2021 - 06/30/2022 (First Renewal)	\$ 7,291.67
07/01/2022 - 11/30/2022 (First Renewal)	\$ 5,208.33
12/01/2022 - 06/30/2023 (Second Renewal)	\$ 7,291.67
07/01/2023 - 11/30/2023 (Second Renewal)	\$ 5,208.33
Total:	\$ 29,166.67

2.3. Payment to the Vendor shall be made within thirty (30) calendar days after the City receives each invoice provided by the Vendor to the City, provided that such invoice is complete, correct, and undisputed by the City, and that it contains the following information: a detailed description of the services and/or goods provided and any additional information requested by the City. Upon reconciliation of all errors, corrections, credits, and disputes, payment to the Vendor will be paid in full within 30 calendar days. Invoices received without a

valid purchase order number will be returned unpaid. The Vendor shall submit the original invoice to:

City of North Las Vegas Finance Department
Attention: Accounts Payable
2250 Las Vegas Blvd. North, Suite 700
North Las Vegas, NV 89030

2.4. Notices. All notices, demands, requests, consents, approvals, and other instruments required or permitted to be given pursuant to this Agreement shall be in writing and signed by the notifying party, or officer, agent or attorney of the notifying party, and shall be deemed to have been effective upon delivery in writing if served personally, including but not limited to delivery by personal delivery, by overnight courier service, by facsimile or by overnight express mail, or upon posting if sent by registered or certified mail, postage prepaid, return receipt requested, and addressed as follows:

To City: City of North Las Vegas
Attention: Brittany Contardi
2250 Las Vegas Blvd., North, Suite 710
North Las Vegas, NV 89030
Phone: 702-633-1463

To Vendor: VCA Animal Hospitals, Inc.
d/b/a VCA Decatur Animal Hospital
Attention: Michelle Hoyt
117 North Decatur Blvd.
Las Vegas, NV 89106
Phone: 702-646-3777

2.5. The address to which any notice, demand or other writing may be delivered to any party as above provided may be changed by written notice given by such party as above provided.

2.6. The Vendor agrees that it has procured and maintained the general liability insurance and all other insurance required pursuant to the Original Contract, including general liability insurance with no less than \$1,500,000 policy limits per occurrence.

2.7. The Vendor shall defend, indemnify, and hold harmless the City, and its officers, agents, and employees from any liabilities, claims, damages, losses, expenses, proceedings, actions, judgments, reasonable attorneys' fees, and court costs which the City suffers or its officers, agents or employees suffer, as a result of, or arising out of, the negligent or intentional acts or omissions of the Vendor, its subcontractors, agents, and employees, in performance of this Agreement until such time as the applicable statutes of limitation expire. This section survives default, expiration, or termination of this Agreement or excuse of performance.

2.8. Safety

2.8.1. Obligation to Comply with Applicable Safety Rules and Standards. Contractor shall ensure that it is familiar with all applicable safety and health standards promulgated by state and federal governmental authorities including, but not limited to, all applicable requirements of the Occupational Safety and Health Act of 1970, including all applicable standards published in 29 C.F.R. parts 1910, and 1926 and applicable occupational safety and health standards promulgated under the state of Nevada. Contractor further recognizes that, while Contractor is performing any work on behalf the City, under the terms of this Agreement, Contractor agrees that it has the sole and exclusive responsibility to assure that its employees and the employees of its subcontractors comply at all times with all applicable safety and health standards as above-described and all applicable City safety and health rules.

2.8.2. Safety Equipment. Contractor will supply all of its employees and subcontractors with the appropriate Safety equipment required for performing functions at the City facilities.

2.9. Miscellaneous.

2.9.1. Nevada and City Law. The laws of the State of Nevada and the North Las Vegas Municipal Code govern the validity, construction, performance and effect of this Agreement, without regard to conflicts of law.

2.9.2. Assignment. Any attempt to assign this Agreement by Vendor without the prior written consent of the City shall be void. Any attempt to assign this Agreement by the City without the prior written consent of the Vendor shall be void.

2.9.3. Non-Waiver. The failure to enforce or the delay in enforcement of any provision of this Agreement by a party hereto shall in no way be construed to be a waiver of such provision or right unless such party expressly waives such provision or right in writing.

2.9.4. Attorneys' Fees. In the event either party commences any action against the other in connection with this Agreement (including any action to lift a stay or other bankruptcy proceeding), the prevailing party shall be entitled to its costs and expenses, including reasonable attorneys' fees, as determined by the court. This Section survives the termination of this Agreement until the applicable statutes of limitation expire.

2.9.5. Time of Essence. Time is of the essence in the performance of this Agreement and all terms, provisions, covenants and conditions hereof.

2.9.6. Effect of Agreement Termination. In the event this Agreement is terminated, all rights and obligations of the parties hereunder shall cease, other than indemnity obligations and matters that by their terms survive the termination hereof.

2.9.7. Fiscal Funding Out. The City reasonably believes that sufficient funds can be obtained to make all payments during the term of this Agreement. Pursuant to NRS Chapter 354, if the City does not allocate funds to continue the function performed by the Vendor under this Agreement, this Agreement will be terminated when appropriate funds expire.

2.9.8. Public Record. Pursuant to NRS 239.010 and other applicable legal authority, each and every document provided to the City may be a "Public Record" open to inspection and copying by any person, except for those documents otherwise declared by law to be confidential. The City shall not be liable in any way to the Vendor for the disclosure of any public record, including but not limited to documents provided to the City by the Vendor. In the event the City is required to defend an action with regard to a public records request for documents submitted by the Vendor, the Vendor agrees to indemnify, hold harmless, and defend the City from all damages, costs, and expenses, including court costs and reasonable attorney's fees related to such public records request. This section shall survive the expiration or early termination of the Agreement.


2.9.9. Electronic Signatures. For purposes of this Agreement, the use of facsimile, email or other electronic medium shall have the same force and effect as original signatures.

2.9.10. Federal Funding. Supplier certifies that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, in receipt of a notice of proposed debarment or voluntarily excluded from participation in this transaction by any federal department or agency. This certification is made pursuant to the regulations implementing Executive Order 12549, Debarment and Suspension, 28 C.F.R. pt. 67, § 67.510, as published as pt. VII of the May 26, 1988, Federal Register (pp. 19160-19211), and any relevant program specific regulations. This provision shall be required of every subcontractor receiving any payment in whole or in part from federal funds.


[The remainder of page is intentionally left blank. Signature page to follow.]

IN WITNESS WHEREOF, the parties have executed this Agreement as of the date first above written.

City of North Las Vegas,
a Nevada municipal corporation

By: 
Ryann Juden, City Manager

VCA Animal Hospitals, Inc.,
a Delaware corporation

By: 
Title: Hospital Manager
Name: Melissa Walton

Attest:

By: 
Catherine A. Raynor, MMC, City Clerk

Approved as to Form:

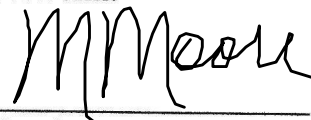
By: 
Micaela Rustia Moore, City Attorney

EXHIBIT A

Master Contract No. 605471

Please see attached page(s).



LAS VEGAS METROPOLITAN POLICE DEPARTMENT

**CONTRACT #605471
VETERINARY SERVICES**

Purchasing Unit
400 B S. Martin Luther King Blvd.
4th Floor
Las Vegas, Nevada 89106-4372
Phone (702) 828-5788



LAS VEGAS METROPOLITAN POLICE DEPARTMENT

**CONTRACT NO. 605471
CONTRACT FOR VETERINARY SERVICES**

Company	Pet's, Rx, Inc., dba VCA Decatur Animal Hospital
Address	1117 N. Decatur Blvd. Las Vegas, NV 89108
Telephone No.	(702) 646-3777
FAX No.	(702) 646-4729
Contact	Dr. Michelle Hoyt
Email	Michelle.hoyt@vcahospitals.com

**CONTRACT NO. 605471
VETERINARY SERVICES**

This Contract is made and entered into this 10/15/2019, by and between Las Vegas Metropolitan Police Department (hereinafter referred to as "Owner"), a local government having its principal office located at 400B South Martin Luther King Boulevard, Las Vegas, Nevada 89106, and PET'S RX, INC., dba VCA DECATUR ANIMAL HOSPITAL (hereinafter referred to as Company), having its principal office located at 1117 N. Decatur Blvd. Las Vegas, NV 89108, for Veterinary Services (hereinafter referred to as "Project").

WITNESSETH:

WHEREAS, the Company is competent to perform the services and provide any associated goods described herein and desires to enter into this Contract with the Owner for the provision of such services and goods;

WHEREAS, the Company has the required licenses and/or authorizations pursuant to all federal, State of Nevada and local laws in order to conduct business relative to this Contract;

WHEREAS, the Company has the personnel and resources necessary to accomplish the Project within the required schedule and for the budgeted allowance amount of \$95,000 annually, including all fees for time and labor for salaries, overhead, materials, equipment, licenses, direct non-salary expenses incurred by the Company, including subconsultant costs, travel, lodging, meals and miscellaneous expenses.

NOW THEREFORE, in consideration of the mutual promises hereinafter given, it is mutually agreed by and between the Company and the Owner as follows:

SECTION A – CONTRACT FORM

The subject matter of this Contract is providing Veterinary Services.

SECTION B – BASIC TERMS**B-1 DEFINITIONS**

The following definitions apply to this Contract:

Amendment	A written document/Purchase Order from the LVMPD Purchasing Unit directing immediate changes in the Services and any Goods for which a change to the Contract Term, Scope, and/or Contract Amount may be required after award.
Award Date	The date that a Contract becomes effective, after the Contract has been approved by the Owner. It is the date that is entered into the first paragraph of a Contract upon execution by an authorized representative of the Owner.
Chief Financial Officer	The LVMPD Chief Financial Officer.
Company	The individual, partnership or corporation that is the most qualified Proposer who is awarded a Contract by the Owner and is responsible for the performance of services under the Contract.
Company Representative	The individual authorized to act on behalf of the Company regarding routine matters arising under or relating to this Contract.
Contract	This document, which represents the written agreement between the parties, consisting of Sections A through F, which is binding and

	effective only upon execution by the Owner.
Contract Documents	The following documents which collectively constitute the obligations of the Company, in the following governing order: this Contract and the attachments hereto;
Day	Except as otherwise specified, "Day" will mean calendar day.
Deliverable	Any report, software, hardware, data, documentation, presentation, or any other tangible item that the Company is required to provide the Owner under the terms of a Contract.
Final Acceptance	Project completion and the warranty start date, after LVMPD has signed off as the Project is 100% complete and final payment is authorized.
Fiscal Affairs Committee (FAC)	The Governing Body that is the approving authority for fiscal matters of the Las Vegas Metropolitan Police Department.
Goods	Has the same definition as given under Article 2 of the Uniform Commercial Code (NRS Chapters 104 and 104A), and substitutes for common usage terms such as "materials", "Goods", "equipment", "products", and "supplies".
Governing Body	Las Vegas Metropolitan Police Department Fiscal Affairs Committee (FAC) in which the general legislative and fiscal powers of the local government are vested.
Manufacturer's Published Price List(s)	The price list(s) published by a manufacturer for their line of products or provided by a company for distribution which contains the MSRPs of the offered product line(s).
Manufacturer's Suggested Retail Price (MSRP)	The price of a product which the manufacturer recommends that the retailer sell the product, before any discount(s).
Non-exclusive Contract	A contract under which the Owner agrees to obtain some, but not necessarily all, of the Owner's requirements for a particular service.
Notice of Award	A letter issued by the Owner notifying the Successful Proposer of the award of the Contract by the FAC or Finance.
Owner or LVMPD	Las Vegas Metropolitan Police Department (LVMPD)
Proposal Submittal	Package of information submitted by a Proposer which is in response to information which was required by the Owner and specified in the RFP Document, bid security (if required), and any/all required attachments.
Prospective Proposer	An individual or firm who has received a copy of the RFP Document.
Purchasing Representative	Individual designated in the RFP Document as the Owner's point of contact to whom all inquiries should be addressed, beginning with the issuance of the RFP Document and ending with an award of a Contract, or the withdrawal of the RFP, if no Contract is awarded.

Project	A collaborative effort that is carefully planned to achieve a particular goal, accomplishing particular tasks under time constraints.
Project Manager	Individual designated in the Contract as the Owner's point of contact after the award of the Contract, who is responsible for the supervision, direction, control and approval of the work of the Company regarding routine matters of the Contract.
Scope of Work (SOW)	The written descriptions (specifications) of the requirements for the Goods/services required and incorporated as a part of the Contract.

B-2 CONTRACT TYPE

The Contract type is a firm-fixed price. This is a Non-exclusive Contract.

B-3 COMPENSATION

- A. The Company will invoice the Owner in accordance with the pricing list specified in attached Exhibit B, Pricing List. The Owner's obligation to pay Company cannot exceed the specified amount(s). It is expressly understood that the entire work defined in Exhibit A must be completed by the Company and it shall be the Company's responsibility to ensure that hours and tasks are properly budgeted so the entire project is completed for the specified amount(s).
- B. The maximum fee for any one animal is \$150 unless authorized by the OWNER in writing prior to proceeding.
- C. The estimated annual amount of this contract is \$95,000.
- D. The VCA, as prerequisite to the obligation on the part of the OWNER for payment of services provided herein, shall submit monthly invoices describing the services performed during the preceding month. Invoices shall identify the animal treated, service performed, specific diagnosis and all associated costs.
- E. All payments shall be due within 30 calendar days after receipt of the invoice.
- F. Invoices shall be submitted to the OWNER within 30 days of treatment.
- G. All price adjustment requests shall be submitted, at least 30 calendar days in advance, to the Las Vegas Metropolitan Police Department, Purchasing & Contracts Unit, Attn: Purchasing Manager, 400 S. Martin Luther King Blvd, Las Vegas, Nevada 89106. Price increases shall not be retroactive

B-4 INVOICES

(a) The Company shall submit an invoice to the Owner in accordance with the payment schedule set forth in Paragraph B-3 (Compensation) above and must be accompanied by backup material. The Company shall furnish monthly invoices on or about the first day of each month. The Owner shall pay the invoiced amount net 30 Days after the date of receipt of a correct invoice. Company understands and agrees that net 30 Days in this case means that the check is cut at the Owner the first business day after thirty (30) Days after the invoice date, and additional days must be allowed for mailing. All invoices should identify the following items:

1. Owner contract number and contract name;
2. The date of the invoice;
3. Company's invoice number;

4. Company name;
5. Complete address (including street, city, state and zip code);
6. Telephone number;
7. Contact person;
8. Itemized description of services performed and/or products delivered (including quantities) or services rendered (including performance dates covered), referencing the contract item in attached Exhibit B (Pricing List);
9. Itemized pricing and total amount due (excluding Sales and Use Tax); Rate for Service Provided
10. Date of Service
11. The associated Owner purchase order number;
12. Company's tax identification number;
13. Owner contract number

Owner shall subtract from any payment made to Company all damages, costs and expenses caused by Company's negligence, resulting from or arising out of errors or omissions in Company's work products, which have not been previously paid to Company.

Upon reconciliation of all errors, corrections, credits, and disputes, payment to the Company will be made in full within net 30 Days as specified above. Invoices received without a valid purchase order number will be returned unpaid. The Company shall submit an original invoice to:

Las Vegas Metropolitan Police Department
ATTN: Accounts Payable
400B South Martin Luther King Boulevard
Las Vegas, Nevada 89106

(b) A representative of the Company shall sign and certify the invoice in the following manner: "I hereby certify, under penalty of perjury, that the above invoice is just and correct and that reimbursement for such expenses listed on this invoice has not been previously received from the Owner nor any other source."

(c) The Company shall forward a copy of the original invoice to the Owner's Project Manager identified in Paragraph D-2 (Project Manager / Company Representative).

(d) Upon termination of this Contract, the Company shall submit a statement summarizing previous billings rendered and payments received and providing any other information necessary for contract close out. Within 30 Days after receipt thereof, the Owner shall pay the Company all amounts due.

(e) The Owner may withhold or, on account of subsequently discovered evidence, nullify the whole or part of any payment made by the Owner to the Company to such extent as may be necessary to protect the Owner from loss or damage, or to compensate the Owner, caused by, resulting from or arising out of, including but not limited to, any failure to perform Services in accordance with this Contract.

(f) With respect to the unpaid amount of any undisputed invoice not paid in full as specified herein, no penalty may be charged by Company to Owner.

B-5 CONTRACT TERM

(a) NOTICE TO PROCEED

The parties to this Contract understand and agree that execution of this Contract by the Owner is not a Notice-To-Proceed with the Scope of Work of this Contract. A Notice-To-Proceed will be given by the Owner to the Company after receipt and approval of all insurance requirements specified in this Contract or equivalent protection.

(b) INITIAL TERM

The initial contract term period is from December 1, 2019 to November 30, 2020, unless extended through mutual written agreement by both parties.

If the Company's performance of services is delayed or if the Company's sequence of tasks is changed (and was not at the request of the Owner), Company shall notify the Owner's Project Manager in writing of the reasons for the delay and prepare a revised schedule for performance of services. The revised schedule is subject to the Owner's written approval.

(c) **CONTRACT RENEWALS**

The Owner has the option to renew this Contract for an additional five, one-year periods from its expiration date.

(d) **CONTRACT EXTENSION**

Owner reserves the option to temporarily extend this Contract for periods up to 180 calendar days from its expiration date for any reason.

SECTION C – SCOPE OF WORK

C-1 SCOPE OF WORK

The Company shall provide the materials, equipment, products and labor to accomplish, produce and deliver the products and perform the services specified in Exhibit A (Scope of Work). The Company shall not provide services beyond the scope of this Contract unless those services and compensation for those services have been defined in an approved amendment to this Contract.

SECTION D – SPECIAL CONDITIONS

D-1 LEGAL NOTICE

(a) All legal notices required pursuant to the terms and conditions of this Contract shall be in writing, unless an emergency situation dictates otherwise. Any notice required to be given under the terms of this Contract shall be deemed to have been given when:

- (i) received by the party to whom it is directed by hand delivery or personal service, or
- (ii) transmitted by facsimile with confirmation of transmission, or
- (iii) transmitted by electronic signature process with Certificate of Completion, or
- (iv) sent by U.S. mail via certified mail-return receipt requested at the following addresses:

FOR THE OWNER:

Las Vegas Metropolitan Police Department
Attn: Manager, Purchasing Unit
400B South Martin Luther King Boulevard
Las Vegas, Nevada 89106

FOR THE COMPANY:

Pet's, Rx, Inc., dba VCA Decatur Animal Hospital
Attn: Dr Michelle Hoyt
1117 N. Decatur Boulevard
Las Vegas, Nevada 89108
Phone: (702) 646-3777 Fax: (702) 646 4729
Email: Michelle.hoyt@vcahospitals.com

(b) The parties shall provide written notification of any change in the information stated above.

(c) An original signed copy, via U. S. Mail, shall follow facsimile transmissions.

(d) For purposes of this Contract, legal notice shall be required for all matters involving potential termination actions, litigation, indemnification, and unresolved disputes. This does not preclude legal notice for any other actions having a material impact on the Contract.

- (e) Routine correspondence should be directed to the Project Manager or the Company Representative, as appropriate.

D-2 OWNER'S PROJECT MANAGER / COMPANY REPRESENTATIVE

The Owner designates the K9 Lieutenant as the Project Manager for this Contract. The Owner will provide written notice to the Company, should there be a delegation of any or all responsibilities to appropriate staff members or a subsequent Project Manager change, along with the effective date. The Project Manager will be the Company's principal point of contact at the Owner regarding any matters relating to this Contract, will provide all general direction to the Company regarding Contract performance, review the services performed for compliance with the terms of this Contract, and will provide guidance regarding the Owner's goals and policies. The Project Manager is not authorized to waive or modify any material scope of work changes or terms of the Contract. The Owner agrees that its officers and employees and consultants will cooperate with Company in the performance of services under this Contract and will be available for consultation with Company at reasonable times with advance notice as to not conflict with other responsibilities.

The Company designates Dr. Michelle Hoyt as the Company Representative for this Contract. The Company will provide written notice to the Owner, should there be a subsequent Company Representative change. All of the services specified by this Contract shall be performed by the Company Representative, or by the Company's associates and employees under the personal supervision of the Company Representative. The Owner has the right to assume that the Company Representative has full authority to act for the Company on all matters arising under or relating to this Contract. Should the Company Representative of the Company be unable to complete their responsibility for any reason, the Company shall replace him or her or them with a qualified person or subconsultant with the Owner's approval. If Company fails to make a required replacement within 30 Days, Owner may terminate this Contract for default.

D-3 EMERGENCY BUSINESS SERVICES

During a natural disaster, or homeland security event, there may be a need for the LVMPD to access your business for products or services 24 hours per day, seven days a week and 365 days a year (24/7/365). The need could be for pick up or delivery.

For this purpose a primary and secondary emergency point of contact (POC) name and phone number is required from the Successful Bidder. It is critical to the LVMPD that the Successful Bidder's emergency POC information remains current. Project Manager specified ABOVE must be contacted by email with any change to a Successful Bidder's POC names or phone numbers.

All products or services provided to meet an emergency phone request are to be supplied at the contract prices, terms and conditions. The only exception is that the Successful Bidder may provide an emergency fee (pricing) for after-hours emergency opening of the business in the Pricing Exhibit.

D-4 SECURITY

All Successful Bidder's employees working on this Contract may be subject to Owner background checks and the collection of fingerprints. Anyone with a background history showing a conviction for a felony, theft history of any kind, sex offense history, or any crime involving moral turpitude, illegal drug or narcotics use, sale or possession, or anyone showing a felony charge pending, or who has any outstanding warrants of any type, including misdemeanor traffic or felony warrants, may be subject to arrest, and will not be allowed to work under this Contract.

Successful Bidder shall be responsible for all personnel engaged in the work to ensure that said personnel comply with all security requirements imposed by Owner. It shall be Successful Bidder's responsibility to ensure that all equipment and workmen do not enter LVMPD facilities except as required during the progress of the work. Successful Bidder shall follow the directions given by Owner concerning the security policies, procedures, rules, regulations and methods of access and any other restrictions applicable to work within LVMPD facilities, or with LVMPD data and information.

- (a) Listing of Personnel

Within five calendar days after written notification of award and before the Contract start date, Successful Bidder shall provide Owner's Project Manager with the name, title, telephone number, and email of the Successful Bidder's point of contact and a list of all personnel information who will be working on the Contract, including but not limited to, name, date of birth, social security number for each Owner, employee, officer or agent of the company.

(b) Removal or Addition of Employee

- (c) Successful Bidder agrees to work closely with Owner to ensure use of acceptable personnel. Owner reserves the right to request removal of any Successful Bidder's employee for any reason or no reason, should such action be considered necessary to the best interests of the Owner. Successful Bidder is permitted to add/replace personnel only after Owner is provided written notice and compliance with provisions in the General Conditions.

(d) Backup Staff

The Successful Bidder shall provide sufficient backup staff to cover absenteeism or extend existing work force hours to compensate absent staff. The backup staff shall adhere to the same background and security screenings as regular staff. The Owner reserves the right to request additional backup staff if deemed necessary.

D-5 LOGO, ARTWORK AND COPYRIGHT USE

Logo, artwork and copyright use owned by LVMPD. Any logo, artwork and copyright owned by LVMPD may only be used in association and within the scope requirements of its use pursuant to this Contract (and such use by the Successful Bidder shall be subject to the prior approval of LVMPD), but not for any other purpose, unless written approval is given by the LVMPD.

D-6 WARRANTY

(a) SERVICES

The Company warrants that the services shall be performed in full conformity with this Contract, with the professional skill and care that would be exercised by those who perform similar services in the commercial marketplace, and in accordance with accepted industry practice. In the event of a breach of this warranty and/or in the event of non-performance and/or failure of the Company to perform the services in accordance with this Contract, the Company shall, at no cost to the Owner, re-perform or perform the services so that the services conform to the warranty.

D-7 INTELLECTUAL PROPERTY RIGHTS

All deliverables produced under this Contract, as well as all data, notes, and documentation collected on behalf of the Owner are exclusively the property of the Owner. All materials, information, artwork, electronic design files, and documents, whether finished, unfinished, or draft, developed, prepared, completed, or acquired by Company relating to the services to be performed for this Contract and not otherwise used or useful in connection with services previously rendered or services to be rendered by Company to parties other than Owner shall become the property of Owner and shall be delivered to Owner's representative upon completion of each task, completion or termination of this Contract, whichever occurs first. Company shall not be liable for damages, claims, and losses arising out of any reuse of any work products on any other project conducted by Owner. Owner shall have the right to reproduce all documentation supplied pursuant to this Contract.

The Company shall not be liable for damages, claims or losses arising out of any reuse of any management methods or procedures, materials, information, products, work, documents, drawings, maps, plans, specifications, reports or other data or material as specified herein on this (in the event of termination) or any other project without the Company's prior written permission.

D-8 LICENSES / REGISTRATIONS

During the entire performance period of this Contract, the Company shall maintain all federal, state, and local licenses, certifications and registrations applicable to the work performed under this Contract, including maintaining an active applicable business license.

D-9 REVIEW COMMENTS

The services performed by Company under this Contract shall be subject to periodic review by the Owner's Project Manager. The Owner's Project Manager may delegate any or all of the its responsibilities under this Contract to appropriate staff members, and shall so inform Company by written notice before the effective date of each delegation. The review comments of Owner's Project Manager or authorized representative(s) may be reported in writing as needed to Company. It is understood that Owner's Project Manager or its authorized representative's review comments do not relieve Company from the responsibility for the professional and technical accuracy of all work delivered under this Contract. The comments of the Owner's Project Manager or authorized representative may be reported to Company by the Owner's Project Manager. It is understood that the comments made by Owner's Project Manager do not relieve Company from the responsibility for the professional quality of all work delivered under this Contract. To prevent an unreasonable delay in the Company's work, the Owner's Project Manager will endeavor to examine all reports and other documents and will render decisions and advise the Company in a timely manner to avoid unreasonable delay.

D-10 DATA AVAILABLE

(a) Owner shall, without charge, furnish to or make available for examination or use by Company as it may request, any data which Owner has available, including as examples only and not as a limitation:

- (i) Copies of reports, surveys, records, and other pertinent documents.
- (ii) Copies of previously prepared reports, job specifications, surveys, records, ordinances, codes, regulations, other documents, and information related to the services specified by this Contract.

(b) Owner shall assist Company in obtaining data on documents from public officers or agencies, and from private citizens and business firms, whenever such material is necessary for the completion of the services specified by this Contract.

(c) Company will not be responsible for accuracy of information or data supplied by Owner or other sources to the extent such information or data would be relied upon by a reasonably prudent Company.

(d) The Company shall return any original data provided by the Owner.

D-11 LIQUIDATED DAMAGES

Company acknowledges that the Owner is damaged when Company fails to perform services or supply proof of insurance or performance bond, if applicable, according to the requirements detailed in Exhibit A (Scope of Work). Time is of the essence for this Contract and Company acknowledges that the Owner is damaged when the Company fails to complete the work within the time specified in the Contract, or with such additional time as may be granted by formal Amendment. Damages include, but are not limited to damage to the Owner reputation and perception in the community and Owner costs to provide replacement services.

(a) For non-performance or non-timely performance of the requirements, as detailed in Exhibit A, Scope of Work, Company shall pay to the Owner \$100.00 in liquidated damages per Day, per documented incident, together with any other increased costs incurred by the Owner in completing the work.

(b) For non-performance or non-timely performance of the Owner Insurance requirements, as detailed in Exhibit C (Insurance Requirements) of this Contract, Company shall pay to the Owner \$100.00 in liquidated damages per Day for per delayed submission of current documents, together with any other increased costs incurred by the Owner in obtaining any additional insurance.

(c) The Owner shall notify Company in writing of non-performance or non-timely performances and shall reasonably document all claims for liquidated damages.

D-12 PRICE ADJUSTMENT REQUESTS

Commencing on date of award, prices shall not be subject to change during the initial contract term, and prices must remain firm. Thereafter, there may be price adjustments for each renewal period (Price Adjustment Period or PAP), based on the appropriate method(s) specified below. All price adjustment requests, shall include the original bid price(s), new requested price(s), and must include suitable proof of the price adjustment justification (i.e., copy of the applicable index showing price adjustment percentage), shall be submitted at least 60 calendar days in advance to the Las Vegas Metropolitan Police Department, Purchasing Unit, Attention: Beth Hurley Purchasing, 400B South Martin Luther King Boulevard, Las Vegas, Nevada 89106. Price increases shall not be retroactive. A price adjustment can only occur if the Successful Bidder has been notified in writing of LVMPD's approval of the new price(s). Only one written price adjustment request(s) will be accepted from the Successful Bidder per PAP.

The appropriate method(s) to calculate a price adjustment is/are as follows:

Consumer Price Index (CPI)

Series Id: CUUR0000SS62054,CUUS0000SS62054

Not Seasonally Adjusted

Series Title: Veterinarian services in U.S. city average, all urban consumers, not seasonally adjusted

Area: U.S. city average

Item: Veterinarian services

Base Period: DECEMBER 1997=100

Print out of current past 10 years:

EXAMPLE: Price adjustment shall be calculated by applying the simple percentage model to the applicable index data. This method is defined as subtracting the base period index value (at the time of initial award) from the index value at time of calculation (latest version of the applicable index published as of the date of request for price adjustment), divided by the base period index value to identify percentage of change, then multiplying the percentage of change by 100 to identify the percentage change. Formula is as follows:

Current Index – Base Index / Base Index = % of Change
 % of Change x 100 = Percentage Change

Index Calculation Example:

Index for current period	232.945
Less index for base period	229.815
Equals index point change	3.130
Divided by base period index	229.815
Equals	0.0136
Result multiplied by 100	0.0136 x 100
Equals percent change	1.4%

- (i) Owner shall receive the benefit of a price decrease to any line item at any time during the PAP if the decrease exceeds 10 percent of the current Contract price. If, at the point of exercising the price adjustment provision, market media indicators show that the prices have decreased more than the aforementioned percentage and the Company has not passed the decrease on to the Owner, the Owner reserves the right to place the Company in default, terminate the Contract, and such actions will reflect adversely against the Company in determining the responsibility and non-responsibility of the Company in future contract opportunities.

- (ii) Should the above-referenced price index be discontinued or otherwise no longer published by the publishing organization, a similar index may be mutually agreed to in writing by both parties.
- (iii) Suitable proof shall include a print-out out of the above-referenced index and calculated increase.

(b) **PRICE ADJUSTMENT REQUEST – DRASTIC MARKET CONDITIONS**

Should drastic market conditions occur which dictate a significant price increase of any line item(s) during the term of the Contract, the Owner may consider these increases in addition to the allowed PAP increase, providing the Company submits written documentation and suitable proof by line item to Owner requesting permission and explaining in detail the unforeseen circumstances predicated the request to increase pricing. Suitable proof shall be required as defined above. A significant price increase means a change in price from the date of the commencement of the contract, to the date of performance by an amount exceeding 10 percent. General industry correspondence in regards to market conditions are not suitable proof.

D-13 DISCLOSURE OF OWNERSHIP

VCA agrees to provide the information on the attached "Disclosure of Ownership/Principals" form (Exhibit D) prior to any contract award by the Fiscal Affairs Committee or its designee.

D-14 SURVIVAL

The terms and conditions of this Contract regarding confidentiality, payment, warranties, liability and all others that by their sense and context are intended to survive the execution, delivery, performance, termination or expiration of this Contract survive and continue in effect.

D-15 ORDER OF PRECEDENCE

In the event of a conflict between the specific language set forth in Sections B through E of this Contract and any Attachment or Exhibit set forth in Section F, the specific language in Sections B through E shall prevail. Any exception to this order of precedence will be addressed through specific language elsewhere in Sections B through E.

SECTION E – GENERAL PROVISIONS

E-1 DISPUTES

(a) For each claim or dispute arising between the parties under this Contract, the parties shall attempt to resolve the matter through escalating levels of management.

i. Initial Actions The parties shall first attempt to resolve the dispute informally in meetings or communications between the Company's Project Manager and the Owner's Project Manager. If the dispute remains unresolved 15 Days after it first arises, the Company may request that the Owner's Project Manager issue a recommended decision on the matter in dispute. The Owner's Project Manager shall issue the recommended decision in writing and provide a copy to the Company.

ii. Decisions The recommended decision of the Owner's Project Manager shall become final unless, within 15 Days of receipt of such recommended decision, the Company submits a written request for review to the Owner's Purchasing Manager. In connection with any such review, the Company and the Owner's Project Manager shall be afforded an opportunity to be heard and to offer evidence on the issues presented.

iii. Further Resolution If the dispute remains unresolved after review by the Owner's Purchasing Manager, Company and Owner shall promptly consult with one another and make diligent, good faith efforts to resolve the disagreement, by negotiation by individuals who were not directly involved in the drafting of the original Contract, preferably individuals in the C-Suite.

iv. Requirement to Proceed Pending final resolution of a dispute under this section, the Company shall proceed diligently with performance in accordance with the Contract and the Project Manager's recommended decision, without prejudice to its position in the dispute.

(b) The laws of the State of Nevada shall govern this Contract and the venue for purposes of litigation shall be in a competent jurisdiction in Clark County, Nevada. If litigation is required as a result of this Contract, the prevailing party will be entitled to its reasonable costs and attorney fees.

(c) If during the term of this Contract, there are any changes or new laws, ordinances, statutes, rules or regulations not known or foreseeable at the time of signing this Contract which become effective and which affect the cost or time of performance of the Contract, the Company shall immediately notify the Owner in writing and submit detailed documentation of such effect in terms of both time and cost of performing the Contract. The Owner shall review the cost impact of such changes, and make an equitable adjustment in compensation for an increase or decrease in time, labor, materials and fees. If any discrepancy or inconsistency shall be discovered between this Contract and any law, ordinance, regulation, order or decree, Company shall immediately report the same in writing to Owner who will issue such instructions as may be necessary.

(d) All rights and remedies of LVMPD may be exercised, not exercised, waived, modified, limited or suspended by LVMPD in its sole discretion, and nothing in the Contract shall be deemed to require LVMPD to exercise its remedies in any order and in no event shall Company have any right (any such right that does exist being waived by Company) to require LVMPD to exhaust any or all of its rights or remedies prior to instituting other rights and remedies.

In all other civil actions (other than those claims associated with progress payments), the LVMPD, Contractor, and Subcontractors are responsible for their own attorney's fees and costs. LVMPD shall not be liable for fees or costs as an element of consequential damages.

E-2 NOTICE OF DELAY

Should the timely performance of this Contract be jeopardized by the non-availability of Owner provided personnel, data, or equipment, the Company immediately shall notify the Owner in writing of the facts and circumstances that are contributing to such delay however, such notice shall not relieve the Company from any existing obligations regarding performance or delivery.

Upon receipt of this notification, the Owner will advise the Company in writing of the action which will be taken to remedy the situation.

E-3 SUSPENSION

Owner may suspend performance by Company under this Contract for such period of time as Owner, at its sole discretion, may prescribe by providing written notice to Company at least 10 Days prior to the date on which Owner wishes to suspend. Upon such suspension, Owner shall pay Company its compensation, based on the percentage of the Project completed and earned until the effective date of suspension, less all previous payments. Company shall not perform further work under this Contract after the effective date of suspension until receipt of written notice from Owner to resume performance.

In the event Owner suspends performance by Company for any cause other than the error or omission of the Company, for an aggregate period in excess of 30 Days, Company shall be entitled to an equitable adjustment of the compensation payable to Company under this Contract to reimburse Company for additional costs occasioned as a result of such suspension of performance by Owner based on appropriated funds and approval by the Owner.

E-4 TERMINATION FOR CONVENIENCE

The Owner shall have the right at any time, including during implementation, to terminate further performance of this Contract, in whole or in part, for any reason whatsoever (including no reason) whenever the Owner determines that such termination is in the best interest of the Owner. Any such termination shall be effected

by delivery to the Company of a written notice of termination, specifying the extent to which performance of work under this Contract is terminated and the date upon which such termination becomes effective. Except as otherwise provided, settlement of claims by the Company or recoveries by the Owner under this termination for convenience clause shall be in accordance with the legal rights and liabilities of the parties to said Contract.

E-5 TERMINATION FOR CAUSE

If the Company fails to perform in accordance with the agreed terms, conditions, or warranties applicable to this Contract, LVMPD may **immediately** terminate all or part of the Contract upon written notice of intent to terminate without any liability by LVMPD to the Successful Bidder. In the event of termination for cause, LVMPD may cancel any delivery or service and purchase the product or service elsewhere on such terms or in such manner as LVMPD may deem appropriate and Successful Bidder shall be liable to LVMPD for any excess cost or other expenses incurred by LVMPD.

E-6 INSURANCE

The Company shall obtain and maintain, at its own expense, during the entire term of the Contract, the coverage(s) specified in attached Exhibit C (Insurance Requirements). The Company shall comply with the terms and conditions set forth in attached Exhibit C (Insurance Requirements) and shall include the cost of the insurance coverage in its price(s).

E-7 INDEMNITY

The Company agrees to protect, defend, indemnify and hold the Owner, its officers, employees and agents, free and harmless from and against any and all losses, penalties, damages, settlements, costs, charges, professional fees or other expenses or liabilities of every kind and character arising out of or relating to any and all claims, liens, demands, obligations, actions, proceedings or causes of action of every kind and character (hereinafter collectively "claims") in connection with or arising directly or indirectly out of the Contract or the performance hereof by the Company or any subcontractor. Without limiting the generality of the foregoing, any and all such claims, relating to personal injury, infringement of any patent, trademark, copyright (or application for any thereof) or of any other tangible or intangible personal or property right, or actual or alleged violation of any other tangible or intangible personal or property right, or actual or alleged violation of any applicable statute, ordinance, administrative order, rule or regulation, or decree of any court, shall be included in the indemnity hereunder. The Company further agrees to investigate, handle, respond to, provide defense for, and defend any such claims, at its sole expense and agrees to bear all other costs and expenses related thereto, whether or not it is alleged or determined that the Company was negligent, and without regard to whether such claim is groundless, false, or fraudulent.

E-8 PATENT INDEMNITY

The Company shall advise the Owner of any impending patent suit and provide all information available. The Company shall defend any suit or proceeding brought against the Owner based on a claim that any product, or any part thereof, furnished under this Contract, constitutes an infringement of any patent; and, the Company shall pay all damages and costs awarded therein, excluding incidental and consequential damages, against the Owner. In case said product, or any part thereof, is in such suit held to constitute infringement and use of said product or parts is enjoined, the Company shall, at its own expense and at its option, either procure for the Owner the right to continue using said product or part, or replace same with non-infringing product, or modify it so it becomes non-infringing.

E-9 SUCCESSORS AND ASSIGNS

- (a) After award, this Contract may not be assigned to any other person (or company) without the consent of the LVMPD, except to a financial institution authorized to do business in the state of Nevada. Such consent shall not be withheld unreasonably. Any attempt to assign this Contract or transfer any rights, duties or delegate responsibilities of the Contract or a portion thereof without such prior written consent

of the Owner shall be null and void. Any assignment or delegation shall not relieve any party of its obligations under this Contract. This provision is separate and apart from the provisions concerning subcontracting set forth in Section E-16 (Subconsultants/Subcontractors).

- (b) After award, this Contract or any portion thereof may not be assigned to any person (or company) who was declared by the LVMPD to be a non-responsible person (or company) to perform the particular company.
- (c) The provisions of this section do not apply to the assignment of the Contract by virtue of the acquisition of the Successful Bidder by a person (or company) that purchases the full assets and liabilities of the Successful Bidder awarded the Contract.

E-10 WAIVER

Waiver of any of the terms of this Contract shall not be valid unless it is in writing signed by each party. The failure of the Owner to enforce any of the provisions of this Contract, or to require performance of any of the provisions herein, shall not in any way be construed as a waiver of such provisions or to affect the validity of any part of this Contract, or to affect the right of the Owner to thereafter enforce each and every provision of this Contract. Waiver of any breach of this Contract shall not be held to be a waiver of any other or subsequent breach of this Contract.

E-11 TAXES

The Owner is exempt from paying Sales and Use Taxes under the provisions of Nevada Revised Statutes 372.325(4), and Federal Excise Tax, under Registry Number 88-6000028. The Company shall pay all taxes, levies, duties and assessments of every nature and kind, which may be applicable to any work under this Contract. The Company shall make any and all payroll deductions required by law. The Company agrees to indemnify and hold the Owner harmless from any liability on account of any and all such taxes, levies, duties, assessments and deductions.

E-12 COMPLIANCE WITH LAWS

(a) The Company, in the performance of the obligations of this Contract, shall comply with all existing and future applicable laws, rules and regulations and orders of all Federal State and local governmental authorities having jurisdiction over the performance of this Contract including, but not limited to, the Federal Occupational Health and Safety Act, and all state and federal laws prohibiting and/or relating to discrimination by reason of race, color, sex, age, sexual orientation, disability, religion or national origin, gender identity or expression, or any other protected status. Upon request, the Company shall furnish to the Owner written confirmation of its compliance with all such laws, rules, orders and regulations. Company acknowledges that the Owner has an obligation to ensure that public funds are not used to subsidize private discrimination and Company recognizes that if they or their subcontractors are found guilty of discrimination by an appropriate authority for refusing to hire or do business with an individual or company with protected status, the Owner may declare the Company in breach of the Contract, terminate the Contract and designate the Company as non-responsible.

(b) The Company, and its staff assigned to this Contract, must possess all the applicable State of Nevada business and professional licenses and/or certifications as is required to practice and provide the contracted services. Company shall provide proof of active status of any license and/or certifications within the time specified in

(c) Owner's request.

(d) In accordance with the Immigration Reform and Control Act of 1986, the Company agrees that it will not employ unauthorized aliens in the performance of this Contract.

(e) If during the term of this Contract, there are any changes or new laws, ordinances, statutes, rules or regulations not known or foreseeable at the time of signing this Contract which become effective and which affect the cost or time of performance of the Contract, the Company shall immediately notify the Owner in

writing and submit detailed documentation of such effect in terms of both time and cost of performing the Contract. The Owner shall review the cost impact of such changes, and make an equitable adjustment in compensation for an increase in time, labor, materials and fees, according to the procedures in Section E-26 (Modification/Amendment).

(f) If any discrepancy or inconsistency shall be discovered between this Contract and any law, ordinance, regulation, order or decree, Company shall immediately report the same in writing to the Owner who will issue such instructions as may be necessary.

(g) The Goods and/or services shall comply with the (ADA) as amended to date. The Company shall provide the Goods and/or services in compliance with the Americans with Disabilities Act and the rules and regulations promulgated there under and shall immediately notify the Owner of any conflicts between the contract documents and the Act or the rules and regulations promulgated there under.

E-13 AUDIT OF RECORDS

(a) The performance of this Contract by the Company is subject to review by the Owner to insure contract compliance. The Company agrees to provide the Owner any and all information requested that relates to the performance of this Contract. All requests for information will be in writing to the Company. Time is of the essence during the audit process. Failure to provide the information requested within the timeline provide in the written information request may be considered a material breach of Contract and be cause for suspension and/or termination of the Contract.

(b) The Company shall establish and maintain an accounting system and records that properly accumulate and segregate incurred Projects costs. The Company and its subcontractors accounting system(s) shall conform to Generally Accepted Accounting Principles (GAAP) and procedures and to retain all records and supporting documentation applicable to this Contract for reimbursement payment vouchers or invoices, for a period of three years after completion of this Contract and any subsequent extensions thereof, or the date of resolution of litigation or claims arising under this Contract, whichever is later. All records subject to audit findings shall be retained for three years after such findings have been resolved. In the event the Company goes out of existence, the Company shall turn over to the Owner all of its records relating to this Contract to be retained by the Owner for the required period of time.

(c) The Company shall make available to the Owner, or its designee, the State, the United States Controller General, or any other duly authorized representative of the Federal or State Government, any books, documents, subcontracts, papers, records, accounting records, and other evidence relating the performance of this Contract for audits, examinations, or other reviews and copies thereof shall be furnished by Company, if requested. The Company agrees to permit the Owner or the Owner's Project Manager(s), or any of the aforementioned parties, to inspect and audit its records and books relative to this Contract at any time during normal business hours and under reasonable circumstances and to copy and/or transcribe any information that the Owner desires concerning Company's operation hereunder. The Company further understands and agrees that said inspection and audit would be exercised upon written notice. If the Company or its records and books are not located within Clark County, Nevada, and in the event of an inspection and audit, Company agrees to deliver the records and books or have the records and books delivered to the Owner or the Owner's Project Manager(s) at an address within Clark County, Nevada as designated by the Owner. If the Owner or the Owner's Project Manager(s) find that the records and books delivered by the Company are incomplete, the Company agrees to pay the Owner or the Owner's representative(s)' costs to travel (including travel, lodging, meals, and other related expenses) to the Company's offices to inspect, audit, retrieve, copy and/or transcribe the complete records and books. The Company further agrees to permit the Owner or the Owner's Project Managers, or any of the aforementioned parties, to inspect and audit, as deemed necessary, all records of this project relating to finances, as well as other records including performance records that may be required by relevant directives of funding sources of the Owner.

(d) If, at any time during the term of this Contract, or at any time after the expiration or termination of the Contract, the Owner or the Owner's Project Manager(s) finds the dollar liability is less than payments made by the Owner to the Company, the Company agrees that the difference shall be either: (1) repaid immediately by the Company to the Owner; or (2) at the Owner's option, credited against any future billings due the Company.

E-14 INDEPENDENT CONTRACTOR**(a) STATUS OF COMPANY**

In the performance of services under this Contract, the Company, any other person employed by it, and any of its subcontractors or suppliers shall be deemed to be an independent contractor and not an agent or employee of the Owner and they shall not be entitled to, nor will the Owner provide any of the benefits or rights afforded to employees of Owner, including, but not limited to, sick leave, vacation leave, holiday pay, Public Employees Retirement System benefits, or health, life, dental, long-term disability or workers compensation insurance benefits. Owner will not provide or pay for any liability or medical insurance, retirement contributions or any other benefits for or on behalf of Company or any of its officers, employees or other agents. The Owner shall hold the Company as the sole responsible party for the performance of this Contract. The Company has or will retain such employees as it may need to perform the services required by this Contract. Such employees shall not be employed by the Owner. The Company shall be liable for the actions of any person, organization or corporations with which it subcontracts to fulfill this Contract. The Company has and shall retain complete control over the employment, direction, compensation and discharge of all persons employed by Company and all of its subcontractors in the performance of the services of this Contract. Nothing contained in this Contract or any subcontract awarded by the Company shall create a partnership, joint venture or agency with the Owner. Neither party shall have the right to obligate or bind the other party in any manner to any third party. The Company shall be solely responsible for, and shall indemnify, defend and hold Owner harmless from all matters relating to the payment of its employees, including but not limited to, compliance with social security, withholding and all other wages, salaries, benefits, taxes, demands, and regulations of any nature whatsoever.

(b) PAYMENT OF TAXES

The Company agrees to pay all required taxes on amounts paid to the Company under this Contract under this Contract and to indemnify, defend and hold the Owner harmless from any and all taxes, assessments, penalties and interest asserted against the Owner by reason of the independent contractor relationship created by this Contract or by reason of the Company's failure to pay taxes when due. In the event that the Owner is audited by any Federal or State agency regarding the independent contractor status of the Company and the audit in any way fails to sustain the validity of an independent contractor relationship between the Owner and the Company, then the Company agrees to reimburse the Owner for all costs, including but not limited to, accounting and attorney's fees, arising out of such audit and any appeals relating thereto.

(c) WORKERS COMPENSATION COMPLIANCE

The Company shall fully comply with the workers compensation laws applicable to the Company and its employees. The Company further agrees to indemnify, defend, and hold the Owner harmless from any failure of the Company to comply with applicable workers compensation laws. The Owner shall have the right to offset against any amounts otherwise due to the Company under this Contract any costs incurred by the Owner resulting from any such failure to comply or resulting from Company's failure to promptly pay to the Owner any reimbursement or indemnification arising under this section.

E-15 SUBCONSULTANTS / SUBCONTRACTORS

- (a) The Company shall submit within five Days after the Owner's request and on Owner's form for review and documentation purposes, a list of any and all subconsultants/subcontractors with contact names and telephone numbers, description of work they will be performing, estimated percentage of total dollars and if they hold designations as Minority-owned Business Enterprise (MBE), Women-owned Business Enterprise (WBE), Small Business Enterprise (SBE), Emerging Small Business (ESB) or another recognized certification. The Company shall be liable for the actions of any person, organization or corporations with which it subcontracts to fulfill this Contract.
- (b) The Company shall furnish at the Owner's request, a copy of the Company's contract(s) with its subconsultants/subcontractors. The professional obligations of such persons shall be undertaken and performed in the interest of the Owner. All subcontracts will incorporate in full all appropriate conditions and terms as set forth in this Contract.
- (c) The Company will not enter into any subcontracts with any subconsultants/subcontractors not named in or pursuant to this Contract in writing, except with the prior written approval of the Owner's Project Manager. Any approval of a subcontract by the Owner shall not be construed as making the Owner a party to such subcontract, giving the subconsultants/subcontractors privity of contract with the

Owner, or subjecting the Owner to liability of any kind to any subconsultants/subcontractors. Approval by the Owner of Company's request to subcontract or acceptance of or payment for subcontracted work by Owner shall not in any way relieve Company of responsibility for the professional and technical accuracy and adequacy of the work. Company shall be and remain liable for all damages to Owner caused by negligent performance or non-performance of work under this Contract by Owner's subcontractor(s).

- (d) The compensation due under Section B-3 (Compensation) shall not be affected by Owner's approval of Company's request to subcontract.

E-16 FLOWDOWN

Company shall provide that its contracts with subcontractor(s) shall provide that the subcontractor(s) shall be bound to the Company in the same manner, and to the same extent, as the Company is bound to the Owner under this Agreement.

E-17 UNAUTHORIZED ALIENS

In accordance with the Immigration Reform and Control Act of 1986, the Company agrees that it will not employ unauthorized aliens in the performance of this Contract.

E-18 DISCRIMINATION

Company acknowledges that the Owner has an obligation to ensure that public funds are not used to subsidize private discrimination. Company recognizes that if they or their subcontractors are found guilty by an appropriate authority of refusing to hire or do business with an individual or company due to reasons of race, color, gender, ethnicity, disability, national origin, age, or any other protected status, the Owner may declare the Company in breach of the Contract, terminate the Contract, and designate the Company as non-responsible.

E-19 FORCE MAJEURE

The Company shall not be liable for any excess costs if the failure to perform the Contract arises from circumstances beyond the reasonable control and without the fault or negligence of the Company. These circumstances are limited to such causes as (1) acts of God or of the public enemy, (2) acts of governmental bodies, (3) fires, (4) floods, (5) epidemics, (6) civil disturbances, or (7) unusually severe weather; but does not include labor related incidents, such as strikes or work stoppages. Delays arising from the actions or inactions of one or more of the Company's principals, officers, employees, agents, subcontractors, vendors or suppliers are expressly recognized to be within the Company's control. The time of performance of the Company's obligations under this Contract shall be extended by such period of enforced delay; provided, however, that such reasonably extended time period shall not exceed 60 Days. If the foregoing circumstances result in a delay greater than 60 Days, the Owner may terminate the affected portion of the Contract pursuant to the terms of Paragraph E-4 (Termination for Convenience).

E-20 QUALITY OF SERVICES

- (a) The Company shall be responsible for the professional quality, technical accuracy, timely completion, and coordination of all services furnished by the Company, its subcontractors and its and their principals, officers, employees and agents under this Contract. In performing the specified services, Company shall follow practices consistent with generally accepted professional and technical standards.
- (b) It shall be the duty of the Company to assure that all services and any Good provided of its effort are technically sound and in conformance with all pertinent federal, state and local statutes, codes, ordinances, resolutions and other regulations.

- (c) The Company shall, without additional compensation, correct or revise any deficiencies, errors or omissions caused by the Company in its analysis, reports, and services. It is also understood and agreed by both parties that if any error is found, the Company will expeditiously make the necessary correction, at no expense to the Owner, except when such error is the cause of the Owner.
- (d) Company will not produce a work product which violates or infringes on any copyright or patent rights. The Company shall, without additional compensation, correct or revise any errors or omissions in its work products. Permitted or required approval by the Owner of any products or services furnished by Company shall not in any way relieve the Company of responsibility for the professional and technical accuracy and adequacy of its work. Owner's review, approval, acceptance, or payment for any of Company's services herein shall not be construed to operate as a waiver of any rights under this Contract or of any cause of action arising out of the performance of this Contract, and Company shall be and remain liable in accordance with the terms of this Contract and applicable law for all damages to Owner caused by Company's performance or failures to perform under this Contract.

E-21 ASSUMPTION OF RISK

Any services performed by the Company under this Contract which require prior review and approval by the Owner shall be at the sole risk and expense of the Company if such prior review and approval by the Owner is not obtained.

E-22 RIGHT TO ADEQUATE ASSURANCE OF PERFORMANCE

If Owner in good faith has reason to believe that Company does not intend to, or is unable to, perform or continue performing under the Contract, Owner may demand that Company promptly provide written assurance of intent to perform. Failure by Company to provide the assurance within the time specified may be the basis for terminating the Contract or for Owner to exercise any other remedy available to it under the Contract or laws.

E-23 SEVERABILITY

The invalidity, illegality, or unenforceability of any provision of this Contract or the occurrence of any event rendering any portion or provision of this Contract void shall in no way affect the validity or enforceability of any other portion or provision of this Contract. Any void provision shall be deemed severed from this Contract, and the balance of this Contract shall be construed and enforced as if this Contract did not contain the particular portion or provision held to be void. The parties further agree to amend this Contract to replace any stricken provision with a valid provision that comes as close as possible to the intent of the stricken provision. The provisions of this clause shall not prevent this entire Contract from being void should a provision which is of the essence of this Contract be determined void.

E-24 CONFORMING SERVICES

The services performed under this Contract shall conform in all respects with the requirements set forth in this Contract. The Company shall furnish the Owner with sufficient data and information needed to determine if the services performed conform to all the requirements of this Contract.

E-25 MODIFICATION/AMENDMENT

- (a) Notwithstanding any provision herein to the contrary, and pursuant to NRS 104.2306, the Owner reserves the right to request modification at any time to the:
 - i. Scope, complexity, character, frequency of the services to be performed;
 - ii. Conditions under which the work is required to be performed; such as a change in standards or a change in available base data which would require additional work;
 - iii. Duration of work if the time period for completion of services warrants such an adjustment; or
 - iv. Estimated quantities or the timing of the Company's obligations under this Contract, in whatever

manner the Owner determines, in good faith, to be reasonably necessary and to be in the best interests of the public.

If such changes cause an increase or decrease in the Company's cost or time required for performance of any services under this Contract, an equitable adjustment limited to an amount within current unencumbered budgeted appropriations for the Project will be made and this Contract shall be modified in writing accordingly.

(b) This Contract shall not be modified or amended except by the express written agreement of the parties, signed by a duly authorized representative for each party. No services for which an additional compensation will be charged by the Company shall be furnished without the written authorization of the Owner. Any other attempt to modify or amend this Contract shall be null and void and may not be relied upon by either party.

(c) Oral change order requests will not be permitted. The Company shall be liable for all costs resulting from, and/or for satisfactorily correcting, any specification change not properly ordered by written modification to the Contract and signed by the Owner.

(d) Within seven Days after receipt of the written change order request to modify the Contract, the Company shall submit to the Owner a detailed price and schedule proposal for the work to be performed or goods provided.

(e) This proposal shall be subject to negotiations between the Company and the Owner. After the proposal is accepted by the Owner, a detailed modification shall be executed in writing by both parties. Disagreements that cannot be resolved within negotiations shall be resolved in accordance with the procedures specified in Paragraph E-1 (Disputes).

E-26 ENTIRE CONTRACT

This Contract and any other documents incorporated herein by specific reference, represents the entire and integrated Contract between the Owner and the Company. This Contract supersedes all prior and contemporaneous communications, negotiations, representations, and agreements, whether oral or written, relating to the subject matter of this Contract. This Contract may not be amended, nor any provision or breach hereof waived, except in a writing signed by the parties which expressly refers to this Contract. Amendments on behalf of the Owner will only be valid if signed by the Sheriff, or as delegated to the Chief Financial Officer.

E-27 SECTION AND PARAGRAPH HEADINGS

The section and paragraph headings appearing in this Contract are inserted for the purpose of convenience and ready reference. They do not purport to define, limit or extend the scope or intent of the language of the sections and paragraphs to which they pertain.

E-28 CONFLICT OF INTEREST

(a) RESTRICTION ON PARTICIPATION

No Owner officer, employee or member of the FAC, who is authorized in such capacity and on behalf of the Owner to participate in the selection, negotiation, making, accepting or approval, or take part in negotiating, making, accepting, or approving of this Contract, payments under this Contract, or work under this Contract, shall not be directly or indirectly interested personally in this Contract or in any part hereof. No officer, employee, architect, attorney, engineer or inspector of, or for the Owner, who is authorized in such capacity and on behalf of the Owner to exercise any legislative, executive, supervisory or other similar functions in connection with this Contract, shall become directly or indirectly interested personally in this Contract or in any part hereof, any material supply contract, subcontract, insurance contract, or any other contract pertaining to this Contract.

(b) GRATUITIES PROHIBITED

The Owner's officers, employees, and members of the FAC shall neither solicit, demand, nor accept from the Company, or any of its subcontractors, any gifts, gratuities, favors or anything of monetary value. Each party represents that it is unaware of any financial or economic interest of any public officer or employee of the Owner relating to the award, modification or making of any determinations with respect to the performance of

this Contract. Notwithstanding any other provision of this Contract, if such interest becomes known, the Owner may immediately terminate this Contract for default or convenience, based on the culpability of the parties.

(c) **INTERESTS PROHIBITED**

The Company covenants that itself, its principals, employees, and its subcontractors presently have no interest, and shall not acquire any interest, direct or indirect, which would conflict in any manner or degree with the performance of services required to be provided under this Contract. The Company warrants that no person or selling agency has been employed or retained to solicit or secure this Contract upon an agreement or understanding for a commission, percentage, brokerage, or contingent fee, excepting bona fide permanent employees. For breach or violation of this warranty, the Owner shall have the right to annul this Contract without liability or in its discretion to deduct from the Contract price or consideration or otherwise recover the full amount of such commission, percentage, brokerage, or contingent fee.

(d) **REMEDIES AND PENALTIES**

In the event this Contract is terminated as provided for in this section, the Owner shall be entitled:

- i. To pursue the same remedies against the Company as it could pursue in the event of a breach of this Contract by the Company;
- ii. As a penalty, in addition to any other damages to which the Owner may be entitled by law, to exemplary damages in an amount as determined by the Owner which shall not be less than three nor more than ten times the costs incurred by the Company in providing any such gratuities to any such officer or employee; and
- iii. The rights and remedies of the Owner provided in this section shall not be exclusive and are in addition to any other rights and remedies provided by law or under any other provision of this Contract.

E-29 ORGANIZATIONAL CONFLICT OF INTEREST

(a) An Organizational Conflict of Interest (OCI) exists when a person or business entity has an unfair competitive advantage because of other activities or relationships with other persons. An OCI exists when any of the following circumstances arise:

- i. Lack of Impartiality or Impaired Objectivity When the supplier is unable, or potentially unable, to provide impartial and objective assistance or advice to the Owner due to other activities, relationships, contracts, or circumstances.
- ii. Unequal Access to Information The supplier has an unfair competitive advantage through obtaining access to non-public information during the performance of an earlier contract.
- iii. Biased Ground Rules During the conduct of an earlier procurement, the supplier has established the ground rules for a future procurement by developing the specifications, evaluation factors, or similar documents.

(b) The Company warrants that, to the best of its knowledge and belief, and except as otherwise disclosed, there are no relevant facts or circumstances, which could give rise to an OCI and that it will not, by this Contract, participate in any activity which will give rise to an OCI for a future contract. The Company understands that, if after award, an OCI is discovered, an immediate and full disclosure in writing must be made to the Owner, which must include a description of the action, which the Company has taken to propose to take to avoid or mitigate such conflicts. If an OCI is determined to exist, the Owner may, in its discretion, cancel the contract award. In the event the Company was aware of an OCI prior to the award of the Contract and did not disclose the conflict to the Purchasing Representative, the Owner may terminate the Contract for default. The provisions of this clause must be included in all subcontracts for work to be performed similar to the service provided by the Company, and the terms "contract", "supplier", and "Purchasing Representative" modified approximately to preserve the Owner's rights.

E-30 PUBLIC RECORDS

The Owner is a public agency as defined by state law. As such, it is subject to the Nevada Public Records Law (Chapter 239 of the Nevada Revised Statutes). All of the Owner's records are public records, which are subject to inspection and copying by any person (unless declared by law to be confidential). This Contract, all supporting documents, and proposals submitted under the original Request for Proposal (if applicable) are deemed to be public records, with the exception of the information in each document which meets the narrow definitions of proprietary information set forth in NRS 332.025, 332.061 and 600A.

E-31 CONFIDENTIALITY

(a) All information, including but not limited to, oral statements, computer files, databases, and other material or data supplied to the Company is confidential and privileged. The Company shall not disclose this information, nor allow to be disclosed to any person or entity without the express prior written consent of the Owner. The Company shall have the right to use any such confidential information only for the purpose of providing the services under this Contract, unless the express prior, written consent of the Owner is obtained. Upon request by the Owner, The Company shall promptly return to the Owner all confidential information supplied by the Owner, together with all copies and extracts.

(b) The confidentiality requirements shall not apply where (i) the information is, at the time of disclosure by the Owner, then in the public domain or legally available as a public record; (ii) the information is known to the Company prior to obtaining the same from the Owner; (iii) the information is obtained by the Company from a third party who did not receive the same directly or indirectly from the Owner; or (iv) the information is subpoenaed by court order or other legal process, but in such event, the Company shall notify the Owner. In such event the Owner, in its sole discretion, may seek to quash such demand.

(c) The obligations of confidentiality shall survive the termination of this Contract.

E-32 MARKETING RESTRICTIONS

The Company may not publish or sell any information from or about this Contract without the prior written consent of the Owner. This restriction does not apply to the use of the Owner's name in a general list of customers, so long as the Owner has given written prior approval to the Company to use its name on the list and the list does not represent an express or implied endorsement of the Company or its services.

E-33 LACK OF FUNDS

(a) The entering into of the Contract by the Owner is subject to its receipt of local and federal funds adequate to carry out the provisions of the Contract in full. The content of this section shall apply to the entire Contract and shall take precedence over any conflicting terms and conditions, and shall limit the Owner's financial responsibility as indicated in the subsections below.

(b) The Owner may cancel or reduce the amount of services to be rendered if the Owner determines that such action is in the Owner's best interest, or that there will be a lack of funding available for the service. Notwithstanding any other provisions of this Contract, this Contract shall terminate and Owner's obligations under it shall be extinguished at the end of the fiscal year in which the FAC fails to appropriate monies for the ensuing fiscal year sufficient for the payment of all amounts which will then become due. In any such event, the Owner will notify the Company in writing in 30 Days in advance of the date such cancellation or reduction is to be effective.

(c) Owner's total liability for all charges for services may become due under this Contract is limited to the total maximum expenditure(s) authorized in Owner's purchase order(s) to the Company.

E-34 INTERPRETATION, JURISDICTION AND VENUE

This Contract shall be subject to, governed by, and construed and interpreted solely according to the laws of the state of Nevada. The Company hereby consents and submits to the jurisdiction of the appropriate courts of

Nevada or of the United States having jurisdiction in Nevada for adjudication of any suit or cause of action arising under or in connection with this Contract, or the performance hereof, and agrees that any such suit or cause of action may be brought in any such court.

E-35 ELECTRONIC SIGNATURES

This Contract and related documents may be executed by the parties electronically which shall be deemed to be the original. Each will be considered signed when the signature of a party is delivered when it is delivered in a manner that reasonably identifies the signatory as the individual named. Such electronic signatures shall be treated in all respects as having the same effect as an original signature. By signing this Contract, the representative of the Company thereby represents that such person is duly authorized by the Company to execute this Contract on behalf of the Company and that the Company agrees to be bound by the provisions thereof.

E-36 COMPANIES THAT BOYCOTT ISRAEL

Successful Bidder certifies that, at the time it submitted its Bid, it was not engaged in, and agrees for the duration of the Contract, not to engage in, a boycott of Israel. Boycott of Israel means, refusing to deal or conduct business with, abstaining from dealing or conducting business with, terminating business or business activities with or performing any other action that is intended to limit commercial relations with Israel; or a person or entity doing business in Israel or in territories controlled by Israel, if such an action is taken in a manner that discriminates on the basis of nationality, national origin or religion. It does not include an action which is based on a bona fide business or economic reason; is taken pursuant to a boycott against a public entity of Israel if the boycott is applied in a nondiscriminatory manner; or is taken in compliance with or adherence to calls for a boycott of Israel if that action is authorized in 50 U.S.C. § 4607 or any other federal or state law.

E-37 CHANGES-FIXED PRICE SERVICES

(a) The Owner may at any time, by written order, and without notice to the sureties, if any, make changes within the general scope of this Contract in any one or more of the following:

- (i) Description of services to be performed;
- (ii) Time of performance (i.e., hours of the day, days of the week, etc.); and
- (iii) Place of performance of the services.

(b) If any such change causes an increase or decrease in the cost of, or the time required for, performance of any part of the work under this Contract, whether or not changed by the order, the Owner shall make an equitable adjustment in the Contract price, the delivery schedule, or both, and shall modify the Contract.

(c) The Company must assert its right to an adjustment under this clause within 30 Days from the date of receipt of the written order; however, if the Owner decides that the facts justify, the Owner may receive and act upon a proposal submitted before final payment of the Contract.

(d) If the Company's proposal includes the cost of property made obsolete or excess by the change, the Owner shall have the right to prescribe the manner of the disposition of the property.

(e) Failure to agree to any adjustment shall be a dispute under Paragraph E-1 (Disputes); however, nothing in this clause shall excuse the Company from proceeding with the Contract as changed.

The Company shall provide current, complete, and accurate documentation to the Owner in support of any equitable adjustment. Failure to provide adequate documentation, within a reasonable time after a request from the Owner, will be deemed a waiver of the Company's right to dispute the equitable adjustment proposed by the Owner, where such equitable adjustment has a reasonable basis at the time it is determined by the Owner.

SECTION F – LIST OF ATTACHMENTS/EXHIBITS

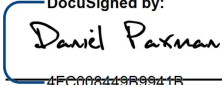
The following attachments are hereby incorporated into this Contract by reference:

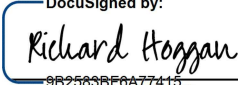
<u>Identifier</u>	<u>Title/Text Reference</u>
Exhibit A	Scope of Services
Exhibit B	Pricing List
Exhibit C	Insurance
Exhibit D	Disclosure of Ownership

IN WITNESS WHEREOF, the individuals who have affixed their signatures below certify and attest each is empowered to execute this Contract and act on behalf of and bind the party in whose name this Contract is executed the day and year first written above.

PETS RX, INC., DBA VCA DECATUR ANIMAL HOSPITAL

LAS VEGAS METROPOLITAN POLICE DEPARTMENT

By: 
4FC008449B9941B...
Dan Paxman, Regional Operations Director

By: 
8B2583BF0A77415...
Richard Hoggan
Chief Financial Officer

APPROVED AS TO FORM:
Santoro Whitmire, Ltd.

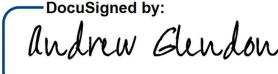
By: 
020781CE65CD79F...
Andrew J. Glendon, Esq.
Legal Counsel

EXHIBIT A - SCOPE OF WORK

GENERAL

The Las Vegas Metropolitan Police Department (OWNER) canine unit currently consists of thirty seven (37) Police Service dogs that search for and apprehend suspects, search for contraband such as drugs and explosive device, locate evidence, search for missing persons and conduct public presentations. The scope of services to be performed includes, but is not limited to: routine, preventive, and emergency veterinary medical services on an as needed basis, during normal business hours, Monday –Friday 8:00 am -6:00 pm and Saturday 8:00 am – 4:00 pm.

SCOPE OF SERVICES

VCA will be required to:

- a) Examine, evaluate, diagnose, treat and provide the necessary veterinary and health care needs of the OWNER's canine unit including emergency veterinary services on as a needed basis. VCA will prescribe, dispense, and administer prescription and non-prescription medication for treatment.
- b) Provide basic head-to-toe physicals for newly purchased canines by assessing the overall fitness for duty. This includes but is not limited to blood tests, urine analysis, fecal parasite exams, x-rays, teeth cleaning, if needed and other tests.
- c) Perform routine annual physical examinations.
- d) Provide written documentation for Veterinary treatments provided including time and date services are provided, evaluation, description of services provided, treatment plan and prescriptions.
- e) Perform all dental services or assist in its performance elsewhere if a specialist is needed.
- f) Provide standard reports (vaccines and performed procedures) as requested by the OWNER.
- g) Perform routine surgery on site.
- h) Will assist in making arrangements for all non-routine major surgeries (orthopedic or major abdominal surgeries) through the Las Vegas Veterinary Referral Center and Vet Emergency & Critical Care Hospital. OWNER will transport the canines to clinic or surgical center.
- i) Will provide emergency telephone consultation 24 hours a day, 7 days a week through a paging or answering service. VCA may refer emergency services needed after normal business hours to Las Vegas Animal Emergency Hospital or Animal Emergency Center and to other Veterinarian providers as deemed medically necessary. VCA will obtain Owner's Representative's written authorization to use a Veterinarian provider not listed in this contract on the next business day.
- j) Outsourced vet services invoices will be billed and paid by VCA. OWNER will reimburse VCA for these same charges, unless other arrangements are agreed to by VCA and OWNER.
- k) Maintain complete veterinary history on each canine including treatments, evaluation, prescriptions, and outsourced veterinarian services. Veterinary records stay at VCA place of business, but will be accessible upon request by OWNER staff.
- l) VCA will immediately euthanize seriously injured animals with no chance of recovery.
- m) Provide annual in service training to all OWNER handlers and new handlers for basic care, daily maintenance, basic trauma and drug ingestion.
- n) Provide medication for drug contact antidote kit for each canine to include but not limited to: Narcan, Midazolam, Apo morphine, SQ Fluids, Toxiban, and bandaging.
- o) Perform routine/minor surgeries (spay, neuter, laceration repair, growth removals, tail amputations, ear hematomas, etc.) and suturing on site.
- p) Provide food and supplements necessary for the nutritional needs of each of the K-9's. Provide boarding (kennel) facilities, including food, exercise and kennel services.

EXHIBIT B - PRICING LIST

Item No.	Description	Previous Price	New Price
EXAMS			
1.	Exam Well Patient	\$54.00	\$56.50
2.	Exam Medical Condition	\$54.00	\$56.50
3.	Exam Recheck	\$42.00	\$44.00
4.	Exam Ear/Skin Recheck		\$25.00
5.	Exam Eye Recheck		\$25.00
6.	Acupuncture Consult	\$75.00	\$78.50
7.	Acupuncture Recheck	\$64.00	\$67.00
8.	Bordetella 4 wk	\$16.00	\$16.75
9.	Bordetella 1yr	\$16.00	\$16.75
10.	Borrelia(Lyme) 3 wk	\$29.00	\$31.65
12.	Borrelia(Lyme) 1yr	\$29.00	\$31.65
13.	Da2p-p 3wk	\$16.00	\$16.75
14.	Da2p-p 1 yr	\$16.00	\$16.75
15.	Rattlesnake Vaccine 1 yr	\$34.65	\$36.30
16.	Leptospira Vaccine 3 wk	\$21.85	\$22.90
17.	Leptospira Vaccine 1yr	\$21.85	\$22.90
18.	Rabies 1 yr	\$16.00	\$16.75
19.	Rabies 3 yr	\$16.00	\$16.75
20.	Influenza Bivalent vx 3wk	\$27.05	\$28.35
21.	Influenza Bivalent vx 1 yr	\$27.05	\$28.35
RADIOLOGY			
22.	Abdominal 2 Views	\$184.65	\$193.50
23.	Abdominal/Thorax 2 Views	\$184.65	\$193.50
24.	Abdominal/Thorax 4 Views	\$287.65	\$301.45
25.	Extremities 2 view	\$184.65	\$193.50
26.	Follow up Radiograph	\$139.65	\$146.35
27.	GI Series 4 views	\$342.20	\$358.65
28.	Pelvis 1 view	\$159.65	\$167.30
29.	Pelvis 2 view	\$184.65	\$193.50
30.	Spine 2 view	\$184.65	\$193.50
31.	Thorax 2 view	\$184.65	\$193.50
32.	AIS Interpretation	\$75.00	\$97.80
OUTSIDE RADIOLOGIST			
33.	OS Echocardiogram	\$509.70	\$534.00
34.	OS Ultrasound Abdomen	\$442.10	\$463.50
35.	OS Ultrasound Thorax	\$442.10	\$453.50
BANDAGING			
36.	Bandage/Dress: Advanced	\$91.70	\$96.15
37.	Bandage/Dress: Rout	\$35.40	\$37.15
38.	Bandage/Dress: Postoperative	\$89.30	\$93.60
DENTAL			
39.	Dental Routine	\$199.25	\$256.00
40.	Dental Advanced	\$226.80	\$276.45
41.	Extract Deciduous Adv	\$90.80	\$95.20
42.	Extract Carnassial Adv	\$155.25	\$162.75
43.	Extract Canine Rtn	\$56.75	\$59.55
44.	Extract Carnassial Rtn	\$77.85	\$81.65
45.	Extract PM/M 2 Root Rtn	\$67.30	\$70.60
46.	Extract Incisor Adv	\$52.10	\$54.70
47.	Extract Incisor Rtn	\$26.35	\$27.65
48.	Extract PM/M 3 Root Rtn	\$67.30	\$70.60
49.	Extract Deciduous Rout	\$39.20	\$41.15
50.	Extract PM/M 1 Root Rtn	\$52.10	\$54.70
51.	Extract Canine Maj	\$135.65	\$142.20
OTHER MEDICAL			
52.	Euthanasia	\$156.75	NO CHARGE
53.	Fluid Maintenance	\$28.50	\$30.75
54.	Fluids SC	\$50.70	\$54.70
55.	IV Cath Peripheral	\$46.85	\$49.20
56.	Fluid Pump Addl	\$38.85	\$42.00

57.	Fluid Set up	\$157.40	\$169.95
58.	Fluid Set up – Surgery	\$105.80	\$113.85
59.	Anal Glands Expressed	\$30.00	NO CHARGE
60.	Anal Glands Infused	\$91.25	\$95.60
61.	Bladder Expression	\$40.45	\$42.45
62.	Blood Pressure	\$39.75	\$41.65
63.	Blood Pressure Recheck	\$29.00	\$31.40
64.	Wound/Clip/Clean/15min	\$94.95	\$99.55
65.	ECG-Complete	\$197.95	\$207.50
66.	ECG-Stat	\$301.10	\$315.65
67.	Enema-First	\$94.95	\$99.55
68.	Foxtail Probe/Remove Rtn	\$51.55	\$51.55
69.	FNA Deep Structure	\$94.95	\$99.55
70.	Foreign Object Routine	\$15.40	\$105.40
71.	Nail Care Canine-Prof	\$19.00	NO CHARGE
72.	Wound Cleaning <5min	\$45.60	\$47.85
73.	Medicated Bath	\$37.50	NO CHARGE
74.	Penrose Drain Placement	\$69.05	\$72.40
75.	Urinary Catheter	\$43.35	\$45.50
76.	Fluorescein Stain	\$42.75	\$44.85
77.	Schirmer Test	\$29.95	\$31.40
78.	Schirmer Tear Test/Fluor	\$70.90	\$74.30
79.	Tonometry	\$39.50	\$41.40
80.	Topical Anesthesia	\$39.50	\$41.45
81.	Ear Cleaning: Simple	\$39.50	\$41.45
82.	Ear Clean/Flush Unilat	\$104.90	\$110.00
83.	Ear Clean/Flush Bilat		\$165.25
84.	Intl Health Certificate	\$93.60	NO CHARGE
85.	Health Certificate	\$28.80	NO CHARGE
86.	Hospitalize Day	Dr. Discretion	Dr. Discretion
87.	Hospitalize Partial Day	Dr. Discretion	Dr. Discretion
88.	Injectable Medications	\$22.54	\$21.85
89.	Oral Topical Medications	\$8.10	\$8.40
90.	Oxyg Supp Each add hr.	\$9.92	\$9.31
91.	Occupancy L Dog	\$30.00	\$31.45
92.	Occupancy XL Dog	\$33.00	\$34.60
LABORATORY (IN-HOUSE)			
93.	Chem. 11	\$131.85	\$108.00
94.	Heartworm Test	\$61.30	\$48.90
95.	Parvo Test	\$91.45	\$61.10
96.	Cytology Ear	\$47.65	\$49.95
97.	Fungal Culture	\$50.00	\$52.40
98.	Glucose Via Glucometer	\$33.90	\$35.55
99.	Gluc. Curve 12h via Gluc	\$125.85	\$131.90
100.	Packed Cell Volume	\$49.75	NO CHARGE
101.	PCV/Total Protein	\$54.30	\$56.95
102.	Skin Scraping	\$61.35	\$64.35
LABORATORY (ANTECH LAB)			
103.	TBF THED SA090	\$278.35	\$291.30
104.	SChem SA010	\$185.25	\$193.85
105.	TBF SA120	\$213.05	\$223.00
106.	SChem CBC SA020	\$195.90	\$205.00
107.	PreOp CVC PT PTT SA050	\$117.20	\$134.60
108.	PreOp SA040	\$104.90	\$110.00
109.	VS CBC SA030	\$162.00	\$169.55
110.	Coagulation Pr 3 SA305	\$143.45	\$177.30
111.	K9 Autoimmune Pr SA170	\$288.30	\$356.35
112.	RecheckSchemCBC Recheck	\$131.50	\$137.55
113.	Thyroid Pr 2 SA370	\$179.20	\$187.50
114.	Thyroid Pr 5 SA400	\$295.85	\$365.30
115.	TBF UA SA705	\$238.90	\$250.40
116.	Schem CBC UA SA021	\$225.05	\$236.90
117.	PreOp CVC SA055	\$117.20	\$108.00
118.	TBF UA O&PCmbHWAG SA765	\$290.75	\$304.25
119.	Wellness w/HW K9 SA605	\$139.40	\$119.00

120.	SrK9(TBF/UA/HWAG) SA710	\$256.75	\$257.00
121.	SrK9(TBF/UA/HWAGX) SA710	\$428.70	\$429.00
123.	BestCare Senior Dog SA765 (New Dog Physical	\$399.00	\$399.00
124.	T4ED add on	\$98.25	\$102.80
125.	Add Fructosamine	\$98.25	\$102.95
126.	Add Urinalysis	\$51.70	\$55.65
127.	Cortisol(2) ACTHstimT440	\$217.15	\$227.55
128.	Amylase Lipase T050	\$78.60	\$82.40
129.	CobalamineFolate S16195	\$164.20	\$171.80
130.	Bile Acids PrePost T220	\$185.55	\$194.45
131.	Bromide T730	\$222.10	\$274.30
132.	Brucella Canis Scr T530	\$111.50	\$116.90
133.	BUN Creatinine T105	\$84.05	\$87.95
134.	Calcium Ionized S18537	\$133.00	\$139.45
135.	CBC w/Diff T330	\$83.60	\$87.50
136.	Dist/Parvo/C Titer T566	\$172.15	\$180.45
137.	Cortisol(1)Resting T445	\$142.40	\$176.20
138.	Aerobic C&S M020	\$210.80	\$229.35
139.	MicroalbuminUr K9 T830C	\$24.95	\$26.10
140.	T4ED T460	\$166.20	\$181.55
141.	Fructosamine S16345	\$122.10	\$127.80
142.	Dermatopathology DERM	\$450.55	\$472.40
143.	O&P T805 1 y	\$54.65	\$61.85
144.	K9 Vx Titer T565	\$128.40	\$131.80
145.	Phenobarbital T750	\$185.05	\$193.95
146.	ALT T030	\$52.60	\$65.05
147.	T4 Post-Pill T497	\$89.55	\$93.75
148.	O&P Giardia T808 1 yr	\$59.00	\$61.85
149.	T4 T495	\$89.55	\$93.75
150.	Triglycerides T205	\$56.05	\$69.35
151.	Urinalysis T760	\$66.05	\$66.05
152.	Urine MIC M130	\$183.55	\$199.70
153.	UrineProtCreatRatioT775	\$146.75	\$181.40
154.	UA Urine MIC M133	\$214.70	\$224.55
155.	Lepto PCR Bld/UrineT978	\$181.20	\$224.35
SURGERY			
156.	Cryptorchid Inguin.Addt	\$101.75	\$106.65
157.	Umbilical Repair	\$208.60	\$216.00
158.	Small Mass Removal	\$117.15	\$122.75
159.	Skin Biopsy	\$100.75	\$105.60
160.	Ear Hematoma	\$247.80	\$259.75
161.	Laceration 1 (<=10min)	\$247.80	\$259.75
162.	Sm Mass Rem w/ Local An	\$149.80	\$157.00
163.	Mass Removal 1 <=10 min	\$247.80	\$259.75
164.	Mass Removal 2 (11-30min)	\$309.15	\$324.05
165.	Resuture Per Minute	\$15.05	\$13.15
166.	Enucleation	\$725.15	\$725.15
167.	Proptosis Surgery	\$374.90	\$374.90
168.	Preanesthes./Induction	\$84.80	\$88.90
169.	Gen.Anes. 1 st ½ Hr.	\$177.45	\$186.05
170.	Gen.Anes. Add 15 min.	\$78.25	\$82.00
171.	IV Catheter-SX	\$42.00	\$44.20
172.	Sevoflurane Add 30min	\$69.10	\$72.40
173.	Local Anesthesia	\$82.65	\$86.65
174.	Pre/Post Op.Analgesia	\$38.25	\$38.25
175.	Sedation Level 1	\$109.15	\$71.95
176.	Sedation Level 2	\$109.15	\$113.85
177.	Radiographic Sedation	\$132.45	\$72.85
178.	Anes. Monitoring LV1	\$65.25	\$68.40
179.	Anes. Monitoring LV2	\$92.75	\$97.20

A 10% service pet discount shall be applied to each invoice for services rendered.

A Pharmacy Match” discount of 20% for all chronic medications shall be provided to OWNER.

EXHIBIT C

INSURANCE REQUIREMENTS

1. FORMAT / TIME

The Successful Bidder shall provide LVMPD with Certificates of Insurance on a standard ACORD form, for coverage as listed herein, and a copy of the endorsements affecting coverage required by this Contract within **three business days** after the award by the LVMPD. All policy certificates and endorsements shall be signed by a person authorized by that insurer and who is licensed by the State of Nevada. All required aggregate limits shall be disclosed and amounts entered on the certificate of insurance, and shall be maintained for the duration of the Contract and any renewal periods.

2. BEST KEY RATING

The LVMPD requires insurance carriers to maintain during the Contract term, a Best Key Rating of A.VII or higher, which shall be fully disclosed and entered on the certificate of insurance.

3. LVMPD COVERAGE

The LVMPD, its officers and employees must be expressly covered as additional insureds except on workers' compensation and professional liability insurance coverages. The Successful Bidder's insurance shall be primary as respects the LVMPD, its officers and employees.

4. ENDORSEMENT / CANCELLATION

The Successful Bidder's commercial general liability and automobile liability insurance policy shall be endorsed to recognize specifically the Successful Bidder's contractual obligation of additional insured to LVMPD. The Successful Bidder shall provide the LVMPD 30 calendar days advance written notice of any policy changes, cancellations, or any erosion of insurance limits. Either a copy of the additional insured endorsement, or a copy of the policy language that gives LVMPD automatic additional insured status must be attached to any certificate of insurance.

5. DEDUCTIBLES

All deductibles and self-insured retentions shall be fully disclosed in the Certificates of Insurance and may not exceed **\$25,000**. ***If the deductible is "zero" it must still be referenced on the certificate*** Successful Bidders requesting increased deductibles or self-insured retentions must provide the LVMPD a written request stating the desired amounts along with recent audited financial statements for review. The LVMPD will review the request and determine if the requested deductible or self-insured retentions are acceptable. In the event the request for increased deductibles or self-insured retentions is denied, the Successful Bidder is obligated to provide the deductibles or self-insured retentions established in the bid documents at no additional expense to the LVMPD.

6. AGGREGATE LIMITS

If aggregate limits are imposed on bodily injury and property damage, then the amount of such limits must not be less than **\$2,000,000**.

7. COMMERCIAL GENERAL LIABILITY

Subject to paragraph 6 of this attachment, the Successful Bidder shall maintain limits of no less than **\$1,000,000** combined single limit per occurrence for bodily injury (including death), personal injury and property damages. Commercial General Liability coverage shall be on a "per occurrence" basis only, not "claims made", and be provided either on a Commercial General Liability or a Broad Form Commercial General Liability (including a Broad Form CGL endorsement) insurance form. Policies must contain a primary and non-contributory clause and must contain a waiver of subrogation endorsement in favor of the Las Vegas Metropolitan Police Department (LVMPD), and shall be endorsed to include the LVMPD, its officers, and employees as additional insured.

8. AUTOMOBILE LIABILITY

Subject to paragraph 6 of this attachment, the Successful Bidder shall maintain limits of no less than **\$1,000,000** combined single limit per occurrence for bodily injury and property damage, to include, but not be limited to, coverage against all insurance claims for injuries to persons or damages to property which may arise from services rendered by Successful Bidder and **any auto** used for the performance of services under this Contract. Policies must contain a primary and non-contributory clause and must contain a waiver of subrogation endorsement in favor of the Las Vegas Metropolitan Police Department (LVMPD), and shall be endorsed to include the LVMPD, its officers, and employees as additional insured.

9. PROFESSIONAL LIABILITY

The Successful Bidder shall maintain limits of no less than \$1,000,000 aggregate. If the professional liability insurance provided is on a Claims Made Form, then the insurance coverage required must continue for a period of 2 years beyond the completion or termination of this Contract. Any retroactive date must coincide with or predate the beginning of this Contract and may not be advanced without the consent of the Owner.

10. WORKERS' COMPENSATION

The Successful Bidder shall obtain and maintain for the duration of this Contract, a work certificate and/or a certificate issued by an insurer qualified to underwrite workers' compensation insurance in the State of Nevada, in accordance with Nevada Revised Statutes Chapters 616A-616D, inclusive, provided, however, a Bidder who is a Sole Proprietor shall be required to submit an affidavit indicating that the Bidder has elected not to be included in the terms, conditions and provisions of Chapters 616A-616D, inclusive, and is otherwise in compliance with those terms, conditions and provisions.

11. FAILURE TO MAINTAIN COVERAGE

If the Successful Bidder fails to maintain any of the insurance coverages required herein, LVMPD may withhold payment, order the Successful Bidder to stop the work, declare the Successful Bidder in breach, suspend or terminate the Contract, assess liquidated damages as defined herein, or may purchase replacement insurance or pay premiums due on existing policies. LVMPD may collect any replacement insurance costs or premium payments made from the Successful Bidder or deduct the amount paid from any sums due the Successful Bidder under this Contract.

12. ADDITIONAL INSURANCE

The Successful Bidder is encouraged to purchase any such additional insurance as it deems necessary.

13. DAMAGES

The Successful Bidder is required to remedy all injuries to persons and damage or loss to any property of LVMPD, caused in whole or in part by the Successful Bidder, their subcontractors or anyone employed, directed or supervised by Successful Bidder.

14. COST

The Successful Bidder shall pay all associated costs for the specified insurance. The cost shall be included in the bid price(s).

15. INSURANCE SUBMITTAL ADDRESS

All Insurance Certificates requested shall be sent to the Las Vegas Metropolitan Police Department c/o **Insurance Tracking Services, (ITS)**, P.O Box 21919 Long Beach, DA 90801.

16. INSURANCE FORM INSTRUCTIONS

The following information must be filled in by the Successful Bidders' Insurance Company representative:

1. Insurance Broker's name, complete address, contact name, phone and fax numbers.
2. Successful Bidder's name, complete address, phone and fax numbers.
3. Insurance Company's Best Key Rating
4. Commercial General Liability (Per Occurrence)
 - a. Policy Number
 - b. Policy Effective Date
 - c. Policy Expiration Date
 - d. Each Occurrence (\$1,000,000)
 - e. Each Occurrence (\$1,000,000)
 - f. Damage to Rented Premises (\$50,000)
 - g. Medical Expenses (\$5,000)
 - h. Personal & Advertising Injury (\$1,000,000)
 - i. General Aggregate (\$2,000,000)
 - j. Products - Completed Operations Aggregate (\$2,000,000)
5. Automobile Liability (Any Auto)
 - a. Policy Number
 - b. Policy Effective Date
 - c. Policy Expiration Date
 - d. Combined Single Limit (\$1,000,000)
6. Worker's Compensation
7. Professional Liability
 - a. Policy Number
 - b. Policy Effective Date
 - c. Policy Expiration Date
 - d. Aggregate (\$1,000,000)
8. Description - Bid Number and Name of Contract (must be identified on the initial insurance form and each renewal form).
9. Certificate Holder - Las Vegas Metropolitan Police Department c/o **Insurance Tracking Services, (ITS)**, P.O Box 21919 Long Beach, DA 90801. The Certificate Holder is named as an additional insured.

10. Agent Signature

DISCLOSURE OF OWNERSHIP / PRINCIPALS**INSTRUCTIONS****Purpose of the Form**

The purpose of the Disclosure of Ownership/Principals Form is to gather ownership information pertaining to the business entity for use by the Fiscal Affairs Committee ("FAC") in determining whether members of the FAC should exclude themselves from voting on agenda items where they have, or may be perceived as having a conflict of interest, and to determine compliance with Nevada Revised Statute 281A.430, contracts in which a public officer or employee has interest is prohibited.

General Instructions

Completion and submission of this Form is a condition of approval or renewal of a Contract or lease and/or release of monetary funding between the disclosing entity and the Las Vegas Metropolitan Police Department (LVMPD). Failure to submit the requested information may result in a refusal by the FAC to enter into an agreement/Contract and/or release monetary funding to such disclosing entity.

Detailed Instructions

All sections of the Disclosure of Ownership form must be completed. If not applicable, write in N/A.

Type of Business – Indicate if the entity is an Individual, Partnership, Limited Liability Corporation, Corporation, Trust, Non-profit, or Other. When selecting 'Other', provide a description of the legal entity.

Non-Profit Organization (NPO) - Any non-profit corporation, group, association, or corporation duly filed and registered as required by state law.

Business Designation Group – Indicate if the entity is a Minority Owned Business Enterprise (MBE), Women Owned Business Enterprise (WBE), Small Business Enterprise (SBE), Physically-Challenged Business Enterprise (PBE), Large Business Enterprise (LBE), Nevada Business Enterprise (NBE) or an Emerging Small Business (ESB).

Minority Owned Business Enterprise (MBE): An independent and continuing Nevada business for profit which performs a commercially useful function and is at least 51% owned and controlled by one or more minority persons of Black American, Hispanic American, Asian-Pacific American or Native American ethnicity.

Women Owned Business Enterprise (WBE): An independent and continuing Nevada business for profit which performs a commercially useful function and is at least 51% owned and controlled by one or more women.

Physically-Challenged Business Enterprise (PBE): An independent and continuing Nevada business for profit which performs a commercially useful function and is at least 51% owned and controlled by one or more disabled individuals pursuant to the federal Americans with Disabilities Act.

Small Business Enterprise (SBE): An independent and continuing Nevada business for profit which performs a commercially useful function, is not owned and controlled by individuals designated as minority, women, or physically-challenged, and where gross annual sales does not exceed \$2,000,000.

Emerging Small Business (ESB): A business certified by the state of Nevada as a local emerging small business, including Tier 1 and Tier 2 types.

Nevada Business Enterprise (NBE): Any business headquartered in the State of Nevada and is owned or controlled by individuals that are not designated as socially or economically disadvantaged.

Large Business Enterprise (LBE): An independent and continuing business for profit which performs a commercially useful function and is not located in Nevada.

Emerging Small Business (ESB): A local business certified by the State of Nevada as a small emerging business, including Tier 1 and Tier 2 types.

Business Name (include d.b.a., if applicable) – Enter the legal name of the business entity and enter the "Doing Business As" (d.b.a.) name, if applicable.

Corporate/ Business Address, Business Telephone, Business Fax, and Email – Enter the street address, telephone and fax numbers, and email of the named business entity.

Local Business Address, Local Business Telephone, Local Business Fax, and Email – If business entity is out-of-state, but operates the business from a location in Nevada, enter the Nevada street address, telephone and fax numbers, point of contact and email of the local office. Please note that the local address must be an address from which the business is operating from that location. Please do not include a P.O. Box number, unless required by the U.S. Postal Service, or a business license hanging address.

List of Owners – Include the full name, title and percentage of ownership of each person who has ownership or financial interest in the business entity. If the business is a publicly-traded corporation, list all Corporate Officers and members of the Board of Directors only.

For All Contracts –

- 1) Indicate if any individual members, partners, owners or principals involved in the business entity are a LVMPD full-time employee(s), or appointed/elected official(s). If yes, the following paragraph applies.

In accordance with NRS 281A.430.1, a public officer or employee shall not bid on or enter into a Contract between a government agency and any private business in which he has a significant financial interest, except as provided for in subsections 2, 3, and 4.

- 2) Indicate if any individual members, partners, owners or principals involved in the business entity have a second degree of consanguinity or affinity relation to a LVMPD full-time employee(s), or appointed/elected official(s) (reference form on Page 3 for definition). If **YES**, complete the Disclosure of Relationship Form.

A professional service is defined as a business entity that offers business/financial consulting, legal, physician, architect, engineer or other professional services.

Signature and Print Name – Requires signature of an authorized representative and the date signed.

Disclosure of Relationship Form – If any individual members, partners, owners or principals of the business entity is presently a LVMPD employee, public officer or official, or has a second degree of consanguinity or affinity relationship to a LVMPD employee, public officer or official, this section must be completed in its entirety. Include the name of business owner/principal, name of LVMPD employee(s), public officer or official, relationship to LVMPD employee(s), public officer or official, and the LVMPD Bureau where the LVMPD employee, public officer or official, is employed.

DISCLOSURE OF OWNERSHIP / PRINCIPALS

TYPE OF BUSINESS						
<input type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> LIMITED LIABILITY CORPORATION	<input type="checkbox"/> CORPORATION	<input type="checkbox"/> TRUST	<input type="checkbox"/> OTHER	
BUSINESS DESIGNATION GROUP (FOR INFORMATIONAL PURPOSES ONLY)						
<input type="checkbox"/> MBE MINORITY BUSINESS ENTERPRISE	<input type="checkbox"/> WBE WOMEN-OWNED BUSINESS ENTERPRISE	<input type="checkbox"/> SBE SMALL BUSINESS ENTERPRISE	<input type="checkbox"/> PBE PHYSICALLY CHALLENGED BUSINESS ENTERPRISE	<input type="checkbox"/> LBE LARGE BUSINESS ENTERPRISE	<input type="checkbox"/> NBE NEVADA BUSINESS ENTERPRISE	<input type="checkbox"/> ESB Tier 1 <input type="checkbox"/> ESB Tier 2 NEVADA EMERGING SMALL BUSINESS ENTERPRISE
BUSINESS NAME:						
(INCLUDE d.b.a., IF APPLICABLE)						
BUSINESS ADDRESS:						
BUSINESS TELEPHONE:						
BUSINESS FAX:		EMAIL:				
LOCAL BUSINESS ADDRESS						
LOCAL BUSINESS TELEPHONE:		EMAIL:				
LOCAL BUSINESS FAX:						

All non-publicly traded corporate business entities must list the names of individuals holding more than five percent (5%) ownership or financial interest in the business entity appearing before the Board.

"Business entities" include all business associations organized under or governed by Title 7 of the Nevada Revised Statutes, including but not limited to private corporations, close corporations, foreign corporations, limited liability companies, partnerships, limited partnerships, and professional corporations.

Corporate entities shall list all Corporate Officers and Board of Directors in lieu of disclosing the names of individuals with ownership or financial interest. The disclosure requirement, as applied to land-use transactions, extends to the applicant and the landowner(s).

FULL NAME	TITLE	% OWNED (NOT REQUIRED FOR PUBLICLY TRADED CORPORATIONS)

1. Are any individual members, partners, owners or principals, involved in the business entity a Las Vegas Metropolitan Police Depart full-time employee(s), or appointed/elected official(s)?

☐ Yes ☐ No (If yes, please note that LVMPD employee(s), or appointed/elected official(s) may not perform any work on professional service Contracts, or other Contracts, which are not subject to competitive bid.)

2. Do any individual members, partners, owners or principals have a spouse, registered domestic partner, children, parent, in-laws or brothers/sisters, half-brothers/half-sister, grandchildren, grandparents, in-laws related to a LVMPD full-time employee(s), or appointed/elected official(s)?

☐ Yes ☐ No (If yes, please disclose on the attached Disclosure of Relationship form. . If no, please print N/A on Page 2.)

I certify under penalty of perjury, that all of the information provided herein is current, complete, and accurate. I also understand that the FAC will not take action on land-use approvals, Contract approvals, land sales, leases or exchanges without the completed disclosure form.

SIGNATURE

PRINT NAME

TITLE

DATE

DISCLOSURE OF RELATIONSHIP

LIST ANY DISCLOSURES BELOW:

NAME OF BUSINESS OWNER/PRINCIPAL	NAME OF LVMPD EMPLOYEE(S)	RELATIONSHIP TO LVMPD EMPLOYEE	LVMPD BUREAU / SECTION

“Consanguinity” is a relationship by blood. “Affinity” is a relationship by marriage.

“To the second degree of consanguinity” applies to the candidate’s first and second degree of blood relatives as follows:

- Spouse – Registered Domestic Partners – Children – Parents – In-laws (first degree)
- Brothers/Sisters – Half-Brothers/Half-Sisters – Grandchildren – Grandparents – In-laws (second degree)

EXHIBIT B

Las Vegas Metropolitan Police Department Renewal confirmation

Please see attached page(s).

Subject: Nevada Gov eMarketplace Contract Reminder: 605471 (Veterinar



Nevada Gov eMarketplace <nevada@customer.ionwave.net>
to Sharon Hauht

You are viewing an attached message. Cityofnorthlasvegas.com Mail can't verify the authentic

CAUTION: This email originated from an **External Source**. Please **use caution** before opening attachments, clicking links,

This is a contract reminder from the following contract:

Description: Contract Renewal

Notes: This is a notification that the LVMPD is exercising its option to renew the contract in accordance with the cc

If there are no renewal options available, please disregard this notice.

Should you have any questions, you can contact the applicable Purchasing Representative (Owner as specified b

Contract Information:

Number: 605471

Title: Veterinary Medical Care

Status: Active

Owner: Sharon Hauht, CPSM, C.P.M.

Supplier: VCA Decatur Animal Hospital

Active Term Information:

Description: Import

Start Date: 12/01/2019

End Date: 11/30/2020

Remaining Renewal Options: 5

Reminder Recipients:

Sharon Hauht, CPSM, C.P.M. (s14922h@lvmpd.com)

(michelle.hoyt@vcahospitals.com)

The system can be accessed at: <https://nevada.ionwave.net>

CONREMINDERNOTIFICATION - 10/3/2020 12:35 AM (CT)

EXHIBIT C

Pricing List

Please see attached page(s).

Exhibit C - Pricing List

Code Number	Description	Previous Price	New Price
	EXAMS		2021-2023
1.1	Exam Well Patient	\$56.50	\$59.33
1.2	Exam Medical Condition	\$56.50	\$59.33
1.58	Exam Recheck (w/in 90 Days)	\$44.00	\$46.20
1.93	Exam Ear/Skin Recheck (w/in 90 Days)	\$25.00	\$26.25
1.95	Exam Eye Recheck (w/in 90 Days)	\$25.00	\$26.25
3.1	Acupuncture Consult	\$78.50	\$82.43
3.4	Acupuncture Recheck	\$67.00	\$70.35
9.1	Bordetella 4 wk	\$16.75	\$17.59
9.4	Bordetella 1yr	\$16.75	\$17.59
9.15	Borrelia (Lyme) 3wk	\$31.65	\$33.23
9.19	Borrelia (Lyme) 1yr	\$31.65	\$33.23
9.67	DA2PP 3wk	\$16.75	\$17.59
9.76	DA2PP 1yr	\$16.75	\$17.59
9.21	Rattlesnake Vaccine 1yr	\$36.30	\$38.12
9.212	Leptospira Vaccine 3wk	\$21.85	\$22.94
9.213	Leptospira Vaccine 1yr	\$21.85	\$22.94
9.214	Rabies Vaccine 1yr	\$16.75	\$17.59
9.22	Rabies Vaccine 3yr	\$16.75	\$17.59
9.281	Influenza Bivalent vaccines 3wk	\$28.35	\$29.77
9.283	Influenza Bivalent vaccines 1yr	\$28.35	\$29.77
	RADIOLOGY		
21.501	Abdominal Study 2 Views	\$193.50	\$203.18
21.499	Abdominal/Thorax Study 4 Views	\$301.45	\$316.52
21.510	Extremities 2 Views	\$193.50	\$203.18
21.340	Follow Up Radiographs	\$146.35	\$153.67
	GI Series 4 Views	\$358.65	\$376.58
21.513	Pelvis 2 View	\$193.50	\$203.18
21.514	Spine Study	\$184.65	\$193.88
21.500	Thorax 2 Views	\$193.50	\$203.18
21.7005	AIS Interpretation	\$97.80	\$102.69
	OUTSIDE RADIOLOGIST		
23.7053	OS Echocardiogram	\$534.00	\$560.70
23.7061	OS Ultrasound Abdomen	\$463.50	\$486.68
23.7067	OS Ultrasound Thorax	\$453.50	\$476.18
	BANDAGING		
27.2	Bandage/Dress: Advanced	\$96.15	\$100.96
27.3	Bandage/Dress: Routine	\$37.15	\$39.01
27.5	Bandage/Dress: Postoperative	\$93.60	\$98.28

	DENTAL		
29.7	Dental Routine	\$256	\$268.80
29.6	Dental Advance	\$276.45	\$290.27
29.12	Extract Deciduous ADV	\$95.20	\$99.96
29.13	Extract Carnassial ADV	\$162.75	\$170.89
29.21	Extract Canine Routine	\$59.55	\$62.53
29.23	Extract Carnassial Routine	\$81.65	\$85.73
29.24	Extract PM/M 2 Root Routine	\$70.60	\$74.13
29.26	Extract Incisor ADV	\$54.70	\$57.44
29.27	Extract Incisor Routine	\$27.65	\$29.03
29.29	Extract PM/M 3 Root Routine	\$70.60	\$74.13
29.41	Extract Deciduous Root	\$41.15	\$43.21
29.42	Extract PM/M 1 Root Routine	\$54.70	\$57.44
29.61	Extract Canine Major	\$142.20	\$149.31
	OTHER MEDICAL		
	Euthanasia	No Charge	No Charge
37.84	Fluid Maintenance	\$30.75	\$32.29
37.66	Fluids SubQ	\$54.70	\$57.44
37.25	IV Cath Peripheral	\$49.20	\$51.66
	Fluid Pump Addl	\$42.00	\$44.10
37.83	Fluid Set Up	\$169.95	\$178.44
37.91	Fluid Set Up - Surgery	\$113.85	\$119.45
39.4	Anal Gland Expression	No Charge	No Charge
39.7	Anal Gland Infused	\$95.60	\$100.38
39.18	Bladder Expression	\$42.45	\$44.57
39.19	Blood Pressure	\$41.65	\$43.73
39.21	Blood Pressure Recheck	\$31.40	\$32.97
39.34	Wound/Clip/Clean/15 min	\$99.55	\$104.53
39.58	ECG - Complete	\$207.50	\$217.88
39.67	ECG - Stat	\$315.65	\$331.43
39.73	Enema - First	\$99.55	\$104.53
39.74	Foxtail Probe/Remove RTN	\$51.55	\$54.13
39.85	FNA Deep Structure	\$99.55	\$104.53
39.92	Foreign Object Routine	\$105.40	\$110.67
39.95	Nail Care Canine - Prof	No Charge	No Charge
39.101	Wound Cleaning < 5min	\$47.85	\$50.24
39.104	Medicate Bath	No Charge	No Charge
39.125	Penrose Drain Placement	\$72.40	\$76.02
39.166	Urinary Catheter	\$45.50	\$47.78
41.1	Fluorescein Stain	\$44.85	\$47.09
41.13	Schirmer Test	\$31.40	\$32.97
41.14	Schirmer Test/Fluor	\$74.30	\$78.02
41.16	Tonometry	\$41.40	\$43.47
242.41	Topical Anesthesia	\$41.45	\$43.52
41.21	Ear Cleaning: Simple	\$41.45	\$43.52
41.22	Ear Clean/Flush Unilat	\$110	\$115.50

41.25	Ear Clean/Flush Bilat	\$165.25	\$173.51
44.18	Intl Health Certificate	No Charge	No Charge
44.19	Health Certificate	No Charge	No Charge
	Hospitalize Day	Dr. Discretion	Dr. Discretion
	Hospitalize Partial Day	Dr. Discretion	Dr. Discretion
	Injectable Medications	\$21.85	\$22.94
	Oral Topical Medications	\$8.40	\$8.82
51.34	Oxyg Supp Each add hr	\$9.31	\$9.78
57.13	Occupancy L Dog	\$31.45	\$33.02
57.16	Occupancy XL Dog	\$34.60	\$36.33
	LABORATORY (IN-HOUSE)		
101.372	Vetscan Diagnostic (Chem 11)	\$108	\$113.40
101.900	Heartworm Test	\$48.90	\$51.35
101.883	Parvo Test	\$61.10	\$64.16
101.160	Cytology Ear	\$49.95	\$52.45
101.199	Fungal Culture	\$52.40	\$55.02
101.21	Gluc. Curve 12h Via Glucometer	\$35.55	\$37.33
101.247	Packed Cell Volume	No Charge	No Charge
101.305	PCV/Total Protein	\$56.95	\$59.80
101.307	Skin Scraping	\$64.35	\$67.57
	LABORATORY (ANTECH LAB)		
161.1	TBF THED SA090	\$291.30	\$305.87
161.17	Schem SA010	\$193.85	\$203.54
161.18	TBF SA120	\$223	\$234.15
161.36	Schem CBC SA020	\$205	\$215.25
161.37	PreOp CBC PT PTT SA050	\$134.60	\$141.33
161.38	PreOp SA040	\$110	\$115.50
161.39	VS CBC SA030	\$169.55	\$178.03
161.56	Coagulation Pr 3 SA305	\$177.30	\$186.17
161.66	K9 Autoimmune Pr SA170	\$356.35	\$374.17
161.72	Recheck Schem CBC Recheck	\$137.55	\$144.43
161.79	Thyroid Pr 2 SA370	\$187.50	\$196.88
161.88	Thyroid PRr 5 SA400	\$365.30	\$383.57
161.115	TBF UA SA705	\$250.40	\$262.92
161.146	Schem CBC UA SA021	\$236.90	\$248.75
161.149	PreOp CBC SA055	\$108	\$113.40
161.667	TBF UA O&P Cmb HWAG SA765	\$304.25	\$319.46
161.64	Wellness w/HW K9 SA605	\$119	\$124.95
163.21	SrK9(TBF/UA/HWAG) SA710	\$257	\$269.85
163.11	SrK9(TBF/UA/HWAGX) SA710	\$429	\$450.45
161.667	BestCare Senior Dog SA765 (New Dog Physical)	\$399	\$418.95
199.966	T4ED Add On	\$102.80	\$107.94
197.69	Add Fructosamine ADD260	\$102.95	\$108.10
197.127	Add Urinalysis ADD220	\$55.65	\$58.43
199.6	Cortisol (2) ACTH stime T440	\$227.55	\$238.93
199.27	Amylase Lipase T050	\$82.40	\$86.52

199.52	Cobalamine Folate S16195	\$171.80	\$180.39
199.67	Bile Acids Pre/Post T220	\$194.45	\$204.17
199.103	Bromide T730	\$274.30	\$288.02
199.106	Brucella Canis Scr T530	\$116.90	\$122.75
199.116	BUN Creatinine T105	\$87.95	\$92.35
199.122	Calcium Ionized S18537	\$139.45	\$146.42
199.145	CBC w/Diff T330	\$87.50	\$91.88
199.146	Dist/Parvo/C Titer T566	\$180.45	\$189.47
199.214	Cortisol (1) Resting T445	\$176.20	\$185.01
199.241	Aerobic C&S M020	\$229.35	\$240.82
199.327	MicroalbuminUr K9 T830C	\$26.10	\$27.41
	T4ED T460	\$181.55	\$190.63
199.371	Fructosamine S16345	\$127.80	\$134.19
199.445	Dermatopathology DERM	\$472.40	\$496.02
199.968	Fecal O&P 1yr T805	\$61.85	\$64.94
199.565	K9 Vax Titer T565	\$131.80	\$138.39
199.580	Phenobarbital T750	\$193.95	\$203.65
199.649	ALT T030	\$65.05	\$68.30
199.672	T4 Post-Pill T497	\$93.75	\$98.44
199.68	Fecal O&P 1yr Giardia T808	\$61.85	\$64.94
199.685	T4 T495	\$93.75	\$98.44
199.715	Triglycerides T205	\$69.35	\$72.82
199.73	Urinalysis T760	\$66.05	\$69.35
199.739	Urine MIC M130	\$199.70	\$209.69
199.742	UrineProtCreatRatio T775	\$181.40	\$190.47
199.744	UA Urine MIC M133	\$224.55	\$238.78
199.912	Lepto PCR Bld/Urine T978	\$224.35	\$235.57
	SURGERY		
201.31	Cryptorchid Inguin. Addt	\$106.65	\$111.98
205.258	Umbilical Repair (uncomplicated)	\$216	\$226.80
207.44	Small Mass Removal	\$122.75	\$128.89
207.46	Skin Biopsy	\$105.60	\$110.88
207.207	Ear Hematoma	\$259.75	\$272.74
207.213	Laceration 1 (<=10 min)	\$259.75	\$272.74
207.230	Sml Mass Removal w/Local Anes	\$157	\$164.85
207.231	Mass Removal 1 <=10 min	\$259.75	\$272.74
207.234	Mass Removal 2 (11-30 min)	\$324.05	\$340.25
207.245	Resuture Per Minute	\$13.15	\$13.81
211.222	Enucleation	\$725.15	\$761.41
211.275	Proptosis Surgery	\$374.90	\$393.65
	Preanesthes./Induction	\$88.90	\$93.35
	General Anes Add 15 min	\$44.20	\$46.41
37.89	IV Catheter Surgery	\$44.20	\$46.41
	Sevoflurance Add 30 min	\$72.40	\$76.02
242.43	Local Anesthesia	\$86.65	\$90.98
305.298	Pre/Post Op Analgesia	\$38.25	\$40.16
242.135	Sedation Level 1	\$71.95	\$75.55

242.136	Sedation Level 2	\$113.85	\$119.54
242.71	Radiographic Sedation	\$72.85	\$76.49
	Anes. Monitoring LV1	\$68.40	\$71.82
	Anes. Monitoring LV2	\$97.20	\$102.06

A 10% service pet discount shall be applied to each invoice for services rendered.

A Pharmacy Match* discount of 20% for all chronic medications shall be provided to OWNER.



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
01/03/2021

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 Aon Risk Services Northeast, Inc. New York NY Office One Liberty Plaza 165 Broadway, Suite 3201 New York NY 10006 USA	CONTACT NAME: PHONE (A/C. No. Ext): (866) 283-7122 FAX (A/C. No.): (800) 363-0105 E-MAIL ADDRESS:														
INSURED VCA, Inc. 12401 W Olympic Blvd. Los Angeles CA 90064 USA	<table><tr><th>INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A: Liberty Insurance Corporation</td><td>42404</td></tr><tr><td>INSURER B: Liberty Mutual Fire Ins Co</td><td>23035</td></tr><tr><td>INSURER C:</td><td></td></tr><tr><td>INSURER D:</td><td></td></tr><tr><td>INSURER E:</td><td></td></tr><tr><td>INSURER F:</td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Liberty Insurance Corporation	42404	INSURER B: Liberty Mutual Fire Ins Co	23035	INSURER C:		INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC #														
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INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															

COVERAGES**CERTIFICATE NUMBER:** 570085598769**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. **Limits shown are as requested**

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS												
B	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			EB2631504078681 SIR applies per policy terms & conditions	01/01/2021	01/01/2022	<table><tr><td>EACH OCCURRENCE</td><td>\$2,000,000</td></tr><tr><td>DAMAGE TO RENTED PREMISES (Ea occurrence)</td><td>\$1,000,000</td></tr><tr><td>MED EXP (Any one person)</td><td>Excluded</td></tr><tr><td>PERSONAL & ADV INJURY</td><td>\$2,000,000</td></tr><tr><td>GENERAL AGGREGATE</td><td>\$4,000,000</td></tr><tr><td>PRODUCTS - COMP/OP AGG</td><td>\$4,000,000</td></tr></table>	EACH OCCURRENCE	\$2,000,000	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000	MED EXP (Any one person)	Excluded	PERSONAL & ADV INJURY	\$2,000,000	GENERAL AGGREGATE	\$4,000,000	PRODUCTS - COMP/OP AGG	\$4,000,000
EACH OCCURRENCE	\$2,000,000																		
DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000																		
MED EXP (Any one person)	Excluded																		
PERSONAL & ADV INJURY	\$2,000,000																		
GENERAL AGGREGATE	\$4,000,000																		
PRODUCTS - COMP/OP AGG	\$4,000,000																		
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			AS2-631-504078-041	01/01/2021	01/01/2022	<table><tr><td>COMBINED SINGLE LIMIT (Ea accident)</td><td>\$1,000,000</td></tr><tr><td>BODILY INJURY (Per person)</td><td></td></tr><tr><td>BODILY INJURY (Per accident)</td><td></td></tr><tr><td>PROPERTY DAMAGE (Per accident)</td><td></td></tr></table>	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000	BODILY INJURY (Per person)		BODILY INJURY (Per accident)		PROPERTY DAMAGE (Per accident)					
COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000																		
BODILY INJURY (Per person)																			
BODILY INJURY (Per accident)																			
PROPERTY DAMAGE (Per accident)																			
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION						<table><tr><td>EACH OCCURRENCE</td><td></td></tr><tr><td>AGGREGATE</td><td></td></tr></table>	EACH OCCURRENCE		AGGREGATE									
EACH OCCURRENCE																			
AGGREGATE																			
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N	N/A	WA763D504078621 Work Comp AOS WA763D504078631 Work Comp WI	01/01/2021	01/01/2022	<table><tr><td><input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER</td><td></td></tr><tr><td>E.L. EACH ACCIDENT</td><td>\$1,000,000</td></tr><tr><td>E.L. DISEASE-EA EMPLOYEE</td><td>\$1,000,000</td></tr><tr><td>E.L. DISEASE-POLICY LIMIT</td><td>\$1,000,000</td></tr></table>	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER		E.L. EACH ACCIDENT	\$1,000,000	E.L. DISEASE-EA EMPLOYEE	\$1,000,000	E.L. DISEASE-POLICY LIMIT	\$1,000,000				
<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER																			
E.L. EACH ACCIDENT	\$1,000,000																		
E.L. DISEASE-EA EMPLOYEE	\$1,000,000																		
E.L. DISEASE-POLICY LIMIT	\$1,000,000																		
B	<input checked="" type="checkbox"/> E&O-MPL-XS			EB2631504078681 SIR applies per policy terms & conditions	01/01/2021	01/01/2022	<table><tr><td>Each Vet Incident</td><td>\$2,000,000</td></tr><tr><td>Aggregate</td><td>\$4,000,000</td></tr></table>	Each Vet Incident	\$2,000,000	Aggregate	\$4,000,000								
Each Vet Incident	\$2,000,000																		
Aggregate	\$4,000,000																		

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

RE: # 215 VCA Decatur Animal Hospital 1117 N. Decatur Blvd., Las Vegas, NV 89108. Veterinary Services to K-9 unit of the North Las Vegas Police Department as per written agreement. Certificate holder, its officers and employees are included as Additional Insured in accordance with the policy provisions of the General Liability and Automobile Liability policies. A waiver of Subrogation is granted in favor of Certificate Holder in accordance with the policy provisions of the General Liability, Automobile Liability and Workers Compensation policies. General Liability Policy evidenced herein is Primary and Non-Contributory to other insurance available to an Additional Insured, but only in accordance with the policy's provisions.

CERTIFICATE HOLDER**CANCELLATION**

North Las Vegas Police Department Attn: Sgt. Paul Manteufel 2250 Las Vegas Blvd. Las Vegas NV 89030 USA	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 <i>Aon Risk Services Northeast, Inc.</i>
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ADDITIONAL REMARKS SCHEDULE

Page _ of _

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.
POLICY NUMBER See Certificate Number: 570085598769		
CARRIER See Certificate Number: 570085598769	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 25 **FORM TITLE:** Certificate of Liability Insurance

ADDITIONAL NAMED INSURED:

Animal Care Center at Mill Run, Inc.
 Animal Care Centers of America, Inc.
 Animal Healthcare of Kansas, P.A.
 Animal Healthcare of North Carolina, P.C.
 Animal Healthcare of Rhode Island, PC
 Animal Healthcare of Texas, P.C.
 Antech Diagnostics, Inc.
 Biovet (USA) Inc.
 Camp Bow Wow Franchising, Inc.
 CBW Operating, Inc.
 Companion Pet Services of Alabama, P.C.
 Edgebrook Animal Hospital, LP
 Edgebrook, Inc.
 Manhattan Veterinary Group, P.C.
 Pay It Forward II, PC
 Pet Partners Global Holdings LLC
 Pet Partners Global LLC
 Pet Partners Holdings, LLC
 Pet Partners Management of California, Inc.
 Pet Partners, LLC
 Pet Services of District of Columbia, P.C.
 Pet Services of Idaho, P.C.
 Pet Services of Louisiana, A Professional Corporation
 Pet Services of Maine, P.C.
 Pet Services of Michigan, P.C.
 Pet Services of Minnesota, P.C.
 Pet Services of Nebraska, P.C.
 Pet Services of New Jersey, P.C.
 Pet Services of Vermont, PC
 Pet Services of Washington, P.S.
 Pet Services of West Virginia, Inc.
 Pets' Rx, Inc.
 Sound Technologies, Inc.
 South County Veterinary Clinic, Inc.
 The Bow Wow Buddies Foundation, Inc.
 VCA - Asher, Inc.
 VCA Acacia Animal Health Center, LP
 VCA Advanced Veterinary Care Center, LLC
 VCA Animal Clinic of Parker, LLC
 VCA Animal Diagnostic Clinic, LLC
 VCA Animal Hospitals, Inc.
 VCA Animal Hospitals-Texas, L.P.
 VCA Asher Animal Hospital, LP
 VCA Charities
 VCA Companion Animal Hospital, L.P.
 VCA Inc.
 VCA International Limited Partner, LLC
 VCA Lakewood Animal Hospital (Cerritos), LP
 VCA Los Angeles Veterinary Specialists, LP
 VCA Madera Pet Hospital, LP
 VCA Maple Leaf, Inc.
 VCA Metroplex Animal Hospital, LP
 VCA Mill Run Animal Hospital, LP
 VCA North Academy & Briargate Animal Hospitals, LLC
 VCA of New York, Inc.
 VCA Old Marple Animal Hospital, LLC
 VCA Old Trail Animal Hospital, LLC
 VCA Orange County Veterinary Specialists, LP
 VCA Real Property Acquisition Corporation
 VCA San Francisco Veterinary Specialists, LP

**ADDITIONAL REMARKS SCHEDULE**

Page _ of _

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.
POLICY NUMBER See Certificate Number: 570085598769		
CARRIER See Certificate Number: 570085598769	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,****FORM NUMBER:** ACORD 25 **FORM TITLE:** Certificate of Liability Insurance**ADDITIONAL NAMED INSURED:**

VCA Saw Mill Animal Hospital, LP
VCA South County Animal Hospital, LLC
VCA Valley Oak Veterinary Center, LP
VCA Westlake Village Animal Hospital, LP
VCA Woodford Animal Hospital, LP
Veterinary Centers of America-Texas, Inc.
Veterinary Healthcare of New Hampshire, P.C.
Vicar Operating, Inc.



AGENCY CUSTOMER ID: 570000063611

LOC #:

ADDITIONAL REMARKS SCHEDULE

Page _ of _

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.	
POLICY NUMBER See Certificate Number: 570085598769		EFFECTIVE DATE:	
CARRIER See Certificate Number: 570085598769	NAIC CODE		

ADDITIONAL REMARKS**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,****FORM NUMBER:** ACORD 25 **FORM TITLE:** Certificate of Liability Insurance

Workers' Compensation Policies

Effective January 1, 2021 - January 1, 2022
Underwriting Company - Liberty Insurance Corp.

NAMED INSURED	POLICY NUMBER
Animal Healthcare of Kansas, P.A.	WA7-63D-504078-671
Animal Healthcare of North Carolina, P.C.	WA7-63D-504078-661
Animal Healthcare of Rhode Island, PC	WA7-63D-504078-651
Animal Healthcare of Texas, P.C.	WA7-63D-504078-641
Companion Pet Services of Alabama, P.C.	WA7-63D-504078-611
Manhattan Veterinary Group, P.C.	WA7-63D-504078-601
Pay It Forward II, PC	WA7-63D-504078-591
Pet Services of District of Columbia, P.C.	WA7-63D-504078-581
Pet Services of Idaho, P.C.	WA7-63D-504078-571
Pet Services of Michigan, P.C.	WA7-63D-504078-551
Pet Services of Minnesota, P.C.	WA7-63D-504078-541
Pet Services of Nebraska, P.C.	WA7-63D-504078-531
Pet Services of New Jersey, P.C.	WA7-63D-504078-521
Pet Services of Washington, P.S.	WA7-63D-504078-511
Pet Services of West Virginia, Inc.	WA7-63D-504078-501
Veterinary Healthcare of New Hampshire, P.C.	WA7-63D-504078-491
Pet Services of Vermont, P.C.	WA7-63D-504078-481
Pet Services of Maine, P.C.	WA7-63D-504078-471
Pet Services of Louisiana, A Professional Corporation	WA7-63D-504078-561



Liberty Mutual Insurance

National Accounts - Casualty
157 Berkeley Street
Boston, MA 02116
(617) 357-9500

December 31, 2020

Insured Name: VCA, Inc.
Policy Numbers: EB2-631-504078-681
KE1-631-504090-161

To Whom It May Concern:

Please accept this letter as confirmation that this customer has placed their insurance with Liberty Mutual under the above policy numbers. Coverage is bound with the endorsements listed below.

I hope this will suffice for verification purposes. Please advise if any additional information is needed.

Sincerely,

Justin Sinkbeil
Senior Account Analyst
National Insurance Risk Management

Liberty Mutual Insurance
One Battery Park Plaza, 30th Floor
New York, New York 10004



Liberty Mutual Insurance

National Accounts - Casualty
157 Berkeley Street
Boston, MA 02116
(617) 357-9500

Endorsements:

General Liability:

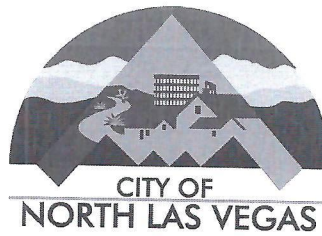
- Primary And Noncontributory - Other Insurance Condition - CG 20 01 04 13
 - You have agreed in writing in a contract or agreement.
- Blanket Additional Insured - LN 20 01 06 05
 - Any person or organization for who you have agreed in writing.
- Waiver Of Transfer Of Rights Of Recovery Against Others To Us - CG 24 04 05 09
 - Any person or organization with whom you have agreed in writing to waive any right of recovery prior to a loss.
- Additional Insured - Managers Or Lessors Of Premises - CG 20 11 04 13
 - All person(s) or organization(s) leasing premises to you, where required by written contract or agreement entered into prior to loss.
- Additional Insured – Mortgagee, Assignee, Or Receiver CG 20 18 04 13
 - Any, all covered locations.

First Renewal

(See attached pages)

Mayor
John J. Lee

Council Members
Issac E. Barron
Pamela A. Goynes-Brown
Scott Black
Richard J. Cherchio



City Manager
Ryann Juden

Your Community of Choice

City Manager's Office

2250 Las Vegas Boulevard, North · Suite #900 · North Las Vegas, Nevada 89030
Telephone: (702) 633-1005 · Fax: (702) 633-1339 · TDD: (800) 326-6868
www.cityofnorthlasvegas.com

October 18, 2021

VCA Animal Hospitals, Inc.
d/b/a VCA Decatur Animal Hospital
Attention: Melissa Walton
1117 N. Decatur Blvd.
Las Vegas, NV 89108

Re: Renewal of Agreement to use Local Government Contract No. 605471 for Veterinary Services

Dear Ms. Walton,

On May 5, 2021, The City of North Las Vegas and VCA Animal Hospitals, Inc., d/b/a VCA Decatur Animal Hospital entered into an Agreement to use Local Government Contract No. 605471 for Veterinary Services ("Agreement"), attached hereto as **Exhibit A**. The initial term of the Agreement is set to expire on November 30, 2021.

Pursuant to the terms of the Agreement, the City has the authority to renew the Agreement for up to two (2), one-year terms. Please accept this correspondence as notice that the City hereby exercises its first one-year option to renew the Agreement. This renewal option will authorize the performance of the contract from December 1, 2021 to November 30, 2022.

Please contact Brittany Contardi, Purchasing Paralegal, by phone at 702-633-1463 or by email at contardib@cityofnorthlasvegas.com if you have any questions or concerns.


City of North Las Vegas,
a Nevada municipal corporation

By: 
Ryann Juden, City Manager

VCA Animal Hospitals, Inc.,
d/b/a VCA Decatur Animal Hospital,
a Delaware corporation

By: 
Title: Hospital Manager

Attest:

By: 
Jackie Rodgers, Acting City Clerk

Approved as to Form:

By: 
Micaela Rustia Moore, City Attorney



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
01/03/2021

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.

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PRODUCER Aon Risk Services Northeast, Inc. New York NY Office One Liberty Plaza 165 Broadway, Suite 3201 New York NY 10006 USA	CONTACT NAME:	
	PHONE (A/C. No. Ext): (866) 283-7122	FAX (A/C. No.): (800) 363-0105
INSURED VCA, Inc. 12401 W Olympic Blvd. Los Angeles CA 90064 USA	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	NAIC #	
	INSURER A: Liberty Insurance Corporation	42404
	INSURER B: Liberty Mutual Fire Ins Co	23035
	INSURER C:	
	INSURER D:	
INSURER E:		
INSURER F:		

COVERAGES**CERTIFICATE NUMBER:** 570085598769**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. **Limits shown are as requested**

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:			EB2631504078681 SIR applies per policy terms & conditions	01/01/2021	01/01/2022	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) Excluded PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			AS2-631-504078-041	01/01/2021	01/01/2022	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION						EACH OCCURRENCE AGGREGATE
A	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	WA763D504078621 Work Comp AOS WA763D504078631 Work Comp WI	01/01/2021	01/01/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE-EA EMPLOYEE \$1,000,000 E.L. DISEASE-POLICY LIMIT \$1,000,000
B	<input type="checkbox"/> E&O-MPL-XS			EB2631504078681 SIR applies per policy terms & conditions	01/01/2021	01/01/2022	Each Vet Incident \$2,000,000 Aggregate \$4,000,000

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

RE: # 215 VCA Decatur Animal Hospital 1117 N. Decatur Blvd., Las Vegas, NV 89108. Veterinary Services to K-9 unit of the North Las Vegas Police Department as per written agreement. Certificate holder, its officers and employees are included as Additional Insured in accordance with the policy provisions of the General Liability and Automobile Liability policies. A waiver of Subrogation is granted in favor of Certificate Holder in accordance with the policy provisions of the General Liability, Automobile Liability and Workers Compensation policies. General Liability Policy evidenced herein is Primary and Non-Contributory to other insurance available to an Additional Insured, but only in accordance with the policy's provisions.

CERTIFICATE HOLDER**CANCELLATION**

North Las Vegas Police Department Attn: Sgt. Paul Manteufel 2250 Las Vegas Blvd. Las Vegas NV 89030 USA	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 <i>Aon Risk Services Northeast, Inc.</i>



ADDITIONAL REMARKS SCHEDULE

Page _ of _

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.
POLICY NUMBER See Certificate Number: 570085598769		
CARRIER See Certificate Number: 570085598769	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 25 **FORM TITLE:** Certificate of Liability Insurance

ADDITIONAL NAMED INSURED:

Animal Care Center at Mill Run, Inc.
 Animal Care Centers of America, Inc.
 Animal Healthcare of Kansas, P.A.
 Animal Healthcare of North Carolina, P.C.
 Animal Healthcare of Rhode Island, PC
 Animal Healthcare of Texas, P.C.
 Antech Diagnostics, Inc.
 Biovet (USA) Inc.
 Camp Bow Wow Franchising, Inc.
 CBW Operating, Inc.
 Companion Pet Services of Alabama, P.C.
 Edgebrook Animal Hospital, LP
 Edgebrook, Inc.
 Manhattan Veterinary Group, P.C.
 Pay It Forward II, PC
 Pet Partners Global Holdings LLC
 Pet Partners Global LLC
 Pet Partners Holdings, LLC
 Pet Partners Management of California, Inc.
 Pet Partners, LLC
 Pet Services of District of Columbia, P.C.
 Pet Services of Idaho, P.C.
 Pet Services of Louisiana, A Professional Corporation
 Pet Services of Maine, P.C.
 Pet Services of Michigan, P.C.
 Pet Services of Minnesota, P.C.
 Pet Services of Nebraska, P.C.
 Pet Services of New Jersey, P.C.
 Pet Services of Vermont, PC
 Pet Services of Washington, P.S.
 Pet Services of West Virginia, Inc.
 Pets' Rx, Inc.
 Sound Technologies, Inc.
 South County Veterinary Clinic, Inc.
 The Bow Wow Buddies Foundation, Inc.
 VCA - Asher, Inc.
 VCA Acacia Animal Health Center, LP
 VCA Advanced Veterinary Care Center, LLC
 VCA Animal Clinic of Parker, LLC
 VCA Animal Diagnostic Clinic, LLC
 VCA Animal Hospitals, Inc.
 VCA Animal Hospitals-Texas, L.P.
 VCA Asher Animal Hospital, LP
 VCA Charities
 VCA Companion Animal Hospital, L.P.
 VCA Inc.
 VCA International Limited Partner, LLC
 VCA Lakewood Animal Hospital (Cerritos), LP
 VCA Los Angeles Veterinary Specialists, LP
 VCA Madera Pet Hospital, LP
 VCA Maple Leaf, Inc.
 VCA Metroplex Animal Hospital, LP
 VCA Mill Run Animal Hospital, LP
 VCA North Academy & Briargate Animal Hospitals, LLC
 VCA of New York, Inc.
 VCA Old Marple Animal Hospital, LLC
 VCA Old Trail Animal Hospital, LLC
 VCA Orange County Veterinary Specialists, LP
 VCA Real Property Acquisition Corporation
 VCA San Francisco Veterinary Specialists, LP

**ADDITIONAL REMARKS SCHEDULE**

Page _ of _

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.
POLICY NUMBER See Certificate Number: 570085598769		
CARRIER See Certificate Number: 570085598769	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,****FORM NUMBER:** ACORD 25 **FORM TITLE:** Certificate of Liability Insurance**ADDITIONAL NAMED INSURED:**

VCA Saw Mill Animal Hospital, LP
VCA South County Animal Hospital, LLC
VCA Valley Oak Veterinary Center, LP
VCA Westlake Village Animal Hospital, LP
VCA Woodford Animal Hospital, LP
Veterinary Centers of America-Texas, Inc.
Veterinary Healthcare of New Hampshire, P.C.
Vicar Operating, Inc.



AGENCY CUSTOMER ID: 570000063611

LOC #:

ADDITIONAL REMARKS SCHEDULE

Page _ of _

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.	
POLICY NUMBER See Certificate Number: 570085598769		EFFECTIVE DATE:	
CARRIER See Certificate Number: 570085598769	NAIC CODE		

ADDITIONAL REMARKS**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,****FORM NUMBER:** ACORD 25 **FORM TITLE:** Certificate of Liability Insurance

Workers' Compensation Policies

Effective January 1, 2021 - January 1, 2022
Underwriting Company - Liberty Insurance Corp.

NAMED INSURED	POLICY NUMBER
Animal Healthcare of Kansas, P.A.	WA7-63D-504078-671
Animal Healthcare of North Carolina, P.C.	WA7-63D-504078-661
Animal Healthcare of Rhode Island, PC	WA7-63D-504078-651
Animal Healthcare of Texas, P.C.	WA7-63D-504078-641
Companion Pet Services of Alabama, P.C.	WA7-63D-504078-611
Manhattan Veterinary Group, P.C.	WA7-63D-504078-601
Pay It Forward II, PC	WA7-63D-504078-591
Pet Services of District of Columbia, P.C.	WA7-63D-504078-581
Pet Services of Idaho, P.C.	WA7-63D-504078-571
Pet Services of Michigan, P.C.	WA7-63D-504078-551
Pet Services of Minnesota, P.C.	WA7-63D-504078-541
Pet Services of Nebraska, P.C.	WA7-63D-504078-531
Pet Services of New Jersey, P.C.	WA7-63D-504078-521
Pet Services of Washington, P.S.	WA7-63D-504078-511
Pet Services of West Virginia, Inc.	WA7-63D-504078-501
Veterinary Healthcare of New Hampshire, P.C.	WA7-63D-504078-491
Pet Services of Vermont, P.C.	WA7-63D-504078-481
Pet Services of Maine, P.C.	WA7-63D-504078-471
Pet Services of Louisiana, A Professional Corporation	WA7-63D-504078-561



Liberty Mutual Insurance

National Accounts - Casualty
157 Berkeley Street
Boston, MA 02116
(617) 357-9500

December 31, 2020

Insured Name: VCA, Inc.

Policy Numbers: EB2-631-504078-681
KE1-631-504090-161

To Whom It May Concern:

Please accept this letter as confirmation that this customer has placed their insurance with Liberty Mutual under the above policy numbers. Coverage is bound with the endorsements listed below.

I hope this will suffice for verification purposes. Please advise if any additional information is needed.

Sincerely,

Justin Sinkbeil
Senior Account Analyst
National Insurance Risk Management

Liberty Mutual Insurance
One Battery Park Plaza, 30th Floor
New York, New York 10004



Liberty Mutual Insurance

National Accounts - Casualty
157 Berkeley Street
Boston, MA 02116
(617) 357-9500

Endorsements:

General Liability:

- Primary And Noncontributory - Other Insurance Condition - CG 20 01 04 13
 - You have agreed in writing in a contract or agreement.
- Blanket Additional Insured - LN 20 01 06 05
 - Any person or organization for who you have agreed in writing.
- Waiver Of Transfer Of Rights Of Recovery Against Others To Us - CG 24 04 05 09
 - Any person or organization with whom you have agreed in writing to waive any right of recovery prior to a loss.
- Additional Insured - Managers Or Lessors Of Premises - CG 20 11 04 13
 - All person(s) or organization(s) leasing premises to you, where required by written contract or agreement entered into prior to loss.
- Additional Insured – Mortgagee, Assignee, Or Receiver CG 20 18 04 13
 - Any, all covered locations.



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
01/03/2021

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 Aon Risk Services Northeast, Inc. New York NY Office One Liberty Plaza 165 Broadway, Suite 3201 New York NY 10006 USA	CONTACT NAME:	
	PHONE (A/C. No. Ext): (866) 283-7122	FAX (A/C. No.): (800) 363-0105
INSURED VCA, Inc. 12401 W Olympic Blvd. Los Angeles CA 90064 USA	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	NAIC #	
	INSURER A: Liberty Insurance Corporation	42404
	INSURER B: Liberty Mutual Fire Ins Co	23035
	INSURER C:	
	INSURER D:	
INSURER E:		
INSURER F:		

COVERAGES**CERTIFICATE NUMBER:** 570085598769**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.

Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			EB2631504078681 SIR applies per policy terms & conditions	01/01/2021	01/01/2022	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) Excluded PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			AS2-631-504078-041	01/01/2021	01/01/2022	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION						EACH OCCURRENCE AGGREGATE
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	WA763D504078621 Work Comp AOS WA763D504078631 Work Comp WI	01/01/2021 01/01/2021	01/01/2022 01/01/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE-EA EMPLOYEE \$1,000,000 E.L. DISEASE-POLICY LIMIT \$1,000,000
B	E&O-MPL-XS			EB2631504078681 SIR applies per policy terms & conditions	01/01/2021	01/01/2022	Each Vet Incident \$2,000,000 Aggregate \$4,000,000

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

RE: # 215 VCA Decatur Animal Hospital 1117 N. Decatur Blvd., Las Vegas, NV 89108. Veterinary Services to K-9 unit of the North Las Vegas Police Department as per written agreement. Certificate holder, its officers and employees are included as Additional Insured in accordance with the policy provisions of the General Liability and Automobile Liability policies. A waiver of Subrogation is granted in favor of Certificate Holder in accordance with the policy provisions of the General Liability, Automobile Liability and Workers Compensation policies. General Liability Policy evidenced herein is Primary and Non-Contributory to other insurance available to an Additional Insured, but only in accordance with the policy's provisions.

CERTIFICATE HOLDER**CANCELLATION**

North Las Vegas Police Department Attn: Sgt. Paul Manteufel 2250 Las Vegas Blvd. Las Vegas NV 89030 USA	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 <i>Aon Risk Services Northeast, Inc.</i>



ADDITIONAL REMARKS SCHEDULE

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.
POLICY NUMBER See Certificate Number: 570085598769		
CARRIER See Certificate Number: 570085598769	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 25 **FORM TITLE:** Certificate of Liability Insurance

ADDITIONAL NAMED INSURED:

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 Animal Care Centers of America, Inc.
 Animal Healthcare of Kansas, P.A.
 Animal Healthcare of North Carolina, P.C.
 Animal Healthcare of Rhode Island, PC
 Animal Healthcare of Texas, P.C.
 Antech Diagnostics, Inc.
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 Camp Bow Wow Franchising, Inc.
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 Edgebrook Animal Hospital, LP
 Edgebrook, Inc.
 Manhattan Veterinary Group, P.C.
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 Pet Partners Management of California, Inc.
 Pet Partners, LLC
 Pet Services of District of Columbia, P.C.
 Pet Services of Idaho, P.C.
 Pet Services of Louisiana, A Professional Corporation
 Pet Services of Maine, P.C.
 Pet Services of Michigan, P.C.
 Pet Services of Minnesota, P.C.
 Pet Services of Nebraska, P.C.
 Pet Services of New Jersey, P.C.
 Pet Services of Vermont, PC
 Pet Services of Washington, P.S.
 Pet Services of West Virginia, Inc.
 Pets' Rx, Inc.
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 VCA Inc.
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 VCA Old Marple Animal Hospital, LLC
 VCA Old Trail Animal Hospital, LLC
 VCA Orange County Veterinary Specialists, LP
 VCA Real Property Acquisition Corporation
 VCA San Francisco Veterinary Specialists, LP

**ADDITIONAL REMARKS SCHEDULE**

Page _ of _

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.	
POLICY NUMBER See Certificate Number: 570085598769		EFFECTIVE DATE:	
CARRIER See Certificate Number: 570085598769	NAIC CODE		

ADDITIONAL REMARKS**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,****FORM NUMBER:** ACORD 25 **FORM TITLE:** Certificate of Liability Insurance**ADDITIONAL NAMED INSURED:**

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VCA Westlake Village Animal Hospital, LP
VCA Woodford Animal Hospital, LP
Veterinary Centers of America-Texas, Inc.
Veterinary Healthcare of New Hampshire, P.C.
Vicar Operating, Inc.



AGENCY CUSTOMER ID: 570000063611

LOC #:

ADDITIONAL REMARKS SCHEDULE

Page _ of _

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.	
POLICY NUMBER See Certificate Number: 570085598769		EFFECTIVE DATE:	
CARRIER See Certificate Number: 570085598769	NAIC CODE		

ADDITIONAL REMARKS**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,****FORM NUMBER:** ACORD 25 **FORM TITLE:** Certificate of Liability Insurance

Workers' Compensation Policies

Effective January 1, 2021 - January 1, 2022
Underwriting Company - Liberty Insurance Corp.

NAMED INSURED	POLICY NUMBER
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Companion Pet Services of Alabama, P.C.	WA7-63D-504078-611
Manhattan Veterinary Group, P.C.	WA7-63D-504078-601
Pay It Forward II, PC	WA7-63D-504078-591
Pet Services of District of Columbia, P.C.	WA7-63D-504078-581
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Pet Services of Minnesota, P.C.	WA7-63D-504078-541
Pet Services of Nebraska, P.C.	WA7-63D-504078-531
Pet Services of New Jersey, P.C.	WA7-63D-504078-521
Pet Services of Washington, P.S.	WA7-63D-504078-511
Pet Services of West Virginia, Inc.	WA7-63D-504078-501
Veterinary Healthcare of New Hampshire, P.C.	WA7-63D-504078-491
Pet Services of Vermont, P.C.	WA7-63D-504078-481
Pet Services of Maine, P.C.	WA7-63D-504078-471
Pet Services of Louisiana, A Professional Corporation	WA7-63D-504078-561



Liberty Mutual Insurance

National Accounts - Casualty
157 Berkeley Street
Boston, MA 02116
(617) 357-9500

December 31, 2020

Insured Name: VCA, Inc.
Policy Numbers: EB2-631-504078-681
KE1-631-504090-161

To Whom It May Concern:

Please accept this letter as confirmation that this customer has placed their insurance with Liberty Mutual under the above policy numbers. Coverage is bound with the endorsements listed below.

I hope this will suffice for verification purposes. Please advise if any additional information is needed.

Sincerely,

Justin Sinkbeil
Senior Account Analyst
National Insurance Risk Management

Liberty Mutual Insurance
One Battery Park Plaza, 30th Floor
New York, New York 10004



Liberty Mutual Insurance

National Accounts - Casualty
157 Berkeley Street
Boston, MA 02116
(617) 357-9500

Endorsements:

General Liability:

- Primary And Noncontributory - Other Insurance Condition - CG 20 01 04 13
 - You have agreed in writing in a contract or agreement.
- Blanket Additional Insured - LN 20 01 06 05
 - Any person or organization for who you have agreed in writing.
- Waiver Of Transfer Of Rights Of Recovery Against Others To Us - CG 24 04 05 09
 - Any person or organization with whom you have agreed in writing to waive any right of recovery prior to a loss.
- Additional Insured - Managers Or Lessors Of Premises - CG 20 11 04 13
 - All person(s) or organization(s) leasing premises to you, where required by written contract or agreement entered into prior to loss.
- Additional Insured – Mortgagee, Assignee, Or Receiver CG 20 18 04 13
 - Any, all covered locations.

EXHIBIT C

Second Renewal

(See attached pages)

Mayor
John J. Lee

Council Members
Issac E. Barron
Pamela A. Goynes-Brown
Scott Black
Richard J. Cherchio



City Manager
Ryann Juden

Your Community of Choice
City Manager's Office

2250 Las Vegas Boulevard, North · Suite #900 · North Las Vegas, Nevada 89030
Telephone: (702) 633-1005 · Fax: (702) 633-1339 · TDD: (800) 326-6868
www.cityofnorthlasvegas.com

August 10, 2022

VCA Animal Hospitals, Inc.
d/b/a VCA Decatur Animal Hospital
Attention: Mellissa Walton
1117 N. Decatur Blvd.
Las Vegas, NV 89108

Re: Renewal of Agreement to use Local Government Contract No. 605471 for Veterinary Services

Dear Ms. Walton,

On May 5, 2021, The City of North Las Vegas and VCA Animal Hospitals, Inc., d/b/a VCA Decatur Animal Hospital entered into an Agreement to use Local Government Contract No. 605471 for Veterinary Services ("Agreement"), attached hereto as Exhibit A. The initial term of the Agreement expired on November 30, 2021.

Pursuant to the terms of the Agreement, the City has the authority to renew the Agreement for up to two (2), one-year terms. On October 18, 2021, the City exercised its first one-year option to renew the Agreement, authorizing the performance of the contract through November 30, 2022 ("First Renewal"). A copy of the First Renewal notification is attached hereto as Exhibit B.

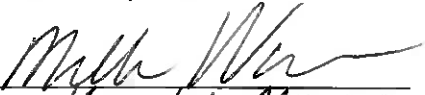
Please accept this correspondence as notice that the City hereby exercises its second one-year option to renew the Agreement. This renewal option will authorize the performance of the contract from December 1, 2022 to November 30, 2023.

Please contact Brittany Contardi, Purchasing Paralegal, by phone at 702-633-1463 or by email at contardib@cityofnorthlasvegas.com if you have any questions or concerns.

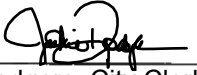
City of North Las Vegas,
a Nevada municipal corporation

VCA Animal Hospitals, Inc.,
d/b/a VCA Decatur Animal Hospital,
a Delaware corporation

By: 
Ryann Juden, City Manager

By: 
Title: Hospital Manager

Attest:

By: 
Jackie Rodgers, City Clerk

Approved as to Form:

By: 
Micaela Rustia Moore, City Attorney



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
01/10/2022

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 Aon Risk Services Northeast, Inc. New York NY Office One Liberty Plaza 165 Broadway, Suite 3201 New York NY 10006 USA	CONTACT NAME:	
	PHONE (A/C. No. Ext): (866) 283-7122	FAX (A/C. No.): (800) 363-0105
INSURED VCA, Inc. 12401 W Olympic Blvd. Los Angeles CA 90064 USA	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	NAIC #	
	INSURER A: Liberty Mutual Fire Ins Co	
	INSURER B: Liberty Insurance Corporation	
	INSURER C:	
	INSURER D:	
INSURER E:		
INSURER F:		

COVERAGES**CERTIFICATE NUMBER:** 570091249844**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.

Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC <input type="checkbox"/> OTHER:			EB2631504078681 SIR applies per policy terms & conditions	01/01/2021	02/01/2022	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) Excluded PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			AS2-631-504078-042	01/01/2022	01/01/2023	COMBINED SINGLE LIMIT (Ea accident) \$2,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION						EACH OCCURRENCE AGGREGATE
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N	N/A	WA763D504078622 Work Comp AOS WC7631504078632 Work Comp WI	01/01/2022	01/01/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE-EA EMPLOYEE \$1,000,000 E.L. DISEASE-POLICY LIMIT \$1,000,000
A	E&O-MPL-XS			EB2631504078681 Vet Prof Liability SIR applies per policy terms & conditions	01/01/2021	02/01/2022	Each Vet Incident \$2,000,000 Aggregate \$4,000,000

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

RE: # 215 VCA Decatur Animal Hospital 1117 N. Decatur Blvd., Las Vegas, NV 89108. Veterinary Services to K-9 unit of the North Las Vegas Police Department as per written agreement. Certificate holder, its officers and employees are included as Additional Insured in accordance with the policy provisions of the General Liability and Automobile Liability policies. A waiver of Subrogation is granted in favor of Certificate Holder in accordance with the policy provisions of the General Liability, Automobile Liability and Workers Compensation policies. General Liability Policy evidenced herein is Primary and Non-Contributory to other insurance available to an Additional Insured, but only in accordance with the policy's provisions.

CERTIFICATE HOLDER**CANCELLATION**

North Las Vegas Police Department Attn: Sgt. Paul Manteufel 2250 Las Vegas Blvd. Las Vegas NV 89030 USA	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 <i>Aon Risk Services Northeast, Inc.</i>



ADDITIONAL REMARKS SCHEDULE

Page _ of _

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.
POLICY NUMBER See Certificate Number: 570091249844		
CARRIER See Certificate Number: 570091249844	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 25 **FORM TITLE:** Certificate of Liability Insurance

ADDITIONAL NAMED INSURED:

Animal Care Center at Mill Run, Inc.
 Animal Care Centers of America, Inc.
 Animal Healthcare of Kansas, P.A.
 Animal Healthcare of North Carolina, P.C.
 Animal Healthcare of Rhode Island, PC
 Animal Healthcare of Texas, P.C.
 Antech Diagnostics, Inc.
 Biovet (USA) Inc.
 Camp Bow Wow Franchising, Inc.
 CBW Operating, Inc.
 Companion Pet Services of Alabama, P.C.
 Edgebrook Animal Hospital, LP
 Edgebrook, Inc.
 Manhattan Veterinary Group, P.C.
 Pay It Forward II, PC
 Pet Partners Global Holdings LLC
 Pet Partners Global LLC
 Pet Partners Holdings, LLC
 Pet Partners Management of California, Inc.
 Pet Partners, LLC
 Pet Services of District of Columbia, P.C.
 Pet Services of Idaho, P.C.
 Pet Services of Louisiana, A Professional Corporation
 Pet Services of Maine, P.C.
 Pet Services of Michigan, P.C.
 Pet Services of Minnesota, P.C.
 Pet Services of Nebraska, P.C.
 Pet Services of New Jersey, P.C.
 Pet Services of Vermont, PC
 Pet Services of Washington, P.S.
 Pet Services of West Virginia, Inc.
 Pets' Rx, Inc.
 Sound Technologies, Inc.
 South County Veterinary Clinic, Inc.
 The Bow Wow Buddies Foundation, Inc.
 VCA - Asher, Inc.
 VCA Acacia Animal Health Center, LP
 VCA Advanced Veterinary Care Center, LLC
 VCA Animal Clinic of Parker, LLC
 VCA Animal Diagnostic Clinic, LLC
 VCA Animal Hospitals, Inc.
 VCA Animal Hospitals-Texas, L.P.
 VCA Asher Animal Hospital, LP
 VCA Charities
 VCA Companion Animal Hospital, L.P.
 VCA Inc.
 VCA International Limited Partner, LLC
 VCA Lakewood Animal Hospital (Cerritos), LP
 VCA Los Angeles Veterinary Specialists, LP
 VCA Madera Pet Hospital, LP
 VCA Maple Leaf, Inc.
 VCA Metroplex Animal Hospital, LP
 VCA Mill Run Animal Hospital, LP
 VCA North Academy & Briargate Animal Hospitals, LLC
 VCA of New York, Inc.
 VCA Old Marple Animal Hospital, LLC
 VCA Old Trail Animal Hospital, LLC
 VCA Orange County Veterinary Specialists, LP
 VCA Real Property Acquisition Corporation
 VCA San Francisco Veterinary Specialists, LP



AGENCY CUSTOMER ID: 570000063611

LOC #:

ADDITIONAL REMARKS SCHEDULE

Page _ of _

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.	
POLICY NUMBER See Certificate Number: 570091249844		EFFECTIVE DATE:	
CARRIER See Certificate Number: 570091249844	NAIC CODE		

ADDITIONAL REMARKS**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,****FORM NUMBER:** ACORD 25 **FORM TITLE:** Certificate of Liability Insurance**ADDITIONAL NAMED INSURED:**

VCA Saw Mill Animal Hospital, LP
VCA South County Animal Hospital, LLC
VCA Valley Oak Veterinary Center, LP
VCA Westlake Village Animal Hospital, LP
VCA Woodford Animal Hospital, LP
Veterinary Centers of America-Texas, Inc.
Veterinary Healthcare of New Hampshire, P.C.
Vicar Operating, Inc.



AGENCY CUSTOMER ID: 570000063611

LOC #:

ADDITIONAL REMARKS SCHEDULE

Page _ of _

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.	
POLICY NUMBER See Certificate Number: 570091249844		EFFECTIVE DATE:	
CARRIER See Certificate Number: 570091249844	NAIC CODE		

ADDITIONAL REMARKS**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,****FORM NUMBER:** ACORD 25 **FORM TITLE:** Certificate of Liability Insurance

Workers' Compensation Policies

Effective January 1, 2022 - January 1, 2023
Underwriting Company - Liberty Insurance Corp.

NAMED INSURED	POLICY NUMBER
Animal Healthcare of Kansas, P.A.	WA7-63D-504078-672
Animal Healthcare of North Carolina, P.C.	WA7-63D-504078-662
Animal Healthcare of Rhode Island, PC	WA7-63D-504078-652
Animal Healthcare of Texas, P.C.	WA7-63D-504078-642
Companion Pet Services of Alabama, P.C.	WA7-63D-504078-612
Manhattan Veterinary Group, P.C.	WA7-63D-504078-602
Pay It Forward II, PC	WA7-63D-504078-592
Pet Services of District of Columbia, P.C.	WA7-63D-504078-582
Pet Services of Idaho, P.C.	WA7-63D-504078-572
Pet Services of Michigan, P.C.	WA7-63D-504078-552
Pet Services of Minnesota, P.C.	WA7-63D-504078-542
Pet Services of Nebraska, P.C.	WA7-63D-504078-532
Pet Services of New Jersey, P.C.	WA7-63D-504078-522
Pet Services of Washington, P.S.	WA7-63D-504078-512
Pet Services of West Virginia, Inc.	WA7-63D-504078-502
Veterinary Healthcare of New Hampshire, P.C.	WA7-63D-504078-492
Pet Services of Vermont, P.C.	WA7-63D-504078-482
Pet Services of Maine, P.C.	WA7-63D-504078-472
Pet Services of Louisiana, A Professional Corporation	WA7-63D-504078-562



Liberty Mutual Insurance

National Accounts - Casualty
157 Berkeley Street
Boston, MA 02116
(617) 357-9500

December 30, 2021

Insured Name: Mars, Incorporated
Policy Numbers: WA7-63D-504078-012
WC7-631-504078-022
EW2-63N-504078-072
AS2-631-504078-041

To Whom It May Concern:

Please accept this letter as confirmation that this customer has placed their insurance with Liberty Mutual under the above policy numbers. Coverage is bound with the blanket endorsements listed below.

I hope this will suffice for verification purposes. Please advise if any additional information is needed.

Sincerely,

Justin Sinkbeil
Senior Account Analyst
National Insurance Risk Management

Liberty Mutual Insurance
One Battery Park Plaza, 30th Floor
New York, New York 10004



Liberty Mutual Insurance

National Accounts - Casualty
157 Berkeley Street
Boston, MA 02116
(617) 357-9500

Endorsements:

Workers Compensation:

- Waiver Of Our Right to Recover From Others Endorsement WC 00 03 13
- Notice of Cancellation to Third Parties WC 99 20 74

General Liability:

- Blanket Additional Insured - LN 20 01 06 05
- Waiver Of Transfer Of Rights Of Recovery Against Others To Us CG 24 04 05 09
- Notice of Cancellation to Third Parties LIM 99 02 08 11
- Additional Insured - Vendors CG 20 15 04 13
- Additional Insured - Managers or Lessors of Premises CG 20 11 04 13

Auto Liability:

- Broad Form Named Insured Endorsement AM 85 155 0119
- Waiver of Transfer of Rights of Recovering Against Others to Us {Waiver of Subrogation) CA 04 44 03 10
- Notice of Cancellation to Third Parties LIM 99 02 08 11



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
02/16/2022

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 Aon Risk Services Northeast, Inc. New York NY Office One Liberty Plaza 165 Broadway, Suite 3201 New York NY 10006 USA	CONTACT NAME:	
	PHONE (A/C. No. Ext): (866) 283-7122	FAX (A/C. No.): (800) 363-0105
INSURED VCA, Inc. 12401 W Olympic Blvd. Los Angeles CA 90064 USA	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	NAIC #	
	INSURER A: Liberty Mutual Fire Ins Co	23035
	INSURER B: Liberty Insurance Corporation	42404
	INSURER C:	
	INSURER D:	
INSURER E:		
INSURER F:		

COVERAGES**CERTIFICATE NUMBER:** 570091647659**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.

Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:			EB2631504078682 SIR applies per policy terms & conditions	02/01/2022	01/01/2023	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) Excluded PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			AS2-631-504078-042	01/01/2022	01/01/2023	COMBINED SINGLE LIMIT (Ea accident) \$2,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION						EACH OCCURRENCE AGGREGATE
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe in under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	WA763D504078622 Work Comp AOS WC7631504078632 Work Comp WI	01/01/2022 01/01/2022	01/01/2023 01/01/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE-EA EMPLOYEE \$1,000,000 E.L. DISEASE-POLICY LIMIT \$1,000,000
A	E&O-MPL-XS			EB2631504078682 Vet Prof Liability SIR applies per policy terms & conditions	02/01/2022	01/01/2023	Each vet Incident \$2,000,000 Aggregate \$4,000,000

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

RE: # 215 VCA Decatur Animal Hospital 1117 N. Decatur Blvd., Las Vegas, NV 89108. Veterinary Services to K-9 unit of the North Las Vegas Police Department as per written agreement. Certificate holder, its officers and employees are included as Additional Insured in accordance with the policy provisions of the General Liability and Automobile Liability policies. A waiver of Subrogation is granted in favor of Certificate Holder in accordance with the policy provisions of the General Liability, Automobile Liability and Workers Compensation policies. General Liability Policy evidenced herein is Primary and Non-Contributory to other insurance available to an Additional Insured, but only in accordance with the policy's provisions.

CERTIFICATE HOLDER**CANCELLATION**

North Las Vegas Police Department Attn: Sgt. Paul Manteufel 2250 Las Vegas Blvd. Las Vegas NV 89030 USA	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 <i>Aon Risk Services Northeast, Inc.</i>



ADDITIONAL REMARKS SCHEDULE

Page _ of _

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.
POLICY NUMBER See Certificate Number: 570091647659		
CARRIER See Certificate Number: 570091647659	NAIC CODE	EFFECTIVE DATE:

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THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 **FORM TITLE:** Certificate of Liability Insurance

ADDITIONAL NAMED INSURED:

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 Animal Healthcare of Kansas, P.A.
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 Animal Healthcare of Rhode Island, PC
 Animal Healthcare of Texas, P.C.
 Antech Diagnostics, Inc.
 Biovet (USA) Inc.
 Camp Bow Wow Franchising, Inc.
 CBW Operating, Inc.
 Companion Pet Services of Alabama, P.C.
 Edgebrook Animal Hospital, LP
 Edgebrook, Inc.
 Manhattan Veterinary Group, P.C.
 Pay It Forward II, PC
 Pet Partners Global Holdings LLC
 Pet Partners Global LLC
 Pet Partners Holdings, LLC
 Pet Partners Management of California, Inc.
 Pet Partners, LLC
 Pet Services of District of Columbia, P.C.
 Pet Services of Idaho, P.C.
 Pet Services of Louisiana, A Professional Corporation
 Pet Services of Maine, P.C.
 Pet Services of Michigan, P.C.
 Pet Services of Minnesota, P.C.
 Pet Services of Nebraska, P.C.
 Pet Services of New Jersey, P.C.
 Pet Services of Vermont, PC
 Pet Services of Washington, P.S.
 Pet Services of West Virginia, Inc.
 Pets' Rx, Inc.
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 VCA Animal Hospitals-Texas, L.P.
 VCA Asher Animal Hospital, LP
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 VCA Companion Animal Hospital, L.P.
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 VCA Madera Pet Hospital, LP
 VCA Maple Leaf, Inc.
 VCA Metroplex Animal Hospital, LP
 VCA Mill Run Animal Hospital, LP
 VCA North Academy & Briargate Animal Hospitals, LLC
 VCA of New York, Inc.
 VCA Old Marple Animal Hospital, LLC
 VCA Old Trail Animal Hospital, LLC
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 VCA Real Property Acquisition Corporation
 VCA San Francisco Veterinary Specialists, LP

**ADDITIONAL REMARKS SCHEDULE**

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AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.	
POLICY NUMBER See Certificate Number: 570091647659		EFFECTIVE DATE:	
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Veterinary Centers of America-Texas, Inc.
Veterinary Healthcare of New Hampshire, P.C.
Vicar Operating, Inc.



AGENCY CUSTOMER ID: 570000063611

LOC #:

ADDITIONAL REMARKS SCHEDULE

Page _ of _

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.	
POLICY NUMBER See Certificate Number: 570091647659		EFFECTIVE DATE:	
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Underwriting Company - Liberty Insurance Corp.

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Pay It Forward II, PC	WA7-63D-504078-592
Pet Services of District of Columbia, P.C.	WA7-63D-504078-582
Pet Services of Idaho, P.C.	WA7-63D-504078-572
Pet Services of Michigan, P.C.	WA7-63D-504078-552
Pet Services of Minnesota, P.C.	WA7-63D-504078-542
Pet Services of Nebraska, P.C.	WA7-63D-504078-532
Pet Services of New Jersey, P.C.	WA7-63D-504078-522
Pet Services of Washington, P.S.	WA7-63D-504078-512
Pet Services of West Virginia, Inc.	WA7-63D-504078-502
Veterinary Healthcare of New Hampshire, P.C.	WA7-63D-504078-492
Pet Services of Vermont, P.C.	WA7-63D-504078-482
Pet Services of Maine, P.C.	WA7-63D-504078-472
Pet Services of Louisiana, A Professional Corporation	WA7-63D-504078-562

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:

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

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

SCHEDULE

Name(s) Of Person(s) Or Organizations(s):

Where required by written contract

Premium: \$ INCL

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The **Transfer Of Rights Of Recovery Against Others To Us** Condition does not apply to the person(s) or organization(s) shown in the Schedule, but only to the extent that subrogation is waived prior to the "accident" or the "loss" under a contract with that person or organization.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – STATE OR GOVERNMENTAL AGENCY OR SUBDIVISION OR POLITICAL SUBDIVISION – PERMITS OR AUTHORIZATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

State Or Governmental Agency Or Subdivision Or Political Subdivision:

Any State or Governmental Agency or Subdivision or Political Subdivision where required by written contract, written agreement, or because of a permit issued by a state or political subdivision.

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 any state or governmental agency or subdivision or political subdivision shown in the Schedule, subject to the following provisions:

1. This insurance applies only with respect to operations performed by you or on your behalf for which the state or governmental agency or subdivision or political subdivision has issued a permit or authorization.

However:

- a. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- b. 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.

2. This insurance does not apply to:

- a. "Bodily injury", "property damage" or "personal and advertising injury" arising out of operations performed for the federal government, state or municipality; or
- b. "Bodily injury" or "property damage" included within the "products-completed operations hazard".

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

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

1. Required by the contract or agreement; or
 2. Available under the applicable Limits of Insurance shown in the Declarations;
- whichever is less.

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

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

This endorsement modifies insurance provided under the following:

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

SCHEDULE

Name Of Person Or Organization:	Any person or organization with whom you have agreed in writing to waive any right of recovery prior to a loss.
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 we may have against the person or organization shown in the Schedule above because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard". This waiver applies only to the person or organization shown in the Schedule above.

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
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.

**WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT -
CALIFORNIA**

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.

Schedule

Additional premium is a percent of the California Manual Workers Compensation premium. Subject to a minimum premium charge of \$250 per policy.

Person or Organization
Where required by contract or
written agreement prior to loss and
allowed by law.

Job Description

Issued by Liberty Insurance Corporation 21814

For attachment to Policy No. WA7-63D-504078-622

Effective Date

Premium \$

Issued to VCA, Inc.

Endorsement No.

EXHIBIT D

First Amendment

(See attached pages)

**FIRST AMENDMENT TO THE AGREEMENT TO USE LOCAL GOVERNMENT
CONTRACT NO. 605471 FOR VETERINARY SERVICES**

This First Amendment to the Agreement to Use Local Government Contract No. 605471 For Veterinary Services ("First Amendment") is made and entered into on 03/21/2024 11:43:12 PDT ("Amendment Effective Date") by and between the City of North Las Vegas, a Nevada municipal corporation ("City"), and VCA Animal Hospitals, Inc., d/b/a VCA Decatur Animal Hospital ("Vendor").

RECITALS

WHEREAS, on May 12, 2021, the City and Vendor entered into to the Agreement to Use Local Government Contract No. 605471 for Veterinary Services ("Original Agreement"), attached hereto as **Exhibit A**; and

WHEREAS, on October 18, 2021, the City and Vendor entered into a Renewal of Agreement to use Local Government Contract No. 605471 for Veterinary Services ("First Renewal"), attached hereto as **Exhibit B**; and

WHEREAS, on August 10, 2022, the City and Vendor entered into a Renewal of Agreement to use Local Government Contract No. 605471 for Veterinary Services ("Second Renewal"), attached hereto as **Exhibit C**; and

WHEREAS, the City and Vendor wish to accept price increase notification dated October 24, 2023 ("Price Increase"), attached hereto as **Exhibit D**; and

WHEREAS, the City and Vendor wish to extend the term of the Original Agreement to end November 30, 2025; and

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which the parties acknowledge, the parties agree as follows:

AGREEMENT

1. Section 2 of the Original Agreement are hereby deleted and replaced with the following:

2.1. The term of this Agreement shall commence on July 25, 2021 and will continue in effect until November 30, 2025 ("Term"), unless earlier terminated in accordance with the terms here.

2.2. The City shall purchase the goods and services according to the prices and fees described in Exhibit A ("Original Contract") and Exhibit D ("Pricing List") in an amount not to exceed Twelve Thousand, Five Hundred Dollars and 00/100 (\$12,500.00) per fiscal year, based on the Schedule A below. The total not-to-exceed amount of the Agreement is Fifty Thousand and 00/100 (\$50,000.00). The prices in Exhibit D shall remain in effect for the duration of this Agreement. No additional compensation shall be paid, and no increase

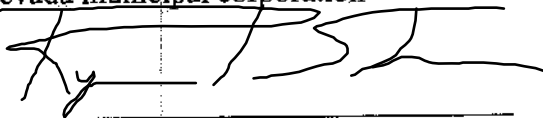
in the time of performance shall be awarded, to the Vendor for changes referenced in this Agreement without the prior written authorization of the City to proceed with such changes.

Schedule A:	
Fiscal Year	Amount
07/25/2021 - 11/30/2021	\$ 4,166.67
12/01/2021 - 06/30/2022 (First Renewal)	\$ 7,291.67
07/01/2022 - 11/30/2022 (First Renewal)	\$ 5,208.33
12/01/2022 - 06/30/2023 (Second Renewal)	\$ 7,291.67
07/01/2023 - 11/30/2023 (Second Renewal)	\$ 5,208.33
03/01/2024 - 06/30/2024	\$ 3,125.00
07/01/2024 - 06/30/2025	\$ 12,500.00
07/01/2025 - 11/30/2025	\$ 5,208.33
Total:	\$50,000.00

2. The use of signatures via facsimile, email, or other electronic medium shall have the same force and effect as original signatures.

IN WITNESS WHEREOF, the City and the Vendor have caused this First Amendment to be executed as of the day and year first above written.

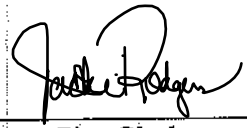
City of North Las Vegas
a Nevada municipal corporation

By: 
Ryann Juden, City Manager

VCA Animal Hospitals Inc.,
a Delaware corporation

By: Ashley Nagelhart
Title: Hospital Manager / LVT
Name: Ashley Nagelhart
3113124

ATTEST:

By: 
Jackie Rodgers, City Clerk

Approved as to Form:

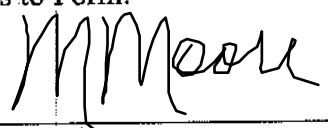
By: 
Micaela Rustia Moore, City Attorney

EXHIBIT D

Price Increase

(see attached pages)



October 24, 2023

VCA Decatur Animal Hospital
1117 N. Decatur Blvd.
Las Vegas, NV 89108

RE: **PRICE INCREASE NOTIFICATION**
CONTRACT NO. 605471 – VETERINARY SERVICES

Dear Ms. Nagelhout,

In accordance with the **LVMPD Contract No. 605741 – Veterinary Services**, Section D-12, price adjustment requests for the following renewal period may be submitted for approval to the Purchasing Unit. Based on the Consumer Price Index (CPI) for the contracted services and time period, a price adjustment in the amount of 22% has been approved. This price increase will be effective on JANUARY 1, 2024.

Additionally, the price list has been revised to realign service offerings to current availability and operations at the VCA Decatur Animal Hospital. This should simplify services and fees for the Hospital, contract administrators and users.

Questions regarding the above revisions should be directed to Jamielynn Larocco at (702) 828-5788.

Sincerely,

Jamielynn Larocco
Purchasing Analyst

Attachment: Contract No. 605471 Price List

CC: File

LVMPD Suggested Contracted Prices

Item #	Exams	Old Price	New Price
	With Exams and Vaccination (Wellness Visits) we are still proposing the new Price listed below.		
1	Exam Well Patient	\$56.50	\$68.93
2	Exam Medical Condition	\$56.50	\$68.93
3	Exam/Consultation Recheck (w/in 90 Days of full exam)	\$44.00	\$53.68
4	Exam Ear/Skin Recheck (w/in 90 Days of full exam)	\$25.00	\$30.50
5	Exam Eye Recheck (w/in 90 days of full exam)	\$25.00	\$30.50
6	Acupuncture Consult	\$78.50	\$95.77
7	Acupuncture Recheck	\$67.00	\$81.74
8	Bordetella 1yr & 4wk	\$16.75	\$20.45
9	Borrelia (Lyme) 3wk & 1yr	\$31.65	\$38.61
10	Da2p -P 3wk \$ 1yr	\$16.75	\$20.43
11	Rattlesnake Vaccine 3wk & 1yr	\$36.30	\$44.28
12	Leptospira Vaccine 3wk & 1yr	\$22.90	\$27.93
13	K9 Rabies 1yr & 3yr	\$28.35	\$34.58
14	Influenza Bivalent Vx 1yr & 3yr	\$28.35	\$34.58
15	Occupancy L	\$31.45	\$38.36
16	Occupancy XL	\$34.60	\$42.21

On all other pricing categories we are suggesting 20% off Current and Future Pricing for all the categories below. Starting January 2024

Reason for change

- 1. Codes have Changed or have been discontinued since the list was made**
- 2. Some codes do not exist or have every existed**
- 3. Outside source (3rd party) codes that we do not have control over prices**
- 4. Codes not Charged the same (Like weight and Time)**

Radiology , Outside Radiologist. (We have not control over these codes they are an outside source)

Bandaging, Dentals, Other Medical, Laboratory (In house/ Antech Lab) Dental , Surgery



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
01/03/2024

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 Aon Risk Services Northeast, Inc. New York NY Office One Liberty Plaza 165 Broadway, Suite 3201 New York NY 10006 USA	CONTACT NAME: PHONE (A/C. No. Ext): (866) 283-7122 FAX (A/C. No.): (800) 363-0105 E-MAIL ADDRESS:														
INSURED VCA, Inc. 12401 W Olympic Blvd. Los Angeles CA 90064 USA	<table><tr><th>INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A: Liberty Mutual Fire Ins Co</td><td>23035</td></tr><tr><td>INSURER B: LM Insurance Corporation</td><td>33600</td></tr><tr><td>INSURER C:</td><td></td></tr><tr><td>INSURER D:</td><td></td></tr><tr><td>INSURER E:</td><td></td></tr><tr><td>INSURER F:</td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Liberty Mutual Fire Ins Co	23035	INSURER B: LM Insurance Corporation	33600	INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															

COVERAGES**CERTIFICATE NUMBER:** 570103465499**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.

Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS												
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC <input type="checkbox"/> OTHER:			EB2631504078684 SIR applies per policy terms & conditions	01/01/2024	01/01/2025	<table><tr><td>EACH OCCURRENCE</td><td>\$2,000,000</td></tr><tr><td>DAMAGE TO RENTED PREMISES (Ea occurrence)</td><td>\$1,000,000</td></tr><tr><td>MED EXP (Any one person)</td><td>Excluded</td></tr><tr><td>PERSONAL & ADV INJURY</td><td>\$2,000,000</td></tr><tr><td>GENERAL AGGREGATE</td><td>\$4,000,000</td></tr><tr><td>PRODUCTS - COMP/OP AGG</td><td>\$4,000,000</td></tr></table>	EACH OCCURRENCE	\$2,000,000	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000	MED EXP (Any one person)	Excluded	PERSONAL & ADV INJURY	\$2,000,000	GENERAL AGGREGATE	\$4,000,000	PRODUCTS - COMP/OP AGG	\$4,000,000
EACH OCCURRENCE	\$2,000,000																		
DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000																		
MED EXP (Any one person)	Excluded																		
PERSONAL & ADV INJURY	\$2,000,000																		
GENERAL AGGREGATE	\$4,000,000																		
PRODUCTS - COMP/OP AGG	\$4,000,000																		
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			AS2-C31-504078-044	01/01/2024	01/01/2025	<table><tr><td>COMBINED SINGLE LIMIT (Ea accident)</td><td>\$1,000,000</td></tr><tr><td>BODILY INJURY (Per person)</td><td></td></tr><tr><td>BODILY INJURY (Per accident)</td><td></td></tr><tr><td>PROPERTY DAMAGE (Per accident)</td><td></td></tr></table>	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000	BODILY INJURY (Per person)		BODILY INJURY (Per accident)		PROPERTY DAMAGE (Per accident)					
COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000																		
BODILY INJURY (Per person)																			
BODILY INJURY (Per accident)																			
PROPERTY DAMAGE (Per accident)																			
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION						<table><tr><td>EACH OCCURRENCE</td><td></td></tr><tr><td>AGGREGATE</td><td></td></tr></table>	EACH OCCURRENCE		AGGREGATE									
EACH OCCURRENCE																			
AGGREGATE																			
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N	N/A	WA563D504078624 Work Comp AOS WC5631504078634 Work Comp WI	01/01/2024	01/01/2025	<table><tr><td><input checked="" type="checkbox"/> PER STATUTE</td><td><input type="checkbox"/> OTHER</td><td></td></tr><tr><td>E.L. EACH ACCIDENT</td><td></td><td>\$1,000,000</td></tr><tr><td>E.L. DISEASE-EA EMPLOYEE</td><td></td><td>\$1,000,000</td></tr><tr><td>E.L. DISEASE-POLICY LIMIT</td><td></td><td>\$1,000,000</td></tr></table>	<input checked="" type="checkbox"/> PER STATUTE	<input type="checkbox"/> OTHER		E.L. EACH ACCIDENT		\$1,000,000	E.L. DISEASE-EA EMPLOYEE		\$1,000,000	E.L. DISEASE-POLICY LIMIT		\$1,000,000
<input checked="" type="checkbox"/> PER STATUTE	<input type="checkbox"/> OTHER																		
E.L. EACH ACCIDENT		\$1,000,000																	
E.L. DISEASE-EA EMPLOYEE		\$1,000,000																	
E.L. DISEASE-POLICY LIMIT		\$1,000,000																	
A	E&O - Miscellaneous Professional-Excess			EB2631504078684 Vet Prof Liability SIR applies per policy terms & conditions	01/01/2024	01/01/2025	<table><tr><td>Each Vet Incident</td><td>\$2,000,000</td></tr><tr><td>Aggregate</td><td>\$4,000,000</td></tr></table>	Each Vet Incident	\$2,000,000	Aggregate	\$4,000,000								
Each Vet Incident	\$2,000,000																		
Aggregate	\$4,000,000																		

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

RE: # 215 VCA Decatur Animal Hospital 1117 N. Decatur Blvd., Las Vegas, NV 89108. Veterinary Services to K-9 unit of the North Las Vegas Police Department as per written agreement. Certificate holder, its officers and employees are included as Additional Insured in accordance with the policy provisions of the General Liability and Automobile Liability policies. A waiver of Subrogation is granted in favor of Certificate Holder in accordance with the policy provisions of the General Liability, Automobile Liability and Workers Compensation policies. General Liability Policy evidenced herein is Primary and Non-Contributory to other insurance available to an Additional Insured, but only in accordance with the policy's provisions.

CERTIFICATE HOLDER**CANCELLATION**

North Las Vegas Police Department Attn: Sgt. Paul Manteufel 2250 Las Vegas Blvd. Las Vegas NV 89030 USA	<p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <p>AUTHORIZED REPRESENTATIVE</p> <p><i>Aon Risk Services Northeast, Inc.</i></p>
--	--

Holder Identifier : 215

Certificate No : 570103465499



THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 **FORM TITLE:** Certificate of Liability Insurance

[illegible]



ADDITIONAL REMARKS SCHEDULE

Page _ of _

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.
POLICY NUMBER See Certificate Number: 570103465499		
CARRIER See Certificate Number: 570103465499	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 **FORM TITLE:** Certificate of Liability Insurance

ADDITIONAL NAMED INSURED:

Animal Healthcare of Kansas, P.A.
 Animal Healthcare of North Carolina, P.C.
 Animal Healthcare of Rhode Island, PC
 Animal Healthcare of Texas, P.C.
 Antech Diagnostics, Inc.
 Antech Molecular Innovations, LLC
 Biovet (USA) Inc.
 Camp Bow Wow Franchising, Inc.
 CBW Operating, Inc.
 Companion Pet Services of Alabama, P.C.
 Critter Health, LLC
 Edgebrook Animal Hospital, LP
 General Fluidics Corporation
 Manhattan Veterinary Group, P.C.
 Pay It Forward II, PC
 Pet Services of District of Columbia, P.C.
 Pet Services of Idaho, P.C.
 Pet Services of Louisiana, A Professional Corporation
 Pet Services of Maine, P.C.
 Pet Services of Michigan, P.C.
 Pet Services of Minnesota, P.C.
 Pet Services of Nebraska, P.C.
 Pet Services of New Jersey, P.C.
 Pet Services of Vermont, PC
 Pet Services of Washington, P.S.
 Pet Services of West Virginia, Inc.
 Sound Technologies, Inc.
 Strategic Pharmaceutical Solutions, Inc.
 The Bow Wow Buddies Foundation, Inc.
 V2P2 LLC
 VCA Advanced Veterinary Care Center, LLC
 VCA Animal Diagnostic Clinic, LLC
 VCA Animal Hospitals, Inc.
 VCA Animal Hospitals-Texas, L.P.
 VCA Asher Animal Hospital, LP
 VCA Charities
 VCA Companion Animal Hospital, L.P.
 VCA Dudley Avenue Animal Hospital, LLC
 VCA Hyannis Animal Hospital, LP
 VCA Inc.
 VCA International Limited Partner, LLC
 VCA Los Angeles Veterinary Specialists, LP
 VCA Maple Leaf, Inc.
 VCA Metroplex Animal Hospital, LP
 VCA Mill Run Animal Hospital, LP
 VCA Old Trail Animal Hospital, LLC
 VCA Orange County Veterinary Specialists, LP
 VCA Real Property Acquisition Corporation
 VCA Saw Mill Animal Hospital, LP
 VCA South County Animal Hospital, LLC
 VCA Valley Oak Veterinary Center, LP
 VCA Westlake Village Animal Hospital, LP

**ADDITIONAL REMARKS SCHEDULE**

Page _ of _

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.	
POLICY NUMBER See Certificate Number: 570103465499		EFFECTIVE DATE:	
CARRIER See Certificate Number: 570103465499	NAIC CODE		

ADDITIONAL REMARKS**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,****FORM NUMBER:** ACORD 25 **FORM TITLE:** Certificate of Liability Insurance**ADDITIONAL NAMED INSURED:**

Vet Success US Inc.
Veterinary Healthcare of New Hampshire, P.C.
Vetica Labs, Inc.
Vicar Operating, Inc.
VCA Wexford Animal Hospital, LLC

- BioTech Laboratories U.S.A. LLC (Workers' Compensation Only)
- Diamond Animal Health, Inc. (Workers' Compensation Only)
- Heska Corporation (Workers' Compensation Only)
- MBio Diagnostics, Inc. (Workers' Compensation Only)
- MBio Health LLC (Workers' Compensation Only)



AGENCY CUSTOMER ID: 570000063611

LOC #:

ADDITIONAL REMARKS SCHEDULE

Page _ of _

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED VCA, Inc.	
POLICY NUMBER See Certificate Number: 570103465499		EFFECTIVE DATE:	
CARRIER See Certificate Number: 570103465499	NAIC CODE		

ADDITIONAL REMARKS**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,****FORM NUMBER:** ACORD 25 **FORM TITLE:** Certificate of Liability Insurance**Workers' Compensation Policies**Effective January 1, 2024 - January 1, 2025
Underwriting Company - Liberty Insurance Corp.

NAMED INSURED	POLICY NUMBER
Animal Healthcare of Kansas, P.A.	WA5-63D-504078-674
Animal Healthcare of North Carolina, P.C.	WA5-63D-504078-664
Animal Healthcare of Rhode Island, PC	WA5-63D-504078-654
Animal Healthcare of Texas, P.C.	WA5-63D-504078-644
Companion Pet Services of Alabama, P.C.	WA5-63D-504078-614
Manhattan Veterinary Group, P.C.	WA5-63D-504078-604
Pay It Forward II, PC	WA5-63D-504078-594
Pet Services of District of Columbia, P.C.	WA5-63D-504078-584
Pet Services of Idaho, P.C.	WA5-63D-504078-574
Pet Services of Michigan, P.C.	WA5-63D-504078-554
Pet Services of Minnesota, P.C.	WA5-63D-504078-544
Pet Services of Nebraska, P.C.	WA5-63D-504078-534
Pet Services of New Jersey, P.C.	WA5-63D-504078-524
Pet Services of Washington, P.S.	WA5-63D-504078-514
Pet Services of West Virginia, Inc.	WA5-63D-504078-504
Veterinary Healthcare of New Hampshire, P.C.	WA5-63D-504078-494
Pet Services of Vermont, P.C.	WA5-63D-504078-484
Pet Services of Maine, P.C.	WA5-63D-504078-474
Pet Services of Louisiana, A Professional Corporation	WA5-63D-504078-564



Liberty Mutual Insurance

National Accounts - Casualty
157 Berkeley Street
Boston, MA 02116
(617) 357-9500

December 21, 2023

Insured Name: VCA, Inc.

Policy Numbers: WA5-63D-504078-474

WA5-63D-504078-484

WA5-63D-504078-494

WA5-63D-504078-504

WA5-63D-504078-514

WA5-63D-504078-524

WA5-63D-504078-534

WA5-63D-504078-544

WA5-63D-504078-554

WA5-63D-504078-564

WA5-63D-504078-574

WA5-63D-504078-584

WA5-63D-504078-594

WA5-63D-504078-604

WA5-63D-504078-614

WA5-63D-504078-624

WC5-631-504078-634

WA5-63D-504078-644

WA5-63D-504078-654

WA5-63D-504078-664

WA5-63D-504078-674

WA7-63D-504078-714

AS2-C31-504078-044

EB2-631-504078-684

KE1-631-504090-164

TL2-631-504078-724

LQ1-631-504090-174

To Whom It May Concern:

Please accept this letter as confirmation that this customer has placed their insurance with Liberty Mutual under the above policy numbers. Coverage is bound with the endorsements listed below.

I hope this will suffice for verification purposes. Please advise if any additional information is needed.

Sincerely,

James Barnard

Underwriting Consultant

National Insurance Risk Management

Liberty Mutual Insurance
One Battery Park Plaza, 30th Floor
New York, New York 10004



Liberty Mutual Insurance

National Accounts - Casualty
157 Berkeley Street
Boston, MA 02116
(617) 357-9500

Endorsements:

Workers Compensation:

- Waiver Of Our Right to Recover From Others Endorsement WC 00 03 13
- Notice of Cancellation to Third Parties WC 99 20 74

General Liability:

- Waiver Of Transfer Of Rights Of Recovery Against Others To Us CG 24 04 05 09
- Additional Insured – Vendors CG 20 15 04 13
- Notice of Cancellation to Third Parties LIM 99 03 10 12
- Additional Insured — Managers or Lessors of Premises CG 20 11 04 13
- Blanket Additional Insured - LN 20 01 06 05
- Primary and Noncontributory - Other Insurance Condition CG 20 01 04 13

Auto Liability:

- Waiver of Transfer of Rights of Recovering Against Others to Us (Waiver of Subrogation) CA 04 44 03 10
- Primary and Noncontributory – Other Insurance Condition CA 04 49 11 16
- Notice of Cancellation to Third Parties LIM 99 02 08 11