#2 Heating Fuel Oil, Invitation for Bids Bid Form

Section 1: Berkshire County Trailer Transport

Each Section shall apply only to the Awarding Authorities listed in the Section.

OPTION 1 Daily New Haven Low Spot Market Price

Vendors Margin and Overhead above the daily New Haven Low Spot Market price, as defined in Section A, paragraph 9 of these bid specifications, for delivered oil:

\$.0625 per Gallon (to 4 decimal places)

OPTION 2 Fixed Price Futures Program

Vendor's Margin and Overhead above the January NYMEX closing price, as defined in Section A, Paragraph 9 of these bid specifications, for delivered oil:

\$ _.315 \& per Gallon (to 4 decimal places)

Signature:	_ Date: 02/16/2023
Name (Please Print): Joseph Cote	
Title: Chief Supply and Business Development Officer	_
Company: Dennis K. Burke, Inc.	
Address: 555 Constitution Drive	
City/State/Zip: Taunton, MA 02780	
Phone: 800-289-2875 Fax: 774-961-3584 E-mail: bids@bur	rkeoil.com

#2 Heating Fuel Oil, Invitation for Bids Bid Form Section 2: Franklin County Trailer Transport

Each Section shall apply only to the Awarding Authorities listed in the Section.

OPTION 1 Daily New Haven Low Spot Market Price

Vendors Margin and Overhead above the daily New Haven Low Spot Market price, as defined in Section A, paragraph 9 of these bid specifications, for delivered oil:

\$.0625 per Gallon (to 4 decimal places)

OPTION 2 Fixed Price Futures Program

Vendor's Margin and Overhead above the January NYMEX closing price, as defined in Section A, Paragraph 9 of these bid specifications, for delivered oil:

\$ _,3358 per Gallon (to 4 decimal places)

Signature:	Date: 02/16/2023
Name (Please Print): Joseph Cote	
Title: Chief Supply and Business Development Officer	
Company: Dennis K. Burke, Inc.	
Address: 555 Constitution Drive	
City/State/Zip: Taunton, MA 02780	
Phone: 800-289-2875 Fax: 774-961-3584	E-mail: bids@burkeoil.com

#2 Heating Fuel Oil, Invitation for Bids Bid Form

Section 3: Hampshire County Trailer Transport

Each Section shall apply only to the Awarding Authorities listed in the Section.

OPTION 1 Daily New Haven Low Spot Market Price

Vendors Margin and Overhead above the daily New Haven Low Spot Market price, as defined in Section A, paragraph 9 of these bid specifications, for delivered oil:

OPTION 2 Fixed Price Futures Program

Vendor's Margin and Overhead above the January NYMEX closing price, as defined in Section A, Paragraph 9 of these bid specifications, for delivered oil:

\$.3258 per Gallon (to 4 decimal places)

Signature: July Uti	Date: 02/16/2	2023
Name (Please Print): Joseph Cote		
Title: Chief Supply and Business Development Officer		
Company: Dennis K. Burke, Inc.		
Address: 555 Constitution Drive		
City/State/Zip:Taunton, MA 02780		
Phone: 800-289-2875 Fax: 774-961-3584	E-mail: bids@burkeoil.com	

#2 Heating Fuel Oil, Invitation for Bids Bid Form Section 4: Hampden County Trailer Transport

Each Section shall apply only to the Awarding Authorities listed in the Section.

OPTION 1 Daily New Haven Low Spot Market Price

Vendors Margin and Overhead above the daily New Haven Low Spot Market price, as defined in Section A, paragraph 9 of these bid specifications, for delivered oil:

\$.0625 per Gallon (to 4 decimal places)

OPTION 2 Fixed Price Futures Program

Vendor's Margin and Overhead above the January NYMEX closing price, as defined in Section A, Paragraph 9 of these bid specifications, for delivered oil:

\$.3058 per Gallon (to 4 decimal places)

Signature:	Date: 02/16/2023
Name (Please Print):Joseph Cote	
Title: Chief Supply and Business Development Officer	
Company: Dennis K. Burke, Inc.	
Address: 555 Constitution Drive	
City/State/Zip: Taunton, MA 02780	
Phone: 800-289-2875 Fax: 774-961-3584	E-mail: bids@burkeoil.com



#2 Heating Fuel Oil Invitation for Bids Dated January 30, 2023 Addendum 1 February 2, 2023

1. Change Attachment 2, section 8. as follows:

Addition of Holy Cross Perish two locations attached.

Please sign the acknowledgment form below. Enclose it with your bid submission.

I acknowledge the receipt of Addendum 1 to the LPVEC #2 Heating Fuel Oil bid:					
July Uti	Date: 02/16/23	Joseph Cote			
Signature		Name (Please Print)			
Company Dennis K. Burke, Inc.					

Section 8 Hampden County Metered Pump Truck

Awarding Authority: Holy Cross Parish
Contact Person: Kate Kelly
Address: 221 Plumbtree Rd.
City/Zip: Springfield, MA 01118

Phone: 413-783-4111 Fax: 413-788-6143

Number of Locations:

2

Sub total gallons: 7,679

Facility:

Tank Capacity:

FY 2022 #2 Oil Use:

Holy Cross Church 219 Plumtree Rd.

2 @ 250 gals.

___3,535 gals.

Holy Cross Rectory 221 Plumtree Rd.

2 @ 250 gals.

4,144 gals.

Attachment 3

CERTIFICATE OF NON-COLLUSION

The undersigned certifies under penalties of perjury that this bid or proposal has been made and submitted in good faith and without collusion or fraud with any other person. As used in this certification, the word "person" shall mean any natural person, business, partnership, corporation, union, committee, club, or other organization, entity, or group of individuals.

(Signature of individual submitting bid or proposal)

Dennis K. Burke, Inc.

(Name of Business)

Attachment 4

TAX COMPLIANCE CERTIFICATION

Pursuant to M.G.L. Chapter 62C, § 49A, I certify under penalties of perjury that I have, to my best knowledge and belief, complied with the law of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting child support.

04-2275626	Dennis K. Burke, Inc.
Social Security Number or Federal Identification Number	Business or Corporate Name
t	py:full the
Signature of Individual Co	orporate Officer (if applicable)

ACORD
ACCAL

CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY) 03/22/2022

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(les) 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 not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME:	
Aon Risk Services Central, Inc. Chicago IL Office 200 East Randolph Chicago IL 60601 USA	PHONE (A/C. No. Ext): (866) 2	-7122 FAX (A/C. No.); (800) 363-0105
	E-MAIL ADDRESS:	
	INS	ER(S) AFFORDING COVERAGE NAIC #
INSURED	INSURER A: Zuri o	American Ins Co 16535
Dennis K. Burke, Inc. 555 Constitution Drive Taunton MA 02780 USA	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	
OOVERACES C	PTIEICATE NUMBER: 570092110396	REVISION NUMBER:

COVERAGES	CERTIFICATE NUMBER: 570092110396	REVISION NUMBER:
TUIC IS TO CERTIEV THAT THE BO	LICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSU	IED TO THE INSURED NAMED ABOVE FOR THE F

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 14 policies. Limits shown are as requested

INSR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MW/DD/YYYY)	POLICY EXP	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY	MSD	1110	GL0463738611	04/01/2022	04/01/2023	EACH OCCURRENCE	\$2,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$500,000
							MED EXP (Any one person)	\$10,000
ł					i		PERSONAL & ADV INJURY	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:				1		GENERAL AGGREGATE	\$4,000,000
	X POLICY PRO- LOC						PRODUCTS - COMP/OP AGG	\$4,000,000
ļ	OTHER:	1	ł					
A	AUTOMOBILE LIABILITY			BAP 4637387-11	04/01/2022	04/01/2023	COMBINED SINGLE LIMIT (Ea socident)	\$2,000,000
							BODILY INJURY (Per person)	
	X ANYAUTO SCHEDULED			ļ			BODILY INJURY (Per accident)	
	AUTOS ONLY AUTOS NON-OWNED						PROPERTY DAMAGE (Per accident)	
1	ONLY AUTOS ONLY		1					
\vdash	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	
	EXCESS LIAB CLAIMS-MADE	ļ					AGGREGATE	
	Excess sins	ł			ļ			
A	DED RETENTION WORKERS COMPENSATION AND	╁	-	WC463738511	04/01/2022	04/01/2023	X PER STATUTE OTH-	
ì	EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE N	11		,		İ	E.L. EACH ACCIDENT	\$1,000,000
l	OFFICER/MEMBER EXCLUDED? (Mandatory In NH)	N/A		1			E.L. DISEASE-EA EMPLOYEE	\$1,000,000
	Il yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE-POLICY LIMIT	\$1,000,000
							1	
I			1			1		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Sche

CERTIFICATE HOLDER	CANCELLATION
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Dennis K. Burke, Inc. 555 Constitution Drive Taunton MA 07280 USA	AUTHORIZED REPRESENTATIVE

DENNKBU-01

CWOODSIDE

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/30/2022

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.

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 License # 1780862

HUB International New England
300 Ballardvale Street

Wilmington, MA 01887

Wilmington, MA 01887

INSURER A: National Fire & Marine

INSURER A: National Fire & Marine

INSURER B: Endurance American Insurance Company 10641

Dennis K. Burke, Inc.		NSURER C : Lloyd's	of London		15792	
555 Constitution Drive Taunton, MA 02780	•	NSURER D :				
	•	NSURER E :		*****		
		NSURER F :				
	ATE NÚMBER:			REVISION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIES OF INDICATED. NOTWITHSTANDING ANY REQUIR CERTIFICATE MAY BE ISSUED OR MAY PERT EXCLUSIONS AND CONDITIONS OF SUCH POLICIANS.	TAIN, THE INSURANCE AFFORD LIES. LIMITS SHOWN MAY HAVE E	OF ANY CONTRA ED BY THE POLIC IEEN REDUCED BY	CT OR OTHER IES DESCRIE PAID CLAIMS	RED NAMED ABOVE FOR THI R DOCUMENT WITH RESPEC BED HEREIN IS SUBJECT TO		
INSR TYPE OF INSURANCE INSO	WYD POLICY NUMBER	POLICY EFF (MN/DD/YYYY)	POLICY EXP	LIMITS	· **	
COMMERCIAL GENERAL LIABILITY CLAIMS-MADE OCCUR				EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$		
i				MED EXP (Any one person) \$	•	
CENT ACCRECATE I HAVE APPLIED DED.	:		•	PERSONAL & ADVINJURY S		
GENT AGGREGATE LIMIT APPLIES PER:	ļ		,	GENERAL AGGREGATE S		
OTHER:		ı		PRODUCTS - COMPIOP AGG S		
AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (En accident) \$		
ANY AUTO OWNED SCHEDULED	į	1		BODILY INJURY (Per person) \$		
OWNED SCHEDULED AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY		;		BODILY INJURY (Per accident) S PROPERTY DAMAGE (Per accident) \$		
A X UMBRELLA LIAB X OCCUR	•		•	SACU OCCUPATION S	1,000,000	
EXCESS LIAB CLAIMS-MADE DED X RETENTIONS 25,000	42UMO31063403	4/1/2022	4/1/2023	AGGREGATE S	1,000,000	
				S S S S S S S S S S S S S S S S S S S		
WORKERS COMPENSATION AND EMPLOYERS LIABILITY	;			PER OTH-		
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)				ELL EACH ACCIDENT \$		
If yes, describe under DESCRIPTION OF OPERATIONS below	•	1		, E.L. DISEASE - EA EMPLOYEE S	_	
B Excess Umbrella	EXC30000078006	4/1/2022	4/4/0000	E.L. DISEASE - POLICY LIMIT \$		
C Excess Umbrella	22UKPCB2200025-900650		4/1/2023 4/1/2023		4,000,000 4,000,000	
DESCRIPTION OF OPERATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Pollution Liab. CP031525174 04/01/2022- 04/01/2023 wiAiG Specialty Insurance -\$1,000,000 each loss/\$7,000,000 aggregate; includes blanket add'l insured End#98858 & waiver of subro* "Umbrella includes-Blanket AI, Primary Non-contributory basis & Waiver of Subro Umbrella is Follow form over the GL, Auto and WC & includes Blended Pollution endorsement. All coverage is as required by a written executed centract prior to a loss/claim and per the policy endorsements. CERTIFICATE HOLDER CANCELLATION						
Dennis K Burke/Evidence of		SHOULD ANY OF THE EXPIRATIO ACCORDANCE W	N DATE TH	DESCRIBED POLICIES BE CAN HEREOF, NOTICE WILL BE CY PROVISIONS.	ICELLED BEFORE DELIVERED IN	

ACORD 25 (2016/03)

Coverage Only 555 Constitution Drive Taunton, MA 02780

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AUTHORIZED REPRESENTATIVE

AGENCY	CUSTOMER	in. DENI	NKBU-01
MUCHUI	CUSIUMER	10:	

CWOODSIDE

LOC #: 1



ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

HUB International New England	nse # 1780862	NAMED INSURED Dennis K. Burke, Inc. 555 Constitution Drive			
POLICY NUMBER SEE PAGE 1		Taunton, MA 02780			
CARRIER	NAIC CODE				
SEE PAGE 1	SEE P 1	EFFECTIVÉ DATE: SEE PAGE 1			
ADDITIONAL REMARKS		SEE PAGE I			
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACC	ORD FORM,				
FORM NUMBER: ACORD 26 FORM TITLE: Certificate of Liabil	ity Insurance				
Description of Operations/Locations/Vehicles: *Motor Truck Cargo limit - \$100,000 with Acadia under policy #CIM5427506 EFF 4/1/22 -4/1/23.					
OTHER UNDERLYING UMBRELLA INFO: eff 4/1/22- 4/1/23 Follow Form -Excess of the above \$9 Mill.:					
Excess \$5,000,000 - North River Ins. Policy # 5228091					
Excess \$5,000,000 -Navigators Insurance Company Po	ilicy # HO22	EXCZ01GDMIV			
Pollution includes blanket add't insured if required by	Pollution includes blanket add'l insured if required by contract-end#96658; Umbralla includes "Blended Pollution Endorgement"				
-excess over the contractors pollution liability. Eviden	nce of Cove	rage Only			
·					
}					

Attachment 5 BUSINESS REFERENCE FORM

Bid: #2 Heating Fuel Oil				
The Bidder must provide 3 business references from Massachusetts based companies, schools, institutions or governments indicating their names, addresses, telephone numbers, contact persons, dates of service and annual volume of oil service. The references will demonstrate that during at least the past five (5) years, the bidder has provided safe and efficient services for organizations which have needs that are similar to those of this cooperative. One reference will be from a former customer no longer buying oil from the bidder.				
Reference Name: State of Massachusetts Contact: Michael Barry				
Address: One Ashburton Place, Rm 1017 Phone #: (617) 720-3182				
Fax: E-mail: Michael.barry3@mass.gov				
Dates of Service: Mulitiple years Product Provided: Gasoline, diesel fuel and heating oil				
Approximate Annual Volume: 10 million gallons				
Reference Name: City of Boston Contact: Chris Radcliffe				
Address: One City Hall Square, Boston MA 02201 Phone #: (617) 635-3422				
Address: One City Hall Square, Boston MA 02201 Phone #: (617) 635-3422 Fax: E-mail: christopher.radcliffe@boston.gov				
Fax: E-mail: christopher.radcliffe@boston.gov				
Fax: E-mail: _christopher.radcliffe@boston.gov Dates of Service: _Mulitiple years				
Fax: E-mail: _christopher.radcliffe@boston.gov Dates of Service: _Mulitiple years				
Fax: E-mail: _christopher.radcliffe@boston.gov Dates of Service: Mulitiple years				
Fax: E-mail: _christopher.radcliffe@boston.gov Dates of Service:Mulitiple years				
Fax: E-mail:				
E-mail: christopher.radcliffe@boston.gov Dates of Service: Mulitiple years Product Provided: Gasoline, diesel fuel and heating oil Approximate Annual Volume: 2 million gallons Former Customer: Reference Name: Lower Pioneer Valley Educational Collaborative Contact: Paul Schroeder Address: 174 Brush Hill Ave, W. Springfield, MA 01089 Phone #: (413) 735-2234				



February 15, 2023

Dennis K Burke is a family owned and operated business in Taunton MA that has been delivering diesel fuel and gasoline for over 50 years, Incorporated in 1961.

We have a 70 million dollar bank line with Bank of America. We have storage at 8 sites over New England and have a brokage account to handle fixed futures. We are happy to provide additional financial information if required.























Bid Bond

Bond#0659631

KNOW ALL MEN BY THESE PRESENTS: That we, the undersigned, Dennis K. Burke, Inc.
555 Constitution Drive, P.O. Box 711, Taunton, MA 02780
as Principal, and State of Illinois As Surety, are hereby held and firmly bound unto
Lower Pioneer Valley Educational Collaborative
in the penal sum of One Thousand Dollars and 00/100 (\$1,000.00) for the payment of which, well and truly to be made, we hereby jointly and severally bind ourselves, our heirs, executors, administrators, successors and assigns.
Signed, this 13th day of February , 2023
The condition of the above obligation is such that whereas the Principal has submitted a certain bid, to enter into a contract in writing for
Number 2 Heating Fuel Oil
NOW, THEREFORE, (a) If said bid shall be rejected, or in the alternate (b) If said bid shall be accepted and the Principal shall execute and deliver an acceptable form of contract, and shall furnish a bond for the faithful performance of said Contract, and for the payment of the persons performing labor or furnishing materials in connection therewith, and shall in all other respects perform the agreement created by the acceptance of said bid;
THEN, THIS OBLIGATION SHALL BE VOID, otherwise the same shall remain in force and effect; it being expressly understood and agreed that the liability of the Surety for any and all claims hereunder shall, in no event, exceed the penal amount of this obligation as herein stated.
IN WITNESS WHEREOF, the Principal and the Surety have hereto set their hands and seals, and such of them as are corporations have caused their corporate seals, to be hereto affixed and these presents to be signed by their proper officers, the day and year first set forth above.
Signed, sealed and delivered in the presence of:
ATTEST: Shirley Croker - July Wolf Harco National Insurance Company
Bid Bond Date February 13, 2023 By: Matthew Wilkoff Attorney-In-Fact

Individual Acknowledgment

State of				
County of				
On the	day of	, 20, 1	before me person	ally appeared
to me known and	known to me to be the per	son described in a	nd who executed	I the foregoing instrument
andhe	thereupon acknowledged to	me thath	e executed	the same.
				Notary Public
		W T C A I		
94-4£	~	L.L.C. Acknow	vieagment	
State of				
County of		20	1 6	-11 1
On the	day of	, 20,	before me person	any appeared
to me known and l	known to me to be one of th	e firm of		
	ho executed the foregoing			
	he executed the same			
to me mati	ic cxccutcu uic sainc	as and for the act	and deed of said	
				Notary Public
			4	
0a A	Corpora	ate Acknowled	gment	
State ofH County ofHa				
On the	th day of <u>Ebrua</u>	y, 2023,	before me person	ally appeared
HUM 132C	1111219			
	being by me duly sworn, d			
<u>Director</u>	of the Sales ?	upartment	for Dennis	Burke
the corporation de	scribed in and which execu	ted the foregoing in	astrument; that _	he knows
the seal of said co	orporation; that the seal aff	ixed to said instru	ment is such cor	porate seal; that it was so
affixed by order of	f the board of directors of sa	aid corporation; an	d that <u>he</u> 1	he signed his/her
name thereto by li	ke order.			
		\rightarrow . \wedge		
9202,81190		Jeague J	rdem	Notary Public
HOF MASSACHUSETTS ON Sion Expires On	COMMONWEALTH			JENNIFER JODOIN
R JODOIN Y Public	IstoN TATE		• 7	্রমূল Notary Public
MICGOL 8	321711/21			COMMONWEALTH OF MASSACHUSET My Commission Expires On
				September 18, 2026

ACKNOWLEDGEMENT OF SURETY

State of New York	}	
	}	SS
County of Nassau	}	

On this 13th day of February 2023, before me, a Notary Public in and for said County, personally appeared Matthew Wilkoff personally known to me, who being by me duly sworn, did say that he/she is the aforesaid attorney-in-fact of the Harco National Insurance Company of Newark, New Jersey, a corporation duly organized and existing under the laws of the State of Illinois, that the seal affixed to the foregoing instrument is the corporate seal of said corporation, that the said instrument was signed, sealed and executed in behalf of said corporation by authority of its Board of Directors, and further acknowledge that the said instrument and the execution thereof to be a voluntary act and deed of said corporation.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed by official seal the day and year last above written.

SUSAN KINNEAR NOTARY PUBLIC, State of New York No. 01KI6373947 Certificate Filed in Suffolk County Commission Expires April 16, 2026

N-M-4-D. Bliblio

Bond

0659631

POWER OF ATTORNEY

HARCO NATIONAL INSURANCE COMPANY INTERNATIONAL FIDELITY INSURANCE COMPANY

Member companies of IAT Insurance Group, Headquartered: 702 Oberlin Road, Raleigh, North Carolina 27605

KNOW ALL MEN BY THESE PRESENTS: That HARCO NATIONAL INSURANCE COMPANY, a corporation organized and existing under the laws of the State of Illinois, and INTERNATIONAL FIDELITY INSURANCE COMPANY, a corporation organized and existing under the laws of the State of New Jersey, and having their principal offices located respectively in the cities of Rolling Meadows, Illinois and Newark, New Jersey, do hereby constitute and appoint

MATTHEW WILKOFF, GERALD J. WILKOFF

Mineola, NY

their true and lawful attorney(s)-in-fact to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise, and the execution of such instrument(s) in pursuance of these presents, shall be as binding upon the said HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURANCE COMPANY, as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by their regularly elected officers at their principal offices.

This Power of Attorney is executed, and may be revoked, pursuant to and by authority of the By-Laws of HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURANCE COMPANY and is granted under and by authority of the following resolution adopted by the Board of Directors of INTERNATIONAL FIDELITY INSURANCE COMPANY at a meeting duly held on the 13th day of December, 2018 and by the Board of Directors of HARCO NATIONAL INSURANCE COMPANY at a meeting held on the 13th day of December, 2018.

"RESOLVED, that (1) the Chief Executive Officer, President, Executive Vice President, Senior Vice President, Vice President, or Secretary of the Corporation shall have the power to appoint, and to revoke the appointments of, Attorneys-in-Fact or agents with power and authority as defined or limited in their respective powers of attorney, and to execute on behalf of the Corporation and affix the Corporation's seal thereto, bonds, undertakings, recognizances, contracts of indemnity and other written obligations in the nature thereof or related thereto; and (2) any such Officers of the Corporation may appoint and revoke the appointments of joint-control custodians, agents for acceptance of process, and Attorneys-in-fact with authority to execute waivers and consents on behalf of the Corporation; and (3) the signature of any such Officer of the Corporation and the Corporation's seal may be affixed by facsimile to any power of attorney or certification given for the execution of any bond, undertaking, recognizance, contract of indemnity or other written obligation in the nature thereof or related thereto, such signature and seals when so used whether heretofore or hereafter, being hereby adopted by the Corporation as the original signature of such officer and the original seal of the Corporation, to be valid and binding upon the Corporation with the same force and effect as though manually affixed."

IN WITNESS WHEREOF, HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURANCE COMPANY have each executed and attested these presents

on this 31st day of December, 2018

STATE OF NEW JERSEY County of Essex

STATE OF ILLINOIS
County of Cook

Kenneth Chapman

Executive Vice President, Harco National Insurance Company

and International Fidelity Insurance Company

On this 31st day of December, 2018 , before me came the individual who executed the preceding instrument, to me personally known, and, being by me duly sworn, said he is the therein described and authorized officer of HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURANCE COMPANY; that the seals affixed to said instrument are the Corporate Seals of said Companies; that the said Corporate Seals and his signature were duly affixed by order of the Boards of Directors of said Companies.



IN TESTIMONY WHEREOF, I have hereunto set my hand affixed my Official Seal, at the City of Newark, New Jersey the day and year first above written.

Shirelle A. Outley a Notary Public of New Jersey W My Commission Expires April 4, 2023

CERTIFICATION

I, the undersigned officer of HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURANCE COMPANY do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Sections of the By-Laws of said Companies as set forth in said Power of Attorney, with the originals on file in the home office of said companies, and that the same are correct transcripts thereof, and of the whole of the said originals, and that the said Power of Attorney has not been revoked and is now in full force and effect.

IN TESTIMONY WHEREOF, I have hereunto set my hand on this day, February 13, 2023

A01165 Gerald J. Wilkoff, Inc.

Irene Martins, Assistant Secretary

HARCO NATIONAL INSURANCE COMPANY

1701 GOLF ROAD, SUITE 1-600, ROLLING MEADOWS, IL 60008

STATEMENT OF ASSETS, LIABILITIES, SURPLUS AND OTHER FUNDS AT SEPTEMBER 30, 2022

ASSETS

Bonds (Amortized Value).....

\$105,181,701

Dollas (Alliottizea Value)	,
Stocks (Preferred Stocks)	3,295,066
Stocks (Common Stocks)	778,236,190
Cash, Bank Deposits & Short-Term Investments	96,096,636
Other Invested Assets	9,472,789
Unpaid Premiums & Assumed Balances	199,513,027
Deferred Premiums, Agents Balances & Installments booked	14,607,456
Reinsurance Recoverable from Reinsurers	173,737,809
Reinsurance - Funds Held by or deposited with reinsured companies	11,725,032
Current Federal & Foreign Income Tax Recoverable & Interest	0
Investment Income Due and Accrued	1,464,544
Receivables from Parent Subsidiaries & Affiliates	14,272,395
Other Assets	23,450
TOTAL ASSETS	\$1,407,626,095
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LIABILITIES, SURPLUS & OTHER FUNDS	
Losses (Reported Losses Net as to Reinsurance Ceded and	
Incurred But Not Reported Losses)	\$180,644,649
Reinsurance payable on paid losses & loss adjustment expense	75,457,912
Loss Adjustment Expenses	36,536,496
Commissions Payable, Contingent Commissions & Other Similar Charges	7,558,287
Other Expenses (Excluding Taxes, Licenses and Fees)	337,815
Taxes, Licenses & Fees (Excluding Federal Income Tax)	1,547,176
Current federal and foreign income taxes	7 31 , 2 7 5
Net Deferred Tax Liability	2,488,818
Unearned Premiums	150,238,670
Advance Premium	523,586
Ceded Reinsurance Premiums Payable	148,119,627
Funds held by Company under reinsurance treaties	15,875,212
Amounts Withheld by Company for Account of Others	55,251,038
Payable to Parent Subsidiaries & Affiliates	12,507,389
Other Liabilities	11,960,787
TOTAL LIABILITIES	\$699.778.737
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Common Capital Stock	\$3,500,004
Gross Paid-in & Contributed Surplus	670,781,834
Unassigned Funds (Surplus)	33,565,520
Surplus as Regards Policyholders	\$707,847,358
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TOTAL LIABILITIES, SURPLUS & OTHER FUNDS	<u>\$1,407.626.095</u>

I, John Mruk, Treasurer of HARCO NATIONAL INSURANCE COMPANY, certify that the foregoing is a fair statement of Assets, Liabilities, Surplus and Other Funds of this Company, at the close of business, September 30, 2022, as reflected by its books and records and as reported in its statement on file with the Insurance Department of the State of Illinois.

> IN TESTIMONY WHEREOF, I have set my hand and affixed the seal of the Company, this 28th day of November, 2022.

HARCO NATIONAL INSURANCE COMPANY

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