

COOK COUNTY OFFICE OF THE CHIEF PROCUREMENT OFFICER
CONTRACT AWARD RECOMMENDATIONS

11/18/2015

<u>Item #</u>	<u>Contract#</u>	<u>Recommended Action</u>	<u>Using Department</u>	<u>Description</u>	<u>Recommended Vendor</u>	<u>Contract Amount</u>	<u>MBE/WBE Participation</u>	<u>Participation Type</u>	<u>Participation%</u>	<u># of Bids Received</u>	<u># of M/WBE Bids Received</u>	<u>CCA Concurs</u>
1	1530-14426	Award	Department of Risk Management	General Liability and Automobile Claims Administrator/Third-Party Administrator Services	CorVel Enterprise Comp., Inc.	\$325,350.00	The Owens Group, Inc.	MBE (6)	35% Direct	2	0	Y
2	1545-14506	Award	Countywide, Lead Department: Sheriff's Office	Ford Vans	Sutton Ford, Inc.	\$235,903.73	Sutton Ford Full WBE Waiver Granted	MBE (6)	100%-Direct	2	1	Y
3	1523-14660	Award	Department of Transportation and Highways	Group 4-2014 Leyden Township	A Lamp Concrete Contractors, Inc.	\$893,404.10	Alas Trucking, Inc. Vilber, Inc.	MBE (9) WBE (7)	14.1% Direct 3.2% Direct	4	0	Y
4	1545-14644	Award	Countywide, Lead Department: Sheriff's Office	Auto Body Repair, Zone 1	Ward Auto Body, Inc. d/b/a Ward Auto Body	\$156,360.00	Sutton Ford Alko Automotive	MBE (6) WBE (7)	25% Indirect 10% Indirect	2	1	Y
5	1553-14679	Award	Juvenile Temporary Detention Center	Residents' Clothing	Uniforms Manufacturing, Inc.	\$695,120.95	D.C Mad Hatter, Inc. DLV Printing Services, Inc.	MBE (6) WBE (6)	17.5% Indirect 5% Indirect	4	1	Y

MBE/WBE Participation Types:
Native American (4)
African American (6)
Female (7)
Asian (8)
Hispanic (9)

R - Rebid
DNA - Does Not Apply
CCA - Contract Compliance Administrator
**Not Low Bidder

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

The Cook County Code of Ordinances (§2-610 *et seq.*) requires that any Applicant for any County Action must disclose information concerning ownership interests in the Applicant. This Disclosure of Ownership Interest Statement must be completed with all information current as of the date this Statement is signed. Furthermore, this Statement must be kept current, by filing an amended Statement, until such time as the County Board or County Agency shall take action on the application. The information contained in this Statement will be maintained in a database and made available for public viewing.

If you are asked to list names, but there are no applicable names to list, you must state NONE. An incomplete Statement will be returned and any action regarding this contract will be delayed. A failure to fully comply with the ordinance may result in the action taken by the County Board or County Agency being voided.

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"Person" "Entity" or "Legal Entity" means a sole proprietorship, corporation, partnership, association, business trust, estate, two or more persons having a joint or common interest, trustee of a land trust, other commercial or legal entity or any beneficiary or beneficiaries thereof.

This Disclosure of Ownership Interest Statement must be submitted by :

1. An Applicant for County Action and
2. A Person that holds stock or a beneficial interest in the Applicant and is listed on the Applicant's Statement (a "Holder") must file a Statement and complete #1 only under Ownership Interest Declaration.

Please print or type responses clearly and legibly. Add additional pages if needed, being careful to identify each portion of the form to which each additional page refers.

This Statement is being made by the Applicant or Stock/Beneficial Interest Holder

This Statement is an: Original Statement or Amended Statement

Identifying Information:

Name CorVel Enterprise Comp, Inc.

D/B/A: _____ FEIN NO/SSN (LAST FOUR DIGITS): 42-1704550

Street 310 Highland Parkway, Suite 600 Address: _____
City: Downers Grove

State: IL Zip _____ Code: 60515-5545
Phone No.: (630) 874-7300 Fax Number: _____ Email: cathy_estock@corvel.com

Cook County Business Registration Number: _____
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): _____

Form of Legal Entity:

Sole Proprietor Partnership Corporation Trustee of Land Trust

Business Trust Estate Association Joint Venture

Other (describe) _____

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
CorVel Corporation	2010 Main Street, Suite 600, Irvine, CA 92614	100%

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address
None		

3. Is the Applicant constructively controlled by another person or Legal Entity? Yes No
 If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship
CorVel Corporation	2010 Main Street, Suite 600, Irvine, CA 92614	100%	Parent Company

Corporate Officers, Members and Partners Information:

For all corporations, list the names, addresses, and terms for all corporate officers. For all limited liability companies, list the names, addresses for all members. For all partnerships and joint ventures, list the names, addresses, for each partner or joint venture.

Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office

Declaration (check the applicable box):

- I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.
- I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

Richard J. Schweppe
Name of Authorized Applicant/Holder Representative (please print or type)

Richard Schweppe
Signature

richard_schweppe@corvel.com
E-mail address

Subscribed to and sworn before me
this 8 day of June, 2015.

[Signature]
Notary Signature

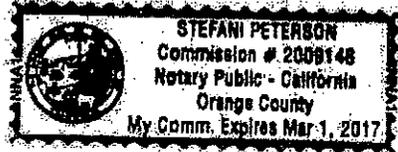
Chief Financial Officer
Title

June 8, 2015
Date

(949) 851-1473
Phone Number

My commission expires: March 1, 2017

Notary
Notary Seal



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2. A Person that holds stock or a beneficial interest in the Applicant and is listed on the Applicant's Statement (a "Holder") must file a Statement and complete #1 only under **Ownership Interest Declaration**.

Please print or type responses clearly and legibly. Add additional pages if needed, being careful to identify each portion of the form to which each additional page refers.

This Statement is being made by the Applicant or Stock/Beneficial Interest Holder

This Statement is an: Original Statement or Amended Statement

Identifying Information:

Name SUTTON FORD INC

D/B/A: _____ FEIN NO/SSN (LAST FOUR DIGITS): _____

Street Address: 21315 CENTRAL AVE

City: MATTESON State: IL Zip Code: 60443

Phone No.: 708-720-8000 Fax Number: 708-720-4305 Email: Fleet1@SuttonFord.com

Cook County Business Registration Number: _____
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): _____

Form of Legal Entity:

Sole Proprietor Partnership Corporation Trustee of Land Trust

Business Trust Estate Association Joint Venture

Other (describe) _____

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
NATHANIEL SUTTON	21315 CENTRAL AVE MATTESON IL 60443	100%

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address

3. Is the Applicant constructively controlled by another person or Legal Entity? Yes No
 If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship

Corporate Officers, Members and Partners Information:

For all corporations, list the names, addresses, and terms for all corporate officers. For all limited liability companies, list the names, addresses for all members. For all partnerships and joint ventures, list the names, addresses, for each partner or joint venture.

Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
NATHANIEL SUTTON	21315 CENTRAL AVE	PRESIDENT	
SUSIE SCHAFROTH	MATTESON IL 60443	SECRETARY OF TREASURER	

Declaration (check the applicable box):

- I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.
- I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

SUSIE SCHARROTH
Name of Authorized Applicant/Holder Representative (please print or type)

Susie Scharroth
Signature

SUSIE@SUTTONFARMINC.
E-mail address

SECRETARY OF TREASURY
Title

09-07-15
Date

708-726-8000
Phone Number

Subscribed to and sworn before me
this 7th day of September 2015

x *Mary A Gocal*
Notary Public Signature

My commission expires:

OFFICIAL SEAL
MARY A GOCAL
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES: 10/30/17

Section 7: COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

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This Statement is being made by the Applicant or Stock/Beneficial Interest Holder

This Statement is an: Original Statement or Amended Statement

Identifying Information:

Name A Lamp Concrete Contractors, Inc.
 D/B/A: Same FEIN NO/SSN (LAST FOUR DIGITS): 36-3929173
 Street Address: 1900 Wright Boulevard
 City: Schaumburg State: Illinois Zip Code: 60193
 Phone No.: 847-891-6000 Fax Number: 847-891-1873 Email: jmoyer@alampconcrete.com

Cook County Business Registration Number: _____
 (Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): 5765-276-4

Form of Legal Entity:

Sole Proprietor Partnership Corporation Trustee of Land Trust

Business Trust Estate Association Joint Venture

Other (describe) _____

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
Adele Lampignano	1900 Wright Blvd, Schaumburg IL 60193	60%
Joseph Lampignano	1900 Wright Blvd, Schaumburg IL 60193	40%

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address
NONE		

3. Is the Applicant constructively controlled by another person or Legal Entity? Yes No
 If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship
N/A			

Corporate Officers, Members and Partners Information:

For all corporations, list the names, addresses, and terms for all corporate officers. For all limited liability companies, list the names, addresses for all members. For all partnerships and joint ventures, list the names, addresses, for each partner or joint venture.

Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
Adele Lampignano	1900 Wright Blvd, Schaumburg IL 60193	President	
Joseph Lampignano	1900 Wright Blvd, Schaumburg IL 60193	Vice President	

Declaration (check the applicable box):

- I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.
- I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

Joseph Lampignano
 Name of Authorized Applicant/Holder Representative (please print or type)
 Signature
 jmoyer@alamconcrete.com
 E-mail address

Vice President
 Title
 08-26-2015
 Date
 847-891-6000
 Phone Number

Subscribed to and sworn before me
 this 27th day of Aug 2015

x Tracy Lampignano
 Notary Public Signature

My commission expires: 8-9-19


COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

The Cook County Code of Ordinances (§2-810 et seq.) requires that any Applicant for any County Action must disclose information concerning ownership interests in the Applicant. This Disclosure of Ownership Interest Statement must be completed with all information current as of the date this Statement is signed. Furthermore, this Statement must be kept current, by filing an amended Statement, until such time as the County Board or County Agency shall take action on the application. The information contained in this Statement will be maintained in a database and made available for public viewing.

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This Statement is an: Original Statement or Amended Statement

Identifying Information:

Name: Ward Auto Body, INC.

D/B/A: Ward Auto Body

FEIN NO/SSN (LAST FOUR DIGITS): XXXXXXXX

Street Address: 9019 Grand Ave

City: River Grove

State: IL

Zip Code: 60171

Phone No.: 708 453 8800

Fax Number: 708 453 3053

Email: WardAuto@sbglobalinc

Cook County Business Registration Number: 1290
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): 50245861

Form of Legal Entity:

Sole Proprietor Partnership Corporation Trustee of Land Trust

Business Trust Estate Association Joint Venture

Other (describe) _____

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
Randall Farina	711 Porten Rd.	7.5%
Ronald G. Farina Trust	8707 Skokie Blvd. Suite 400 Skokie	85%

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address
Ronald G. Farina/Trust	David Weiner	8707 Skokie Blvd Skokie, IL

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Name	Address	Percentage of Beneficial Interest	Relationship
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Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
Randall Farina	711 Porten Rd	Mc Henry, IL 60051	President 10
Rose Farina	711 Porten Rd	McHenry, IL 60051	Secy/Treasurer 10

Declaration (check the applicable box):

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I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

Rose Faring
Name of Authorized Applicant/Holder Representative (please print or type)

Sect/Treasurer
Title

[Signature]
Signature

8/24/15
Date

wardauto@sbcglobal.net
E-mail address

708-453 8800
Phone Number

Subscribed to and sworn before me
this 24th day of August, 2015

My commission expires: February 03, 2016
Official Seal
Richard L. Stastny
Notary Public State of Illinois
My Commission Expires February 03, 2016

x [Signature]
Notary Public Signature

Notary Seal

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This Statement is being made by the Applicant or Stock/Beneficial Interest Holder

This Statement is an: Original Statement or Amended Statement

Identifying Information:

Name: Lawrence Tucker
 D/B/A: Unitronics Manufacturing, Inc. FEIN NO.: 38-2198994
 Street Address: 7575 E. Redfield Rd. #131
 City: Scottsdale State: AZ Zip Code: 85260
 Phone No.: 480-368-9316 Fax Number: 480-368-8556 Email: nito@unitdirect.com

Cook County Business Registration Number: _____
 (Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): _____

Form of Legal Entity:

Sole Proprietor Partnership Corporation Trustee of Land Trust

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Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
Lawrence Tucker	10596 E. Yearling Scottsdale, AZ 85255	100%

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Name of Agent/Nominee	Name of Principal	Principal's Address
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Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
Lawrence Tucker	10596 E. Yearling Scottsdale, AZ 85255	CEO	Indefinite

Declaration (check the applicable box):

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COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Lawrence Tucker
Name of Authorized Applicant/Holder Representative (please print or type)

[Signature]
Signature

nlo@umidirect.com
E-mail address

Subscribed to and sworn before me
this 31 day of August 2015.

X Miranda Supko
Notary Public Signature

CEO
Title

8/31/15
Date

480-368-9316
Phone Number

8/15/16
My commission expires



Notary Seal