

**AMENDMENT NO. 4**

This Amendment modifies Contract No. 2107-18733, for Mainframe and Dedicated Hosting Services by and between the County of Cook, Illinois, herein referred to as "County" and Ensono, LLC authorized to do business in the State of Illinois hereinafter referred to as "Contractor":

**RECITALS**

Whereas, the County and Contractor have entered into a Contract approved by the County Board on July 29, 2021, (hereinafter referred to as the "Contract"), wherein the Contractor is to provide Mainframe and Dedicated Hosting Services (hereinafter referred to as the "Services") from August 1, 2021 through July 31, 2024, in an amount not to exceed \$22,184,453.00, with one (1) one-year renewal option; and

Whereas, Amendment No. 1 was executed by the Chief Procurement Officer on July 30, 2024, to renew the Contract for one (1) year beginning August 1, 2024, through July 31, 2025; and

Whereas, Amendment No. 2 was authorized by the County Board on October 24, 2024, to extend the Contract for one (1) year beginning August 1, 2025, through July 31, 2026, in the amount of \$16,547,081.47 and the Total Contract Amount was revised to \$38,731,534.47; and

Whereas, Amendment No. 3 was executed by the Chief Procurement Officer on August 13, 2025, to revise Exhibit 1, Statement of Work and Schedule of Compensation, provided in the Contract.; and

Whereas, the Contract will expire July 31, 2026, and the agreed upon Services are still required; and

Whereas, an increase of the Contract amount is required for the continuation of Services; and pursuant to Article 10 Section C of the Contract, the County and Contractor desire to increase the Contract in the amount of \$5,945,518.64; and

Whereas, pursuant to Article 10 Section C of the Contract, the County and Contractor desire to extend the Contract for two (2) years beginning on August 1, 2026, through July 31, 2028.

Now therefore, in consideration of mutual covenants contained herein, it is agreed by and between the parties to amend the Contract as follows:

1. The Contract is extended through July 31, 2028.
2. The Contract is increased by \$5,945,518.64 and the Total Contract Amount is revised to \$44,677,053.11.
3. The Contract is hereby amended to incorporate Attachment A and made part of the Contract.
4. The attached updated Identification of Sub-Contractors/Suppliers/Sub-Consultants Form, MBE/WBE Utilization Plan forms, certificate of insurance, and Economic Disclosures Statement under Attachment B are incorporated and made a part of this Contract.
5. All other terms and conditions remain as stated in the Contract.

In witness whereof and pursuant to County Board approval on July 16, 2026, the County and Contractor have caused this Amendment No. 4 to be executed on the date and year last written below.

**County of Cook, Illinois**

By: **Raffi Sarrafian**  
Chief Procurement Officer

Digitally signed by  
Raffi Sarrafian  
Date: 2026.07.23  
14:12:30 -05'00'

Date: \_\_\_\_\_

By: Brian Tracy  
State's Attorney (if applicable)  
Brian Tracy  
Type or print name (if applicable)

Date: 7/16/2026

**Ensono, LLC**

DocuSigned by:  
Kelly Cardwell  
Signed

Kelly Cardwell  
Type or print name

Director, Commercial Services  
Title

Date: 01 June 2026

Contract No. 2107-18733 Amendment No. 4  
Vendor Name: Ensono, LLC

**ATTACHMENT A**



**ATTACHMENT A - AMENDMENT TO PROFESSIONAL SERVICES  
AGREEMENT FOR MAINFRAME AND DEDICATED  
HOSTING SERVICES CONTRACT NO. 2107-18733**

**1. EXHIBIT 1-B Statement of Work – Integrated Property Tax Dedicated Managed Hosting Services**

- The SOW, Section 4 (Term and Optional Extension Period) is hereby deleted in its entirety and replaced with the following:  
The Service term shall begin as of the Amendment Effective Date and will continue for twenty-four (24) months from August 1, 2026 to July 31, 2028 (“Extension Period”).
- Cook County acknowledges and agrees that no additional hardware refresh fees are included in this Amendment. “End of Life Product” means any third party hardware or third party software or firmware (including but not limited to, operating systems, databases, applications and infrastructure in relation to any component of Client’s services under Ensono’s control or management) that is out of maintenance and/ or support or the manufacturer or provider has ceased to provide updates and/ or patches for, including security patches. For the avoidance of doubt, the availability in the market by the manufacturer of an extended support contract shall not prevent the product from being an End of Life Product. Ensono will notify the Client in writing within a reasonable time period once it becomes aware of a potential End of Life Product. Thereafter, Ensono and the Client may collaborate in identifying a succession plan for such, to be set forth in a Change Order. In such a change order, Ensono and Client may agree to:
  - where appropriate replace the product with an alternative and fully supported product, in which case, via a Change Order at the Client’s cost, the Parties shall identify any commercial and operational impact to the End of Life Product, as may be required to ensure that the End of Life Product remains compatible and functioning to the vendor’s support requirements; and
  - Pending the parties agreement and implementation of the above change(s), for any period of time that the End of Life Product would continue in an unsupported manner, then Ensono shall not be bound by the terms of any SLA insofar as any SLA impact has been caused by such End of Life Product (in relation either to that such End of Life Product or to any other affected service) provided that (i) Ensono has used reasonable efforts to mitigate such impact, and (ii) the duration of the SLA exception shall be limited to the period during which the End of Life Product remains unremediated and unsupported.
- Charges: Section A Service Fees (i) is hereby deleted in its entirety and replaced with the following A. Service Fees.
  - (i) Client shall pay Ensono the following service fees (August 1, 2026 to July 31, 2028) for all work performed under this SOW (“Service Fees”).

| Services                                                                                            | Monthly Recurring Charge “MRC” |
|-----------------------------------------------------------------------------------------------------|--------------------------------|
| IPTS Environmental Dedicated Service (Phase I and Phase II)<br>including Dedicated Network Hardware | \$ 122,431.20                  |

- Exhibit C – Charges: Section C Termination Fees shall continue to read as follow:
  - Termination Fees: in the event County terminates this Exhibit 1-B Statement of Work – Integrated Property Tax Dedicated Managed Hosting Services prior to the conclusion of the Extended Term, provided the County provides Ensono with no less than ninety (90) days advance written notice of the termination effective date, County will pay all accrued but unpaid amounts due under the Amendment or the applicable SOW. If a particular Service is terminated upon which another Service is dependent, all such dependent Services will be deemed terminated.



## 2. EXHIBIT 1-C Statement of Work – Disaster Recovery Services (Clerk)

- The SOW, Section 4 (Term and Optional Extension Period) is hereby deleted in its entirety and replaced with the following:  
The Service term shall begin as of the Amendment Effective Date and will continue for twenty-four (24) months from August 1, 2026 to July 31, 2028 (“Extension Period”).
- Cook County acknowledges and agrees that no additional hardware refresh fees are included in this Amendment. “End of Life Product” means any third party hardware or third party software or firmware (including but not limited to, operating systems, databases, applications and infrastructure in relation to any component of Client’s services under Ensono’s control or management) that is out of maintenance and/ or support or the manufacturer or provider has ceased to provide updates and/ or patches for, including security patches. For the avoidance of doubt, the availability in the market by the manufacturer of an extended support contract shall not prevent the product from being an End of Life Product. Ensono will notify the Client in writing within a reasonable time period once it becomes aware of a potential End of Life Product. Thereafter, Ensono and the Client may collaborate in identifying a succession plan for such, to be set forth in a Change Order. In such a change order, Ensono and Client may agree to:
  - where appropriate replace the product with an alternative and fully supported product, in which case, via a Change Order at the Client’s cost, the Parties shall identify any commercial and operational impact to the End of Life Product, as may be required to ensure that the End of Life Product remains compatible and functioning to the vendor’s support requirements; and
  - Pending the parties agreement and implementation of the above change(s), for any period of time that the End of Life Product would continue in an unsupported manner, then Ensono shall not be bound by the terms of any SLA insofar as any SLA impact has been caused by such End of Life Product (in relation either to that such End of Life Product or to any other affected service) provided that (i) Ensono has used reasonable efforts to mitigate such impact, and (ii) the duration of the SLA exception shall be limited to the period during which the End of Life Product remains unremediated and unsupported.
- Charges: Section A Service Fees (i) is hereby deleted in its entirety and replaced with the following A. Service Fees.
  - (ii) Client shall pay Ensono the following service fees (August 1, 2026 to July 31, 2028) for all work performed under this SOW (“Service Fees”).

| Services                          | Monthly Recurring Charge “MRC” |
|-----------------------------------|--------------------------------|
| Disaster Recovery Service – Clerk | \$ 104,465.41                  |

- Exhibit C – Charges: Section C Termination Fees shall continue to read as follow:
  - Termination Fees: in the event County terminates this Exhibit 1-C Statement of Work – Disaster Recovery Services (Clerk) prior to the conclusion of the Extended Term, provided the County provides Ensono with no less than ninety (90) days advance written notice of the termination effective date, County will pay all accrued but unpaid amounts due under the Amendment or the applicable SOW.



**Attachment -1 (for IPTS and Disaster Recovery Service)  
Exhibit A - Summary of charges**

| Monthly Recurring | Aug-26              | Sep-26              | Oct-26              | Nov-26              | Dec-26              |
|-------------------|---------------------|---------------------|---------------------|---------------------|---------------------|
| IPTS              | \$122,431.20        | \$122,431.20        | \$122,431.20        | \$122,431.20        | \$122,431.20        |
| Clerk DR          | \$104,465.41        | \$104,465.41        | \$104,465.41        | \$104,465.41        | \$104,465.41        |
| <b>Total</b>      | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> |

| Monthly Recurring | 27-Jan              | 27-Feb              | 27-Mar              | 27-Apr              | 27-May              | 27-Jun              | 27-Jul              | 27-Aug              | 27-Sep              | 27-Oct              | 27-Nov              | 27-Dec              |
|-------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|
| IPTS              | \$122,431.20        | \$122,431.20        | \$122,431.20        | \$122,431.20        | \$122,431.20        | \$122,431.20        | \$122,431.20        | \$122,431.20        | \$122,431.20        | \$122,431.20        | \$122,431.20        | \$122,431.20        |
| Clerk DR          | \$104,465.41        | \$104,465.41        | \$104,465.41        | \$104,465.41        | \$104,465.41        | \$104,465.41        | \$104,465.41        | \$104,465.41        | \$104,465.41        | \$104,465.41        | \$104,465.41        | \$104,465.41        |
| <b>Total</b>      | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> |

| Monthly Recurring | 28-Jan              | 28-Feb              | 28-Mar              | 28-Apr              | 28-May              | 28-Jun              | 28-Jul              | Total                 |
|-------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|-----------------------|
| IPTS              | \$122,431.20        | \$122,431.20        | \$122,431.20        | \$122,431.20        | \$122,431.20        | \$122,431.20        | \$122,431.20        | \$2,938,348.80        |
| Clerk DR          | \$104,465.41        | \$104,465.41        | \$104,465.41        | \$104,465.41        | \$104,465.41        | \$104,465.41        | \$104,465.41        | \$ 2,507,169.84       |
| <b>Total</b>      | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$226,896.61</b> | <b>\$5,445,518.64</b> |

| Service            | FY2026<br>(Aug. - Nov.) | FY2027<br>(Dec. - Nov.) | FY2028<br>(Dec. - Jul.) | Total                 |
|--------------------|-------------------------|-------------------------|-------------------------|-----------------------|
| IPTS               | \$489,724.80            | \$1,469,174.40          | \$979,449.60            | \$2,938,348.80        |
| Clerk DR           | \$417,861.64            | \$1,253,584.92          | \$835,723.28            | \$2,507,169.84        |
| Optional Services* | -                       | -                       | -                       | \$500,000.00          |
| <b>Total</b>       | <b>\$907,586.44</b>     | <b>\$2,722,759.32</b>   | <b>\$1,815,172.88</b>   | <b>\$5,945,518.64</b> |

**\*Optional Contract Spend Authority**

Optional Contract Spend Authority estimated charges are provided for County budgetary purposes only and represent estimates for additional services that may be purchased solely through a separately executed Change Order defining the applicable service term, scope, tasks, and charges.

Contract No. 2107-18733 Amendment No. 4  
Vendor Name: Ensono, LLC

**ATTACHMENT B**

**Cook County**  
**Office of the Chief Procurement Officer**  
**Identification of Subcontractor/Supplier/Subconsultant Form**

|                          |                  |
|--------------------------|------------------|
| <b>OCPO ONLY:</b>        |                  |
| <input type="checkbox"/> | Disqualification |
| <input type="checkbox"/> | Check Complete   |

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract.** In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

|                                                                                  |                                                                                    |
|----------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| Bid/RFP/RFQ No.: 2107-18733 A4                                                   | Date: May 29, 2026                                                                 |
| Total Bid or Proposal Amount:                                                    | Contract Title: Mainframe and Dedicated Hosting Services                           |
| Contractor: Ensono, LLC                                                          | Subcontractor/Supplier/<br>Subconsultant to be added or substitute: Not Applicable |
| Authorized Contact for Contractor: Kristin Swift                                 | Authorized Contact for Subcontractor/Supplier/<br>Subconsultant:                   |
| Email Address (Contractor): kristin.swift@ensono.com                             | Email Address (Subcontractor):                                                     |
| Company Address (Contractor): 3333 Finley Road                                   | Company Address (Subcontractor):                                                   |
| City, State and Zip (Contractor): Downers Grove, IL 60515                        | City, State and Zip (Subcontractor):                                               |
| Telephone and Fax (Contractor): 630-944-0010                                     | Telephone and Fax (Subcontractor):                                                 |
| Estimated Start and Completion Dates (Contractor): August 1, 2026 - July 1, 2028 | Estimated Start and Completion Dates (Subcontractor):                              |

**Note:** Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

| <u>Description of Services or Supplies</u> | <u>Total Price of Subcontract for Services or Supplies</u> |
|--------------------------------------------|------------------------------------------------------------|
| NA                                         | NA                                                         |

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

Ensono, LLC

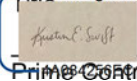
Contractor

Ensono LLC

Name

VP and Controller

DocuSigned by:

  
 Prime Contractor Signature

Date 29 May 2026



## **Memorandum**

Date: June 2, 2026

TO: Raffi Sarrafian, Chief Procurement Officer  
Office of the Chief Procurement Officer

FROM: JEANETTA CARDINE  
Jeanetta Cardine, Deputy Director  
Compliance Center of Excellence  
Center of Business Enterprise Development

RE: Contract No. 2107-18733 Amendment 4  
Mainframe and Dedicated Hosting Services  
Bureau of Technology  
Reference Contract – Professional Services  
Contractor: Ensono, LLC  
Original Contract Value: \$22,184,453.00  
Original Contract Term: August 1, 2021 – July 31, 2024  
Participation Goal: 0% MWBE  
Amendment 1 extended Term by one year through July 31, 2025 and Article 3, Section F, subsection (f), is deleted in its entirety and replaced with (f) Network Security & Privacy Liability (Cyber) and Exhibit 4, Cook County Travel Policy, is deleted in its entirety and replaced with Attachment A.  
Revised Contract Term: August 1, 2021 through July 31, 2025  
Amendment 2 increased the contract value \$16,547,081.47 and renewed the contract term by one year.  
Revised Contract Value: \$38,731,534.47  
Revised Contract Term: August 1, 2021 through July 31, 2026  
Amendment 3 amended the contract to incorporate Attachment A and made part of the contract. Amended Exhibit 1 Statement of Work and Schedule of Compensation, Early Termination Charges, Exhibit A Hardware/Software Schedule and no change to the contract value and term were made.  
Amendment 4 increases the contract value by \$5,945,518.64 and renews the contract term for 2 years.  
Revised Contract Value: \$44,677,053.11  
Revised Contract Term: August 1, 2021 through July 31, 2028

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The Center of Business Enterprise Development is in receipt of the above-referenced contract amendment and has determined a 0% MWBE participation goal was recommended and does not require the Center of Business Enterprise Development to review for MBE/WBE compliance with the Minority- and Women- owned Business Enterprises (MBE/WBE) Ordinance.



**COOK COUNTY**  
**OFFICE OF THE**  
**Chief Procurement**  
**Officer**

Amendment 4 increases the contract value by \$5,945,518.64 from \$38,731,534.47 to a revised contract value of \$44,677,053.11 and renews the contract term for 2 years from August 1, 2026 through July 31, 2028.

JC/mm

CC: Anna Epps, (OCPO)  
Derrick Thomas, (BOT)



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/31/2026

7/28/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

|                                                                                                                                                                                                                          |                                                         |                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|-----------------------|
| <b>PRODUCER</b> Lockton Companies, LLC<br>DBA Lockton Insurance Brokers, LLC in CA<br>CA license #0F15767<br>Three City Place Dr., Ste. 900<br>St. Louis MO 63141-7081<br>(314) 432-0500 midwestcertificates@lockton.com | <b>CONTACT NAME:</b>                                    |                       |
|                                                                                                                                                                                                                          | <b>PHONE (A/C, No. Ext):</b>                            | <b>FAX (A/C, No):</b> |
| <b>INSURED</b> 1463513 Ensono, Inc.<br>3333 Finley Rd.<br>Downers Grove IL 60515                                                                                                                                         | <b>E-MAIL ADDRESS:</b>                                  |                       |
|                                                                                                                                                                                                                          | <b>INSURER(S) AFFORDING COVERAGE</b>                    |                       |
|                                                                                                                                                                                                                          | <b>INSURER A:</b> American Guarantee and Liab. Ins. Co. | <b>NAIC #</b> 26247   |
|                                                                                                                                                                                                                          | <b>INSURER B:</b> American Zurich Insurance Company     | 40142                 |
|                                                                                                                                                                                                                          | <b>INSURER C:</b>                                       |                       |
|                                                                                                                                                                                                                          | <b>INSURER D:</b>                                       |                       |
| <b>INSURER E:</b>                                                                                                                                                                                                        |                                                         |                       |
| <b>INSURER F:</b>                                                                                                                                                                                                        |                                                         |                       |

**COVERAGES****CERTIFICATE NUMBER:** 18978043**REVISION NUMBER:** XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE                                                                                                                                                                                                                                                                                                      | ADDL INSD                                    | SUBR WVD | POLICY NUMBER  | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS                                                                                                                                                                                                                                            |
|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|----------|----------------|-------------------------|-------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A        | <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b><br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC<br>OTHER: | Y                                            | Y        | GLA 4445185-04 | 7/31/2025               | 7/31/2026               | EACH OCCURRENCE \$ 1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000<br>MED EXP (Any one person) \$ 10,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 2,000,000<br>PRODUCTS - COMP/OP AGG \$ 2,000,000<br>\$ |
| B        | <input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b><br><input checked="" type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY                       | Y                                            | Y        | GLA 4445185-04 | 7/31/2025               | 7/31/2026               | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000<br>BODILY INJURY (Per person) \$ XXXXXXXX<br>BODILY INJURY (Per accident) \$ XXXXXXXX<br>PROPERTY DAMAGE (Per accident) \$ XXXXXXXX<br>\$ XXXXXXXX                                               |
| A        | <input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR<br><input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE<br>DED RETENTION \$                                                                                                                    | N                                            | Y        | AUC 9742863-04 | 7/31/2025               | 7/31/2026               | EACH OCCURRENCE \$ 25,000,000<br>AGGREGATE \$ 25,000,000<br>\$ XXXXXXXX                                                                                                                                                                           |
| B        | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below                                                                                                                          | Y/N<br><input checked="" type="checkbox"/> N | Y<br>N/A | WC 8661388-04  | 7/31/2025               | 7/31/2026               | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER<br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>E.L. DISEASE - POLICY LIMIT \$ 1,000,000                                         |

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

Cook County are included as additional insureds on a Primary and Non-contributory basis if required by written contract with respect to General Liability and Automobile Liability per the terms and conditions of the policy. A waiver of subrogation applies in favor of Cook County Government if required by written contract with respect to General Liability, Automobile Liability, Umbrella Liability, and Workers' Compensation per the terms and conditions of the policy where permitted by state law.

**CERTIFICATE HOLDER****CANCELLATION** See Attachment

**18978043**  
Cook County Government  
161 N Clark street  
Chicago IL 60601

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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Cook County Government  
161 N Clark street  
Chicago IL 60601

**To whom it may concern:**

In our continuing effort to provide timely certificate delivery, Lockton Companies is transitioning to paperless delivery of Certificates of Insurance.

To ensure electronic delivery for future renewals of this certificate, we need your email address. Please contact us via one of the methods below, referencing Certificate ID **18978043**.

- Email: STL-edelivery@lockton.com
- Phone: (866) 728-5657 (toll-free)

If you received this certificate through an internet link where the current certificate is viewable, we have your email and no further action is needed.

In the event your mailing address has changed, will change in the future, or you no longer require this certificate, please let us know using one of the methods above.

***The above inbox is for providing e-Delivery email addresses for next year's renewal certificates ONLY. Your information will be input within 90 days.***

Thank you for your cooperation and willingness in reducing our environmental footprint.

**Lockton Companies**

**COOK COUNTY  
ECONOMIC DISCLOSURE STATEMENT  
AND EXECUTION DOCUMENT  
INDEX**

| <b>Section</b> | <b>Description</b>                                                                                                                                 | <b>Pages</b> |
|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
|                |                                                                                                                                                    |              |
| 1              | Instructions for Completion of EDS                                                                                                                 | EDS i - ii   |
| 2              | Certifications                                                                                                                                     | EDS 1- 2     |
| 3              | Economic and Other Disclosures, Affidavit of Child Support Obligations, Disclosure of Ownership Interest and Familial Relationship Disclosure Form | EDS 3 - 12   |
| 4              | Cook County Affidavit for Wage Theft Ordinance                                                                                                     | EDS 13-14    |
| 5              | Contract and EDS Execution Page                                                                                                                    | EDS 15       |
| 6              | Cook County Signature Page                                                                                                                         | EDS 16       |

**SECTION 1**  
**INSTRUCTIONS FOR COMPLETION OF**  
**ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT**

This Economic Disclosure Statement and Execution Document ("EDS") is to be completed and executed by every Bidder on a County contract, every Proposer responding to a Request for Proposals, and every Respondent responding to a Request for Qualifications, and others as required by the Chief Procurement Officer. The execution of the EDS shall serve as the execution of a contract awarded by the County. The Chief Procurement Officer reserves the right to request that the Bidder or Proposer, or Respondent provide an updated EDS on an annual basis.

**Definitions.** Terms used in this EDS and not otherwise defined herein shall have the meanings given to such terms in the Instructions to Bidders, General Conditions, Request for Proposals, Request for Qualifications, as applicable.

*Affiliate* means a person that directly or indirectly through one or more intermediaries, Controls is Controlled by, or is under common Control with the Person specified.

*Applicant* means a person who executes this EDS.

*Bidder* means any person who submits a Bid.

*Code* means the Code of Ordinances, Cook County, Illinois available on [municode.com](http://municode.com).

*Contract* shall include any written document to make Procurements by or on behalf of Cook County.

*Contractor* or *Contracting Party* means a person that enters into a Contract with the County.

*Control* means the unfettered authority to directly or indirectly manage governance, administration, work, and all other aspects of a business.

*EDS* means this complete Economic Disclosure Statement and Execution Document, including all sections listed in the Index and any attachments.

*Joint Venture* means an association of two or more Persons proposing to perform a for-profit business enterprise. Joint Ventures must have an agreement in writing specifying the terms and conditions of the relationship between the partners and their relationship and respective responsibility for the Contract

*Lobby* or *lobbying* means to, for compensation, attempt to influence a County official or County employee with respect to any County matter.

*Lobbyist* means any person who lobbies.

*Person* or *Persons* means any individual, corporation, partnership, Joint Venture, trust, association, Limited Liability Company, sole proprietorship or other legal entity.

*Prohibited Acts* means any of the actions or occurrences which form the basis for disqualification under the Code, or under the Certifications hereinafter set forth.

*Proposal* means a response to an RFP.

*Proposer* means a person submitting a Proposal.

*Response* means response to an RFQ.

*Respondent* means a person responding to an RFQ.

*RFP* means a Request for Proposals issued pursuant to this Procurement Code.

*RFQ* means a Request for Qualifications issued to obtain the qualifications of interested parties.

**INSTRUCTIONS FOR COMPLETION OF  
ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT**

**Section 1: Instructions.** Section 1 sets forth the instructions for completing and executing this EDS.

**Section 2: Certifications.** Section 2 sets forth certifications that are required for contracting parties under the Code and other applicable laws. Execution of this EDS constitutes a warranty that all the statements and certifications contained, and all the facts stated, in the Certifications are true, correct and complete as of the date of execution.

**Section 3: Economic and Other Disclosures Statement.** Section 3 is the County's required Economic and Other Disclosures Statement form. Execution of this EDS constitutes a warranty that all the information provided in the EDS is true, correct and complete as of the date of execution, and binds the Applicant to the warranties, representations, agreements and acknowledgements contained therein.

**Required Updates.** The Applicant is required to keep all information provided in this EDS current and accurate. In the event of any change in the information provided, including but not limited to any change which would render inaccurate or incomplete any certification or statement made in this EDS, the Applicant shall supplement this EDS up to the time the County takes action, by filing an amended EDS or such other documentation as is required.

**Additional Information.** The County's Governmental Ethics and Campaign Financing Ordinances impose certain duties and obligations on persons or entities seeking County contracts, work, business, or transactions, and the Applicant is expected to comply fully with these ordinances. For further information please contact the Director of Ethics at (312) 603-4304 (69 W. Washington St. Suite 3040, Chicago, IL 60602) or visit the web-site at [cookcountyll.gov/ethics-board-of](http://cookcountyll.gov/ethics-board-of).

**Authorized Signers of Contract and EDS Execution Page.** If the Applicant is a corporation, the President and Secretary must execute the EDS. In the event that this EDS is executed by someone other than the President, attach hereto a certified copy of that section of the Corporate By-Laws or other authorization by the Corporation, satisfactory to the County that permits the person to execute EDS for said corporation. If the corporation is not registered in the State of Illinois, a copy of the Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.

If the Applicant is a partnership or joint venture, all partners or joint venturers must execute the EDS, unless one partner or joint venture has been authorized to sign for the partnership or joint venture, in which case, the partnership agreement, resolution or evidence of such authority satisfactory to the Office of the Chief Procurement Officer must be submitted with this Signature Page.

If the Applicant is a member-managed LLC all members must execute the EDS, unless otherwise provided in the operating agreement, resolution or other corporate documents. If the Applicant is a manager-managed LLC, the manager(s) must execute the EDS. The Applicant must attach either a certified copy of the operating agreement, resolution or other authorization, satisfactory to the County, demonstrating such person has the authority to execute the EDS on behalf of the LLC. If the LLC is not registered in the State of Illinois, a copy of a current Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.

If the Applicant is a Sole Proprietorship, the sole proprietor must execute the EDS.

A "Partnership" "Joint Venture" or "Sole Proprietorship" operating under an Assumed Name must be registered with the Illinois county in which it is located, as provided in 805 ILCS 405 (2012), and documentation evidencing registration must be submitted with the EDS.

Effective October 1, 2016 all foreign corporations and LLCs must be registered with the Illinois Secretary of State's Office unless a statutory exemption applies to the applicant. Applicants who are exempt from registering must provide a written statement explaining why they are exempt from registering as a foreign entity with the Illinois Secretary of State's Office.

**SECTION 2****CERTIFICATIONS**

THE FOLLOWING CERTIFICATIONS ARE MADE PURSUANT TO STATE LAW AND THE CODE. THE APPLICANT IS CAUTIONED TO CAREFULLY READ THESE CERTIFICATIONS PRIOR TO SIGNING THE SIGNATURE PAGE. SIGNING THE SIGNATURE PAGE SHALL CONSTITUTE A WARRANTY BY THE APPLICANT THAT ALL THE STATEMENTS, CERTIFICATIONS AND INFORMATION SET FORTH WITHIN THESE CERTIFICATIONS ARE TRUE, COMPLETE AND CORRECT AS OF THE DATE THE SIGNATURE PAGE IS SIGNED. THE APPLICANT IS NOTIFIED THAT IF THE COUNTY LEARNS THAT ANY OF THE FOLLOWING CERTIFICATIONS WERE FALSELY MADE, THAT ANY CONTRACT ENTERED INTO WITH THE APPLICANT SHALL BE SUBJECT TO TERMINATION.

**A. PERSONS AND ENTITIES SUBJECT TO DISQUALIFICATION**

No person or business entity shall be awarded a contract or sub-contract, for a period of five (5) years from the date of conviction or entry of a plea or admission of guilt, civil or criminal, if that person or business entity:

- 1) Has been convicted of an act committed, within the State of Illinois, of bribery or attempting to bribe an officer or employee of a unit of state, federal or local government or school district in the State of Illinois in that officer's or employee's official capacity;
- 2) Has been convicted by federal, state or local government of an act of bid-rigging or attempting to rig bids as defined in the Sherman Anti-Trust Act and Clayton Act. Act. 15 U.S.C. Section 1 *et seq.*;
- 3) Has been convicted of bid-rigging or attempting to rig bids under the laws of federal, state or local government;
- 4) Has been convicted of an act committed, within the State, of price-fixing or attempting to fix prices as defined by the Sherman Anti-Trust Act and the Clayton Act. 15 U.S.C. Section 1, *et seq.*;
- 5) Has been convicted of price-fixing or attempting to fix prices under the laws the State;
- 6) Has been convicted of defrauding or attempting to defraud any unit of state or local government or school district within the State of Illinois;
- 7) Has made an admission of guilt of such conduct as set forth in subsections (1) through (6) above which admission is a matter of record, whether or not such person or business entity was subject to prosecution for the offense or offenses admitted to; or
- 8) Has entered a plea of *nolo contendere* to charge of bribery, price-fixing, bid-rigging, or fraud, as set forth in subparagraphs (1) through (6) above.

In the case of bribery or attempting to bribe, a business entity may not be awarded a contract if an official, agent or employee of such business entity committed the Prohibited Act on behalf of the business entity and pursuant to the direction or authorization of an officer, director or other responsible official of the business entity, and such Prohibited Act occurred within three years prior to the award of the contract. In addition, a business entity shall be disqualified if an owner, partner or shareholder controlling, directly or indirectly, 20% or more of the business entity, or an officer of the business entity has performed any Prohibited Act within five years prior to the award of the Contract.

**THE APPLICANT HEREBY CERTIFIES THAT:** The Applicant has read the provisions of Section A, Persons and Entities Subject to Disqualification, that the Applicant has not committed any Prohibited Act set forth in Section A, and that award of the Contract to the Applicant would not violate the provisions of such Section or of the Code.

**B. BID-RIGGING OR BID ROTATING**

**THE APPLICANT HEREBY CERTIFIES THAT:** In accordance with 720 ILCS 5/33 E-11, neither the Applicant nor any Affiliated Entity is barred from award of this Contract as a result of a conviction for the violation of State laws prohibiting bid-rigging or bid rotating.

**C. DRUG FREE WORKPLACE ACT**

**THE APPLICANT HEREBY CERTIFIES THAT:** The Applicant will provide a drug free workplace, as required by (30 ILCS 580/3).

**D. DELINQUENCY IN PAYMENT OF TAXES**

**THE APPLICANT HEREBY CERTIFIES THAT:** *The Applicant is not an owner or a party responsible for the payment of any tax or fee administered by Cook County, such as bar award of a contract or subcontract pursuant to the Code, Chapter 34, Section 34-171.*

**E. HUMAN RIGHTS ORDINANCE**

No person who is a party to a contract with Cook County ("County") shall engage in unlawful discrimination or sexual harassment against any individual in the terms or conditions of employment, credit, public accommodations, housing, or provision of County facilities, services or programs (Code Chapter 42, Section 42-30 *et seq.*).

**F. ILLINOIS HUMAN RIGHTS ACT**

**THE APPLICANT HEREBY CERTIFIES THAT:** *It is in compliance with the Illinois Human Rights Act (775 ILCS 5/2-105), and agrees to abide by the requirements of the Act as part of its contractual obligations.*

**G. INSPECTOR GENERAL (COOK COUNTY CODE, CHAPTER 34, SECTION 34-174 and Section 34-250)**

The Applicant has not willfully failed to cooperate in an investigation by the Cook County Independent Inspector General or to report to the Independent Inspector General any and all information concerning conduct which they know to involve corruption, or other criminal activity, by another county employee or official, which concerns his or her office of employment or County related transaction.

The Applicant has reported directly and without any undue delay any suspected or known fraudulent activity in the County's Procurement process to the Office of the Cook County Inspector General.

**H. CAMPAIGN CONTRIBUTIONS (COOK COUNTY CODE, CHAPTER 2, SECTION 2-585)**

**THE APPLICANT CERTIFIES THAT:** It has read and shall comply with the Cook County's Ordinance concerning campaign contributions, which is codified at Chapter 2, Division 2, Subdivision II, Section 585, and can be read in its entirety at [www.municode.com](http://www.municode.com).

**I. GIFT BAN, (COOK COUNTY CODE, CHAPTER 2, SECTION 2-574)**

**THE APPLICANT CERTIFIES THAT:** It has read and shall comply with the Cook County's Ordinance concerning receiving and soliciting gifts and favors, which is codified at Chapter 2, Division 2, Subdivision II, Section 574, and can be read in its entirety at [www.municode.com](http://www.municode.com).

**J. LIVING WAGE ORDINANCE PREFERENCE (COOK COUNTY CODE, CHAPTER 34, SECTION 34-160;**

Unless expressly waived by the Cook County Board of Commissioners, the Code requires that a living wage must be paid to individuals employed by a Contractor which has a County Contract and by all subcontractors of such Contractor under a County Contract, throughout the duration of such County Contract. The amount of such living wage is annually by the Chief Financial Officer of the County, and shall be posted on the Chief Procurement Officer's website.

The term "Contract" as used in Section 4, I, of this EDS, specifically excludes contracts with the following:

- 1) Not-For Profit Organizations (defined as a corporation having tax exempt status under Section 501(C)(3) of the United States Internal Revenue Code and recognized under the Illinois State not-for-profit law);
- 2) Community Development Block Grants;
- 3) Cook County Works Department;
- 4) Sheriff's Work Alternative Program; and
- 5) Department of Correction inmates.

**SECTION 3****REQUIRED DISCLOSURES****1. DISCLOSURE OF LOBBYIST CONTACTS**

List all persons that have made lobbying contacts on your behalf with respect to this contract:

Name

Address

None

**2. LOCAL BUSINESS PREFERENCE STATEMENT (CODE, CHAPTER 34, SECTION 34-230)**

*Local business* means a Person, including a foreign corporation authorized to transact business in Illinois, having a bona fide establishment located within the County at which it is transacting business on the date when a Bid is submitted to the County, and which employs the majority of its regular, full-time work force within the County. A Joint Venture shall constitute a Local Business if one or more Persons that qualify as a "Local Business" hold interests totaling over 50 percent in the Joint Venture, even if the Joint Venture does not, at the time of the Bid submittal, have such a bona fide establishment within the County.

- a) Is Applicant a "Local Business" as defined above?

Yes: ☐No: ☒

- b) If yes, list business addresses within Cook County:

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- c) Does Applicant employ the majority of its regular full-time workforce within Cook County?

Yes: ☐No: ☒**3. THE CHILD SUPPORT ENFORCEMENT ORDINANCE (CODE, CHAPTER 34, SECTION 34-172)**

Every Applicant for a County Privilege shall be in full compliance with any child support order before such Applicant is entitled to receive or renew a County Privilege. When delinquent child support exists, the County shall not issue or renew any County Privilege, and may revoke any County Privilege.

**All Applicants are required to review the Cook County Affidavit of Child Support Obligations attached to this EDS (EDS-5) and complete the Affidavit, based on the instructions in the Affidavit.**

**4. REAL ESTATE OWNERSHIP DISCLOSURES.**

The Applicant must indicate by checking the appropriate provision below and providing all required information that either:

- a) The following is a complete list of all real estate owned by the Applicant in Cook County:

PERMANENT INDEX NUMBER(S): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(ATTACH SHEET IF NECESSARY TO LIST ADDITIONAL INDEX  
NUMBERS)

OR:

- b) ☒ The Applicant owns no real estate in Cook County.

**5. EXCEPTIONS TO CERTIFICATIONS OR DISCLOSURES.**

If the Applicant is unable to certify to any of the Certifications or any other statements contained in this EDS and not explained elsewhere in this EDS, the Applicant must explain below:

NA

If the letters, "NA", the word "None" or "No Response" appears above, or if the space is left blank, it will be conclusively presumed that the Applicant certified to all Certifications and other statements contained in this EDS.

**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. **County reserves the right to request additional information to verify veracity of information contained in this statement.**

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.

"Applicant" means any Entity or person making an application to the County for any County Action.

"County Action" means any action by a County Agency, a County Department, or the County Board regarding an ordinance or ordinance amendment, a County Board approval, or other County agency approval, with respect to contracts, leases, or sale or purchase of real estate.

"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 Ensono LLC

D/B/A: \_\_\_\_\_ FEIN # Only: 37- 2992650

Street Address: 3333 Finley Road

City: Downers Grove State: \_\_\_\_\_ Zip Code: 60515

Phone No.: +1 (866) 880-8611

Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

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) Limited liability company

**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 |
|--------------|-------------------------------------------|-----------------------------------------|
| Ensono, Inc. | 3333 Finley Road, Downers Grove, IL 60515 | 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   |
|---------------------------------|---------------------------------------------|-----------------------------------|----------------|
| Ensono Intermediate Holdco, Inc | 3333 Finley Road<br>Downers Grove, IL 60515 | 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 |
|-----------------|---------------------------------|------------------------------------------------------------------------------|----------------|
| Jeff Von Deylen | 3333 Finley Road, Downers Grove | CEO/President                                                                |                |
| Scott Grossman  | 3333 Finley Road, Downers Grove | CFO/President                                                                |                |
| Pete Bazil      | 3333 Finley Road, Downers Grove | Chief Legal Officer & Corporate Secretary                                    |                |

**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.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Kristin Swift

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

*Kristin Swift*

Signature

kristin.swift@ensono.com

E-mail address

Subscribed to and sworn before me  
this 8 day of June, 2026

X

*Keanu V Calumpang*

Notary Public Signature

VP and Controller

Title

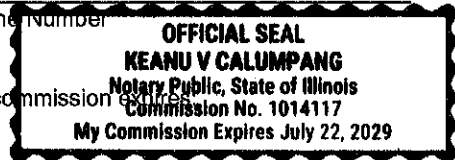
*6/8/26*

Date

+1 (630) 944-0010

Phone Number

My commission expires



Notary Seal

The Cook County Code of Ordinances concerning ownership interests information current as of the date of this Statement, until such time as the information in this Statement will be maintained as **additional information to verify**

If you are asked to list names, the information returned and any action regarding the same taken by the County Board or Council

## Ownership Interest Decla

1. List the name(s), a  
more than five per

Name

Ensono Intermediate ho

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**COOK COUNTY**

Kristin Swift

Name of Authorized Applicant

Kristin Swift

Signature

Kristin. swift

E-mail address

Subscribed to and sworn before



**COOK COUNTY BOARD OF ETHICS**  
 69 W. WASHINGTON STREET, SUITE 3040  
 CHICAGO, ILLINOIS 60602  
 312/603-4304 Office 312/603-9988 Fax

### **FAMILIAL RELATIONSHIP DISCLOSURE PROVISION**

#### **Nepotism Disclosure Requirement:**

Doing a significant amount of business with the County requires that you disclose to the Board of Ethics the existence of any familial relationships with any County employee or any person holding elective office in the State of Illinois, the County, or in any municipality within the County. The Ethics Ordinance defines a significant amount of business for the purpose of this disclosure requirement as more than \$25,000 in aggregate County leases, contracts, purchases or sales in any calendar year.

If you are unsure of whether the business you do with the County or a County agency will cross this threshold, err on the side of caution by completing the attached familial disclosure form because, among other potential penalties, any person found guilty of failing to make a required disclosure or knowingly filing a false, misleading, or incomplete disclosure will be prohibited from doing any business with the County for a period of three years. The required disclosure should be filed with the Board of Ethics by January 1 of each calendar year in which you are doing business with the County and again with each bid/proposal/quotation to do business with Cook County. The Board of Ethics may assess a late filing fee of \$100 per day after an initial 30-day grace period.

The person that is doing business with the County must disclose his or her familial relationships. If the person on the County lease or contract or purchasing from or selling to the County is a business entity, then the business entity must disclose the familial relationships of the individuals who are and, during the year prior to doing business with the County, were:

- its board of directors,
- its officers,
- its employees or independent contractors responsible for the general administration of the entity,
- its agents authorized to execute documents on behalf of the entity, and
- its employees who directly engage or engaged in doing work with the County on behalf of the entity.

Do not hesitate to contact the Board of Ethics at (312) 603-4304 for assistance in determining the scope of any required familial relationship disclosure.

#### **Additional Definitions:**

*"Familial relationship"* means a person who is a spouse, domestic partner or civil union partner of a County employee or State, County or municipal official, or any person who is related to such an employee or official, whether by blood, marriage or adoption, as a:

- |                                  |                                          |                                       |
|----------------------------------|------------------------------------------|---------------------------------------|
| <input type="checkbox"/> Parent  | <input type="checkbox"/> Grandparent     | <input type="checkbox"/> Stepfather   |
| <input type="checkbox"/> Child   | <input type="checkbox"/> Grandchild      | <input type="checkbox"/> Stepmother   |
| <input type="checkbox"/> Brother | <input type="checkbox"/> Father-in-law   | <input type="checkbox"/> Stepson      |
| <input type="checkbox"/> Sister  | <input type="checkbox"/> Mother-in-law   | <input type="checkbox"/> Stepdaughter |
| <input type="checkbox"/> Aunt    | <input type="checkbox"/> Son-in-law      | <input type="checkbox"/> Stepbrother  |
| <input type="checkbox"/> Uncle   | <input type="checkbox"/> Daughter-in-law | <input type="checkbox"/> Stepsister   |
| <input type="checkbox"/> Niece   | <input type="checkbox"/> Brother-in-law  | <input type="checkbox"/> Halfbrother  |
| <input type="checkbox"/> Nephew  | <input type="checkbox"/> Sister-in-law   | <input type="checkbox"/> Halfsister   |

**COOK COUNTY BOARD OF ETHICS  
FAMILIAL RELATIONSHIP DISCLOSURE FORM**

**A. PERSON DOING OR SEEKING TO DO BUSINESS WITH THE COUNTY**Name of Person Doing Business with the County: Ensono, LLCAddress of Person Doing Business with the County: 3333 Finley Road, Downers Grove, IL 60515Phone number of Person Doing Business with the County: +1 (630) 944-0010Email address of Person Doing Business with the County: kristin.swift@ensono.com

If Person Doing Business with the County is a Business Entity, provide the name, title and contact information for the individual completing this disclosure on behalf of the Person Doing Business with the County:

Kristin Swift, VP and Controller Finance & Planning, +1 (630) 944-0010

**B. DESCRIPTION OF BUSINESS WITH THE COUNTY**

*Append additional pages as needed and for each County lease, contract, purchase or sale sought and/or obtained during the calendar year of this disclosure (or the proceeding calendar year if disclosure is made on January 1), identify:*

The lease number, contract number, purchase order number, request for proposal number and/or request for qualification number associated with the business you are doing or seeking to do with the County: \_\_\_\_\_

2107-18733 A4

The aggregate dollar value of the business you are doing or seeking to do with the County: \$ \$44,677,053.11

The name, title and contact information for the County official(s) or employee(s) involved in negotiating the business you are doing or seeking to do with the County: Anna Epps, Lead Contract Negotiator, OCPO, anna.epps@cookcountyll.gov

The name, title and contact information for the County official(s) or employee(s) involved in managing the business you are doing or seeking to do with the County: Derrick Thomas, Deputy CIO, BOT, derrick.thomas@cookcountyll.gov

**C. DISCLOSURE OF FAMILIAL RELATIONSHIPS WITH COUNTY EMPLOYEES OR STATE, COUNTY OR MUNICIPAL ELECTED OFFICIALS**

*Check the box that applies and provide related information where needed*

- ☐ The Person Doing Business with the County is an **individual** and there is **no familial relationship** between this individual and any Cook County employee or any person holding elective office in the State of Illinois, Cook County, or any municipality within Cook County.
- ☒ The Person Doing Business with the County is a **business entity** and there is **no familial relationship** between any member of this business entity's board of directors, officers, persons responsible for general administration of the business entity, agents authorized to execute documents on behalf of the business entity or employees directly engaged in contractual work with the County on behalf of the business entity, and any Cook County employee or any person holding elective office in the State of Illinois, Cook County, or any municipality within Cook County.

**COOK COUNTY BOARD OF ETHICS  
FAMILIAL RELATIONSHIP DISCLOSURE FORM**

- ☐ The Person Doing Business with the County is an individual and there is a familial relationship between this individual and at least one Cook County employee and/or a person or persons holding elective office in the State of Illinois, Cook County, and/or any municipality within Cook County. **The familial relationships are as follows:**

| Name of Individual Doing Business with the County | Name of Related County Employee or State, County or Municipal Elected Official | Title and Position of Related County Employee or State, County or Municipal Elected Official | Nature of Familial Relationship* |
|---------------------------------------------------|--------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|----------------------------------|
| NA                                                |                                                                                |                                                                                              |                                  |
|                                                   |                                                                                |                                                                                              |                                  |
|                                                   |                                                                                |                                                                                              |                                  |

*If more space is needed, attach an additional sheet following the above format.*

- ☐ The Person Doing Business with the County is a business entity and there is a familial relationship between at least one member of this business entity's board of directors, officers, persons responsible for general administration of the business entity, agents authorized to execute documents on behalf of the business entity and/or employees directly engaged in contractual work with the County on behalf of the business entity, on the one hand, and at least one Cook County employee and/or a person holding elective office in the State of Illinois, Cook County, and/or any municipality within Cook County, on the other. **The familial relationships are as follows:**

| Name of Member of Board of Director for Business Entity Doing Business with the County | Name of Related County Employee or State, County or Municipal Elected Official | Title and Position of Related County Employee or State, County or Municipal Elected Official | Nature of Familial Relationship* |
|----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|----------------------------------|
| NA                                                                                     |                                                                                |                                                                                              |                                  |
|                                                                                        |                                                                                |                                                                                              |                                  |
|                                                                                        |                                                                                |                                                                                              |                                  |

| Name of Officer for Business Entity Doing Business with the County | Name of Related County Employee or State, County or Municipal Elected Official | Title and Position of Related County Employee or State, County or Municipal Elected Official | Nature of Familial Relationship* |
|--------------------------------------------------------------------|--------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|----------------------------------|
| NA                                                                 |                                                                                |                                                                                              |                                  |
|                                                                    |                                                                                |                                                                                              |                                  |
|                                                                    |                                                                                |                                                                                              |                                  |

Name of Person Responsible  
for the General  
Administration of the  
Business Entity Doing  
Business with the County

NA

Name of Related County  
Employee or State, County or  
Municipal Elected Official

Title and Position of Related  
County Employee or State, County  
or Municipal Elected Official

Nature of Familial  
Relationship\*

Name of Agent Authorized  
to Execute Documents for  
Business Entity Doing  
Business with the County

NA

Name of Related County  
Employee or State, County or  
Municipal Elected Official

Title and Position of Related  
County Employee or State, County  
or Municipal Elected Official

Nature of Familial  
Relationship\*

Name of Employee of  
Business Entity Directly  
Engaged in Doing Business  
with the County

NA

Name of Related County  
Employee or State, County or  
Municipal Elected Official

Title and Position of Related  
County Employee or State, County  
or Municipal Elected Official

Nature of Familial  
Relationship\*

*If more space is needed, attach an additional sheet following the above format.*

**VERIFICATION:** To the best of my knowledge, the information I have provided on this disclosure form is accurate and complete. I acknowledge that an inaccurate or incomplete disclosure is punishable by law, including but not limited to fines and debarment.

Kristen Swift  
Signature of Recipient

6/8/26  
Date

**SUBMIT COMPLETED FORM TO:**

Cook County Board of Ethics  
69 West Washington Street, Suite 3040, Chicago, Illinois 60602  
Office (312) 603-4304 – Fax (312) 603-9988  
CookCounty.Ethics@cookcountyil.gov

\* Spouse, domestic partner, civil union partner or parent, child, sibling, aunt, uncle, niece, nephew, grandparent or grandchild by blood, marriage (i.e. in laws and step relations) or adoption.

## SECTION 4

**COOK COUNTY AFFIDAVIT FOR WAGE THEFT ORDINANCE**

Effective May 1, 2015, every Person, including Substantial Owners, seeking a Contract with Cook County must comply with the Cook County Wage Theft Ordinance set forth in Chapter 34, Article IV, Section 179. Any Person/Substantial Owner, who fails to comply with Cook County Wage Theft Ordinance, may request that the Chief Procurement Officer grant a reduction or waiver in accordance with Section 34-179(d).

"Contract" means any written document to make Procurements by or on behalf of Cook County.

"Person" means any individual, corporation, partnership, Joint Venture, trust, association, limited liability company, sole proprietorship or other legal entity.

"Procurement" means obtaining supplies, equipment, goods, or services of any kind.

"Substantial Owner" means any person or persons who own or hold a twenty-five percent (25%) or more percentage of interest in any business entity seeking a County Privilege, including those shareholders, general or limited partners, beneficiaries and principals; except where a business entity is an individual or sole proprietorship, Substantial Owner means that individual or sole proprietor.

All Persons/Substantial Owners are required to complete this affidavit and comply with the Cook County Wage Theft Ordinance before any Contract is awarded. Signature of this form constitutes a certification the information provided below is correct and complete, and that the individual(s) signing this form has/have personal knowledge of such information. County reserves the right to request additional information to verify veracity of information contained in this Affidavit.

**I. Contract Information:**

Contract Number: 2107-18733 A4

County Using Agency (requesting Procurement): Bureau of Technology

**II. Person/Substantial Owner Information:**

Person (Corporate Entity Name): Ensono LLC

Substantial Owner Complete Name: Ensono Inc

FEIN#

E-mail address: \_\_\_\_\_

Street Address: 3333 Finley Road

City: Downers Grove

State: IL Zip: 60515

**III. Compliance with Wage Laws:**

Within the past five years has the Person/Substantial Owner, in any judicial or administrative proceeding, been convicted of, entered a plea, made an admission of guilt or liability, or had an administrative finding made for committing a repeated or willful violation of any of the following laws:

No *Illinois Wage Payment and Collection Act, 820 ILCS 115/1 et seq., YES or NO*

No *Illinois Minimum Wage Act, 820 ILCS 105/1 et seq., YES or NO*

No *Illinois Worker Adjustment and Retraining Notification Act, 820 ILCS 65/1 et seq., YES or NO*

No *Employee Classification Act, 820 ILCS 185/1 et seq., YES or NO*

No *Fair Labor Standards Act of 1938, 29 U.S.C. 201, et seq., YES or NO*

No *Any comparable state statute or regulation of any state, which governs the payment of wages YES or NO*

If the Person/Substantial Owner answered "Yes" to any of the questions above, it is ineligible to enter into a Contract with Cook County, but can request a reduction or waiver under **Section IV**.

**IV. Request for Waiver or Reduction**

If Person/Substantial Owner answered "Yes" to any of the questions above, it may request a reduction or waiver in accordance with Section 34-179(d), provided that the request for reduction of waiver is made on the basis of one or more of the following actions that have taken place:

- No      There has been a bona fide change in ownership or Control of the ineligible Person or Substantial Owner. YES or NO
- No      Disciplinary action has been taken against the individual(s) responsible for the acts giving rise to the violation. YES or NO
- No      Remedial action has been taken to prevent a recurrence of the acts giving rise to the disqualification or default. YES or NO
- No      Other factors that the Person or Substantial Owner believe are relevant. YES or NO

The Person/Substantial Owner must submit documentation to support the basis of its request for a reduction or waiver. The Chief Procurement Officer reserves the right to make additional inquiries and request additional documentation.

**V. Affirmation**

The Person/Substantial Owner affirms that all statements contained in the Affidavit are true, accurate and complete.

Signature: Kristin Swift Date: May 28, 2026

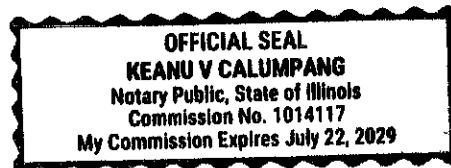
Name of Person signing (Print): Kristin Swift Title: VP Controller

Subscribed and sworn to before me this 8 day of June, 2026

X Keanu V Calumpang  
Notary Public Signature

Notary Seal

**Note: The above information is subject to verification prior to the award of the Contract.**



## SECTION 5

## CONTRACT AND EDS EXECUTION PAGE

The Applicant hereby certifies and warrants that all of the statements, certifications and representations set forth in this EDS are true, complete and correct; that the Applicant is in full compliance and will continue to be in compliance throughout the term of the Contract or County Privilege issued to the Applicant with all the policies and requirements set forth in this EDS; and that all facts and information provided by the Applicant in this EDS are true, complete and correct. The Applicant agrees to inform the Chief Procurement Officer in writing if any of such statements, certifications, representations, facts or information becomes or is found to be untrue, incomplete or incorrect during the term of the Contract or County Privilege.

## Execution by Corporation

Corporation's Name

President's Printed Name and Signature

Telephone

Email

Secretary Signature

Date

## Execution by LLC

Ensono LLC

LLC Name

May 29, 2026

Date

Kristin Swift Kristin Swift

\*Member/Manager Printed Name and Signature

866-880-8611 Kristin.swift@ensond.com

Telephone and Email

## Execution by Partnership/Joint Venture

Partnership/Joint Venture Name

\*Partner/Joint Venturer Printed Name and Signature

Date

Telephone and Email

## Execution by Sole Proprietorship

Printed Name Signature

Assumed Name (if applicable)

Date

Telephone and Email

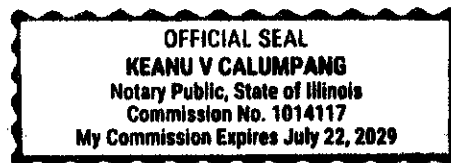
Subscribed and sworn to before me this

8 day of June, 2026.

*Keanu V Calumpang*  
Notary Public Signature

My commission expires:

Notary Seal



\*If the operating agreement, partnership agreement or governing documents requiring execution by multiple members, managers, partners, or joint venturers, please complete and execute additional Contract and EDS Execution Pages.