#### STATUTORY BOND

### KNOW ALL MEN BY THESE PRESENTS:

Mid-America Golf & The Guarantee Company That we, <u>Landscape</u>, Inc. , as Principal, and <u>of North America USA</u>, a corporation organized under the laws of the State of \_\_\_\_\_\_, and authorized to transact business in the State of Oklahoma, as Surety, are held and firmly bound unto the Norman Municipal Authority, a public trust State of Oklahoma, herein called Authority in the DOLLARS (\$450,086.00\*), for the payment of which Principal and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents. \*Four Hundred Fifty Thousand Eighty Six Dollars and 00/100

WHEREAS, The conditions of this obligation are such that the Principal, being the lowest and most advantageous bidder on the following Project:

### GRIFFIN SOCCER COMPLEX SOUTHWEST FIELDS – PHASE 3B

and has entered into a certain written contract (K-1920-89) with the Norman Municipal Authority, dated \_\_\_\_\_\_\_, 20\_\_\_\_\_, for the erection and construction of this Project, that Contract being incorporated herein by reference as if fully set forth.

NOW, THEREFORE, if the Principal, shall properly and promptly complete the work on this Project in accordance with the Contract, and shall well and truly pay all indebtedness incurred for labor and material and repairs to and parts for equipment furnished in the making of the Project, whether incurred by said Principal, its subcontractors, or any material men, then this obligation shall be void. Otherwise, this obligation shall remain in full force and effect. If debts are not paid within thirty (30) days after same becomes due and payable, the person, firm, or corporation entitled thereto may sue and recover on this bond, the amount so due and unpaid.

It is further expressly agreed and understood by the parties hereto that no changes or alterations in said Contract and no deviations from the plan or mode of procedure herein fixed shall have the effect of releasing the sureties, or any of them, from the obligations of this Bond.

It is further expressly agreed that the Principal's obligations under this Bond include payment of not less than the prevailing hourly rate of wages as established by the Commissioner of Labor of the State of Oklahoma and by the Secretary of the U.S. Department of Labor or as determined by a court on appeal.

# Bond # B-1920-58

IN WITNESS WHEREOF, the said Principal has and its corporate seal (where applicable) to representative(s), on the 2nd day of January these presents to be executed in its name and its corprepresentative, on the 2nd day of January	be hereunto affixed by its duly authorized  , 2020 and the said Surety has caused
(Corporate Seal) (where applicable)	Mid-America Golf & Landscape, Inc.
ħ.	Principal
ATTEST:	Signed:
	Authorized Representative
	Sec Measurer
Corporate Secretary (where applicable)	Title
	Address: 1621 SE Summit Street, Lee's Summit, MO 64081 Telephone:
(Corporate Seal) (where applicable)	The Guarantee Company of North America USA
	Surety
ATTEST:	Signed Made Control Signed Authorized Representative
I mala L. Well	CONTROL DO
Corporate Secretary (where applicable)	Title Susan E. Miranda, Attorney-in-Fact
Witness	Address: One Towne Square, Suite 1479, Southfield, MI 48076
	Telephone: 248-281-0281 x 66012
CORPORATE ACKN	OWLEDGMENT
STATE OF OKLAHOMA Missouri ) COUNTY OF Jackson )	
The foregoing instrument was acknowledged before to the foregoing instrument was acknowledged before the foregoing instrument was acknowledged by the foregoing instrument was acknowledged by the foregoing instrument was ac	me this Z day of  Nike Corde (1 (Name &
corporation, on behalf of the corporation.	Missouri
	(
WITNESS my hand and seal this 2 day of	Janeary, 2000.
Touth H	KRISTI HERRINGTON
Notary Public	My Commission Expires November 27, 2022
My Commission Expires: 1/22/2012	November 27, 2007

## NORMAN MUNICIPAL AUTHORITY

Bety Iluckala
City Attorney
Approved as to form and legality this 10 day of 00000, 2000.



# The Guarantee Company of North America USA

Southfield, Michigan

Bond No. 90165013

Principal: Mid-America Golf & Landscape, Inc.

Obligee: City of Norman, Oklahoma

## **POWER OF ATTORNEY**

NOW ALL BY THESE PRESENTS: That THE GUARANTEE COMPANY OF NORTH AMERICA USA, a corporation organized and existing under the laws of the State of Michigan, having its principal office in Southfield, Michigan, does hereby constitute and appoint

Susan E. Miranda Thomas McGee, L.C.

its true and lawful attorney(s)-in-fact to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise.

The execution of such instrument(s) in pursuance of these presents, shall be as binding upon **THE GUARANTEE COMPANY OF NORTH AMERICA USA** as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by its regularly elected officers at the principal office.

The Power of Attorney is executed and may be certified so, and may be revoked, pursuant to and by authority of Article IX, Section 9.03 of the By-Laws adopted by the Board of Directors of **THE GUARANTEE COMPANY OF NORTH AMERICA USA** at a meeting held on the 31<sup>st</sup> day of December, 2003. The President, or any Vice President, acting with any Secretary or Assistant Secretary, shall have power and authority:

- 1. To appoint Attorney(s)-in-fact, and to authorize them to execute on behalf of the Company, and attach the Seal of the Company thereto, bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof; and
- 2. To revoke, at any time, any such Attorney-in-fact and revoke the authority given, except as provided below
- 3. In connection with obligations in favor of the Florida Department of Transportation only, it is agreed that the power and authority hereby given to the Attorney-in-Fact includes any and all consents for the release of retained percentages and/or final estimates on engineering and construction contracts required by the State of Florida Department of Transportation. It is fully understood that consenting to the State of Florida Department of Transportation making payment of the final estimate to the Contractor and/or its assignee, shall not relieve this surety company of any of its obligations under its bond.
- 4. In connection with obligations in favor of the Kentucky Department of Highways only, it is agreed that the power and authority hereby given to the Attorney-in-Fact cannot be modified or revoked unless prior written personal notice of such intent has been given to the Commissioner Department of Highways of the Commonwealth of Kentucky at least thirty (30) days prior to the modification or revocation.

Further, this Power of Attorney is signed and sealed by facsimile pursuant to resolution of the Board of Directors of the Company adopted at a meeting duly called and held on the 6th day of December 2011, of which the following is a true excerpt:

RESOLVED that the signature of any authorized officer and the seal of the Company may be affixed by facsimile to any Power of Attorney or certification thereof authorizing the execution and delivery of any bond, undertaking, contracts of indemnity and other writings obligatory in the nature thereof, and such signature and seal when so used shall have the same force and effect as though manually affixed.

IN WITNESS WHEREOF, THE GUARANTEE COMPANY OF NORTH AMERICA USA has caused this instrument to be signed and its corporate seal to be affixed by its authorized officer, this 2<sup>nd</sup> day of October, 2015.

THE GUARANTEE COMPANY OF NORTH AMERICA USA

Make Churchan

STATE OF MICHIGAN Steph County of Oakland

Stephen C. Ruschak, President & Chief Operating Officer

Randall Musselman, Secretary

Conquesquerelle

On this 2nd day of October, 2015 before me came the individuals who executed the preceding instrument, to me personally known, and being by me duly sworn, said that each is the herein described and authorized officer of The Guarantee Company of North America USA; that the seal affixed to said instrument is the Corporate Seal of said Company; that the Corporate Seal and each signature were duly affixed by order of the Board of Directors of said Company.



Cynthia A. Takai Notary Public, State of Michigan County of Oakland

My Commission Expires February 27, 2024
Acting in Oakland County

IN WITNESS WHEREOF, I have hereunto set my hand at The Guarantee Company of North America USA offices the day and year above written.

Cynthia a. Takai

I, Randall Musselman, Secretary of THE GUARANTEE COMPANY OF NORTH AMERICA USA, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney executed by THE GUARANTEE COMPANY OF NORTH AMERICA USA, which is still in full force and effect.

CHECKTER COME

IN WITNESS WHEREOF, I have thereunto set my hand and attached the seal of said Company this

day of

Randall Musselman, Secretary

Marace Jumselin



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/31/2019

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).

	this certificate does not confer rights	to th	e cer	tificate holder in lieu of s	ne poii uch en	cy, certain p dorsement(s	olicies may ).	require an endorsemer	it. A st	atement on	
PRODUCER Thomas McGee, L.C. 120 W 12th St., Suite 1000 Kansas City MO 64105					CONTACT NAME: Nathan Hoover						
					PHONE (A/C, No, Ext): 816-842-4800 (A/C, No): 816-472-5018						
					E-MAIL ADDRESS: nhoover@thomasmcgee.com						
Trained Oily in 0 04 100									NAIC#		
					INSURER A : BITCO National Insurance Co					20109	
	URED			MIDAM-3						20095	
db	id-America Golf & Landscape, Inc. oa Mid-America Sports Construction				INSURE	RC:					
16	21 SE Summit Avenue				INSURE						
Le	e's Summit MO 64081				INSURE						
					INSURE						
	OVERAGES CEF	RTIFI	CATE	E NUMBER: 385945336				REVISION NUMBER:			
C	HIS IS TO CERTIFY THAT THE POLICIES NOICATED. NOTWITHSTANDING ANY RECERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	PERT POLI	REME TAIN, CIES.	INT, TERM OR CONDITION THE INSURANCE AFFORDI LIMITS SHOWN MAY HAVE	OF AN'	Y CONTRACT	OR OTHER	DOCUMENT WITH RESPE	CT TO	MUICH THIC	
INSF	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	rs		
Α	X COMMERCIAL GENERAL LIABILITY			CLP 3 679 689		3/25/2019	3/25/2020	EACH OCCURRENCE	\$ 1,000,	,000	
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,00		
	X Contractual Liab							MED EXP (Any one person)	\$ 10,000	0	
								PERSONAL & ADV INJURY	\$ 1,000,	,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,000,	,000	
	POLICY X PRO-							PRODUCTS - COMP/OP AGG	\$ 2,000,	,000	
A	OTHER:	_						COMPINED ONIOLE LINE	\$		
^	X ANY AUTO			CAP 3 679 690		3/25/2019	3/25/2020	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000		
	OWNED SCHEDULED							BODILY INJURY (Per person)	\$		
	AUTOS ONLY AUTOS NON-OWNED							BODILY INJURY (Per accident) PROPERTY DAMAGE	\$		
	AUTOS ONLY AUTOS ONLY						(Per accident)	\$			
В	X UMBRELLA LIAB X OCCUR			CUP 2 815 894		3/25/2019	2/05/0000		\$		
	EXCESS LIAB CLAIMS-MADE			001 2 013 034		3/23/2019	3/25/2020 EACH OCCURRENCE \$8,000,				
	DED X RETENTION \$ 10,000				AGGREGATE \$8,000,000				000		
Α	WORKERS COMPENSATION			WC 3 679 691		3/25/2019	3/25/2020	X PER OTH-	\$		
AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below					0,20,2010		5/20/2020	E.L. EACH ACCIDENT	\$ 1,000,000		
								E.L. DISEASE - EA EMPLOYEE			
								E.L. DISEASE - POLICY LIMIT \$ 1,00			
								E.C. BIOLAGE - FOLIGIT ENVIT	\$ 1,000,0	300	
										ľ	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Project: Griffin Soccer Complex Southwest Fields - Phase 3B 30 day notice of cancellation applies.											
CEF	RTIFICATE HOLDER		CANCELLATION								
City of Norman, Oklahoma PO Box 370					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					:D BEFORE VERED IN	
	200		HIN OF								



## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 12/31/2019

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li t	f SUBROGATION IS WAIVED, subject his certificate does not confer rights t	to to	he te	erms and conditions of the tificate holder in lieu of s	ne poli	cy, certain p	olicies may	require an endorsemen	t. A st	atement on
PRODUCER			CONTACT NAME: Nathan Hoover							
Thomas McGee, L.C. 120 W 12th St., Suite 1000 Kansas City MO 64105				PHONE						
				RAIC, No, Ext): 816-842-4800					2-3016	
Kansas City MO 64105										
					INSURER(S) AFFORDING COVERAGE					NAIC#
INSI	URED			MIDAM-3	INSURER A : BITCO National Insurance Co  INSURER B : BITCO General Insurance Corp *					20109
Mi	d-America Golf & Landscape, Inc.					A CONTRACTOR OF THE CONTRACTOR	senerai insur	ance Corp -	-	20095
	a Mid-America Sports Construction 21 SE Summit Avenue				INSURE				-	
	e's Summit MO 64081				INSURE	Nacional Control				
	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3				INSURE					
	VERAGES CER	TICI	CATI	E NUMBER: 005045000	INSURE	RF:		DEL//01011111111111		
	HIS IS TO CERTIFY THAT THE POLICIES			E NUMBER: 385945336	VE DEE	N ISSUED TO	THE INCHES	REVISION NUMBER:	LIE BOL	IOV DEDICE
110	NDICATED. NOTWITHSTANDING ANY RE	QUII	REME	NT. TERM OR CONDITION	OF AN	Y CONTRACT	OR OTHER	DOCUMENT WITH RESPE	CT TO V	WHICH THIS
C	ERTIFICATE MAY BE ISSUED OR MAY I	PER"	TAIN.	THE INSURANCE AFFORD	ED BY	THE POLICIE	S DESCRIBE	D HEREIN IS SUBJECT TO	O ALL T	HE TERMS,
INSR	XCLUSIONS AND CONDITIONS OF SUCH		CIES.		BEEN F					
INSR LTR			WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
Α	X COMMERCIAL GENERAL LIABILITY			CLP 3 679 689		3/25/2019	3/25/2020	EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000,	,000
	CLAIMS-MADE X OCCUR							PREMISES (Ea occurrence)	\$ 100,00	00
	X Contractual Liab							MED EXP (Any one person)	\$ 10,000	0
								PERSONAL & ADV INJURY	\$ 1,000,	,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,000,	,000
	POLICY X PRO-							PRODUCTS - COMP/OP AGG	\$ 2,000,	,000
	OTHER:								\$	
Α	AUTOMOBILE LIABILITY			CAP 3 679 690	3/25/2019	3/25/2020	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000		
	X ANY AUTO							BODILY INJURY (Per person)	1) \$	
	OWNED SCHEDULED AUTOS HIRED NON-OWNED								\$	
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	AMAGE \$	
									\$	
В	X UMBRELLA LIAB X OCCUR			CUP 2 815 894		3/25/2019	3/25/2020	EACH OCCURRENCE	\$ 8,000,	000
	EXCESS LIAB CLAIMS-MADE				AGGREGATE \$8,00					000
	1000	DED X RETENTION \$ 10,000				\$				
A WORKERS COMPENSATION AND EMPLOYERS' LIABILITY WC 3 679 691			WC 3 679 691		3/25/2019	3/25/2020	X PER STATUTE ER OTH-			
ANYPROPRIETOR/PARTNER/EXECUTIVE N N/A						E.L. EACH ACCIDENT	\$ 1,000,0	000		
(Mandatory in NH)								E.L. DISEASE - EA EMPLOYEE	\$ 1,000,0	000
	DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$ 1,000,0	000
DESC	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL ject: Griffin Soccer Complex Southwest F	ES (A	CORD	101, Additional Remarks Schedule	e, may be	attached if more	space is require	d)		
	day notice of cancellation applies.	leiu	5 - FI	iase ob						
y										
CERTIFICATE HOLDER					CANCELLATION					
								SCRIBED POLICIES BE CA		
								REOF, NOTICE WILL B PROVISIONS.	E DELI	VERED IN
City of Norman, Oklahoma					ACCORDANCE WITH THE POLICY PROVISIONS.					
PO Box 370 Norman OK 73070				AUTHORIZED REPRESENTATIVE						
				126m						



# CERTIFICATE OF LIABILITY INSURANCE

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this certificate does not confer rights to the certificate holder in lieu of s				TABLETAE								
Thomas McGee, L.C.				NAME: Nathan Hoover								
12   K	20 W 12th St., Suite 1000				(A/C, No, Ext): 816-842-4800 (A/C, No): 816-472-5018							
Kansas City MO 64105					ADDRESS: nhoover@thomasmcgee.com  INSURER(S) AFFORDING COVERAGE NAIC #							
				3			NAIC#					
INS	URED			MIDAM-3	INSURER A : BITCO National Insurance Co  INSURER B : BITCO General Insurance Corp *					20109		
M	id-America Golf & Landscape, Inc.				1.00			20095				
	oa Mid-America Sports Construction				INSUR							
	621 SE Summit Avenue ee's Summit MO 64081				INSURER D :							
-					INSUR							
	OVERAGES CER	TIEL	CATE	- NUMBER COSCUSION	INSURE	RF:						
_	THIS IS TO CERTIFY THAT THE POLICIES			NUMBER: 385945336	/E DEE	N ICCUED TO	THE INCHES	REVISION NUMBER:				
E	NDICATED. NOTWITHSTANDING ANY RECERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	PERT POLI	REME TAIN.	NT, TERM OR CONDITION THE INSURANCE AFFORD! LIMITS SHOWN MAY HAVE	OF AN	Y CONTRACT THE POLICIES REDUCED BY I	OR OTHER S DESCRIBE PAID CLAIMS	DOCUMENT WITH RESPE	OT TO	ARHOLL TIMO		
INSF		INSD	WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s			
A	X COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE X OCCUR			CLP 3 679 689		3/25/2019	3/25/2020	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000			
	X Contractual Liab							MED EXP (Any one person)	\$ 100,00			
								PERSONAL & ADV INJURY				
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 1,000,			
	POLICY X PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$ 2,000,			
	OTHER:							PRODUCTS - COMPTOP AGG	\$ 2,000,	000		
Α	AUTOMOBILE LIABILITY			CAP 3 679 690		3/25/2019 3/25/2020 COMBINED SINGLE LIMIT		\$ 1,000,000				
	X ANY AUTO						0,10,1010	(Ea accident) BODILY INJURY (Per person)				
	OWNED SCHEDULED AUTOS ONLY							BODILY INJURY (Per accident)	<u> </u>			
	HIRED NON-OWNED							PROPERTY DAMAGE	\$			
AUTOS ONLY AUTOS ONLY								(Per accident)	\$	***		
B X UMBRELLA LIAB X OCCUR				CUP 2 815 894		3/25/2019	3/25/2020	EACH OCCURRENCE	\$ 8,000,	000		
	EXCESS LIAB CLAIMS-MADE				1			AGGREGATE	\$ 8,000,			
	DED X RETENTION\$ 10,000							THOUSE OF THE	\$	500		
Α	A WORKERS COMPENSATION W.C. 3 679 691					3/25/2019	3/25/2020	X PER OTH-	<u> </u>			
AND EMPLOYERS' LIABILITY  ANYPROPRIETOR/PARTNER/EXECUTIVE  Y / N					1			E.L. EACH ACCIDENT				
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)								E.L. DISEASE - EA EMPLOYEE				
	If yes, describe under DESCRIPTION OF OPERATIONS below								\$ 1,000,0			
								E.E. BIOLAGE - FOLIGI EIMIT	\$ 1,000,0	,,,,		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Project: Griffin Soccer Complex Southwest Fields - Phase 3B 30 day notice of cancellation applies.												
CE	OTIFICATE US DED											
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	Norman OK 75070					17/2						