



9.21.2011

Dammon Engineering
1095 Florida Ave
Slidell, La 70458

Bid Package For:

LAHOBA, LLC
Dba "Papa Johns Pizza"

We are pleased to provide you with this proposal. This proposal has been generated per the plans and specifications received provided with your "Invitation to Bid Letter" dated 9.6.2011.

As per addendum number 2, please find the following price breakdown;

"Exterior only" building improvements/repairs \$2,500.00 allowance.

"Exterior only" service upgrade to suite per the bid documents: \$17,000.00

Total cost of construction in accordance with the bid documents is \$178,348.00

Addendums 1 & 2 has been acknowledged.

Sincerely,

Judson Sanders

AIA[®] Document A305[™] – 1986

Contractor's Qualification Statement

The Undersigned certifies under oath that the information provided herein is true and sufficiently complete so as not to be misleading.

SUBMITTED TO:

ADDRESS:

SUBMITTED BY: Sun Electrical + Instrumentation, LLC
NAME: Judson Sanders

ADDRESS: 176 Hickory Ave
Harahan, LA 70123
PRINCIPAL OFFICE:

- Corporation
- Partnership
- Individual
- Joint Venture
- Other

NAME OF PROJECT (if applicable):

TYPE OF WORK (file separate form for each Classification of Work):

- General Construction
- HVAC
- Electrical
- Plumbing
- Other (please specify)

§ 1. ORGANIZATION

§ 1.1 How many years has your organization been in business as a Contractor? 32 years

§ 1.2 How many years has your organization been in business under its present business name? 10 years

§ 1.2.1 Under what other or former names has your organization operated?

Settoon's Electric

ADDITIONS AND DELETIONS:

The author of this document has added information needed for its completion. The author may also have revised the text of the original AIA standard form. An *Additions and Deletions Report* that notes added information as well as revisions to the standard form text is available from the author and should be reviewed. A vertical line in the left margin of this document indicates where the author has added necessary information and where the author has added to or deleted from the original AIA text.

This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification.

This form is approved and recommended by the American Institute of Architects (AIA) and The Associated General Contractors of America (AGC) for use in evaluating the qualifications of contractors. No endorsement of the submitting party or verification of the information is made by AIA or AGC.

§ 1.3 If your organization is a corporation, answer the following:

§ 1.3.1 Date of incorporation:

§ 1.3.2 State of incorporation: Louisiana

§ 1.3.3 President's name: Todd Berthelot

§ 1.3.4 Vice-president's name(s): Toby Berthelot

§ 1.3.5 Secretary's name:

§ 1.3.6 Treasurer's name: > Suzanne Berthelot

§ 1.4 If your organization is a partnership, answer the following:

§ 1.4.1 Date of organization:

§ 1.4.2 Type of partnership (if applicable):

§ 1.4.3 Name(s) of general partner(s)

§ 1.5 If your organization is individually owned, answer the following:

§ 1.5.1 Date of organization:

§ 1.5.2 Name of owner:

§ 1.6 If the form of your organization is other than those listed above, describe it and name the principals:

§ 2. LICENSING

§ 2.1 List jurisdictions and trade categories in which your organization is legally qualified to do business, and indicate registration or license numbers, if applicable.

Electrical Construction + Building Construction
LA License # 22027

§ 2.2 List jurisdictions in which your organization's partnership or trade name is used.

§ 3. EXPERIENCE

§ 3.1 List the categories of work that your organization normally performs with its own forces.

Electrical, Instrumentation, Datacom, Fire Alarm,
Low Voltage, Special Systems, & Technologies

§ 3.2 Claims and Suits. (If the answer to any of the questions below is yes, please attach details.)

§ 3.2.1 Has your organization ever failed to complete any work awarded to it?

No

§ 3.2.2 Are there any judgments, claims, arbitration proceedings or suits pending or outstanding against your organization or its officers?

No

§ 3.2.3 Has your organization filed any law suits or requested arbitration with regard to construction contracts within the last five years?

No

§ 3.3 Within the last five years, has any officer or principal of your organization ever been an officer or principal of another organization when it failed to complete a construction contract? (If the answer is yes, please attach details.)

No

§ 3.4 On a separate sheet, list major construction projects your organization has in progress, giving the name of project, owner, architect, contract amount, percent complete and scheduled completion date.

See Attachment A

§ 3.4.1 State total worth of work in progress and under contract:

\$8-10 million

§ 3.5 On a separate sheet, list the major projects your organization has completed in the past five years, giving the name of project, owner, architect, contract amount, date of completion and percentage of the cost of the work performed with your own forces.

See Attachment B

§ 3.5.1 State average annual amount of construction work performed during the past five years:

\$10-15 million

§ 3.6 On a separate sheet, list the construction experience and present commitments of the key individuals of your organization.

See Attachment C

§ 4. REFERENCES

§ 4.1 Trade References:

See Attachment D

§ 4.2 Bank References:

See Attachment D

§ 4.3 Surety:

§ 4.3.1 Name of bonding company:

Surety Bond Brokers of LA, Inc.

§ 4.3.2 Name and address of agent:

Cathy Turner - Agent
6715 Perkins Road Baton Rouge, LA 70808

§ 5. FINANCING

§ 5.1 Financial Statement.

§ 5.1.1 Attach a financial statement, preferably audited, including your organization's latest balance sheet and income statement showing the following items:

Current Assets (e.g., cash, joint venture accounts, accounts receivable, notes receivable, accrued income, deposits, materials inventory and prepaid expenses);

Net Fixed Assets;

See Attachment
E

Other Assets;

Current Liabilities (e.g., accounts payable, notes payable, accrued expenses, provision for income taxes, advances, accrued salaries and accrued payroll taxes);

Other Liabilities (e.g., capital, capital stock, authorized and outstanding shares par values, earned surplus and retained earnings).

§ 5.1.2 Name and address of firm preparing attached financial statement, and date thereof:

§ 5.1.3 Is the attached financial statement for the identical organization named on page one?

Yes

§ 5.1.4 If not, explain the relationship and financial responsibility of the organization whose financial statement is provided (e.g., parent-subsiary).

§ 5.2 Will the organization whose financial statement is attached act as guarantor of the contract for construction?

Yes

§ 6. SIGNATURE

§ 6.1 Dated at this day of

Name of Organization:

By:

Title:

| (Paragraphs deleted)

NAME OF PROJECT	OWNER	ARCHITECT	CONTRACT AMOUNT	PERCENT COMPLETE	SCHEDULED COMPLETION DATE
FANNIE C. WILLIAMS SCHOOL	LOUISIANA DEPARTMENT OF EDUCATION	YEATES & YEATES ARCHITECTS	\$2,398,000.00	20.00%	MAY, 2012
OLD US MINT RENOVATIONS	STATE OF LOUISIANA FACILITY PLANNING & CONTROL	ESKEW + DUMIEZ + RIPPLE	\$841,952.00	98.00%	OCTOBER, 2011
BATON ROUGE MAGNET H.S.	EAST BATON ROUGE PARISH SCHOOL BOARD	CHENEVERT ARCHITECTS AND REMSON/ HALEY/ HERPIN ARCHITECTS	\$4,964,875.00	19.00%	AUGUST, 2012
JEFFERSON PARISH PERFORMING ARTS	PARISH OF JEFFERSON, PURCHASING DEPARTMENT	WISZNIA ASSOCIATES	\$3,270,000.00	71.00%	MARCH, 2012
SEABROOK GATE COMPLEX	DEPARTMENT OF THE ARMY, HURRICAN PROTECTION OFFICE, CORPS OF ENGINEERS	BIENGINEERING ARCADIS	\$823,520.00	3.00%	DECEMBER, 2012

NAME OF PROJECT	OWNER	ARCHITECT	CONTRACT AMOUNT	DATE OF COMPLETION	PERCENT OF COST OF THE WORK PERFORMED WITH YOUR OWN FORCES	
BP TRAINING CENTER	BRITISH PETROLEUM	GENSLER ARCHITECT	\$2,300,000.00	NOVEMBER, 2008		90.00%
WOODLAWN ELEMENTARY	EAST BATON ROUGE SCHOOL BOARD	BANI CARVILLE & BROWN ARCHITECT	\$1,500,000.00	OCTOBER, 2009		70.00%
NEW ORLEANS LAKEFRONT AIRPORT	ORLEANS LEVEE DISTRICT	RICHARD C. LAMBERT & ASSOCIATES	\$500,000.00	DECEMBER, 2007		100.00%
W. LAVILLE HONORS COLLEGE	STATE OF LOUISIANA	HANBURT EVANS WRIGHT VLATTA & BANI CARVILLE & BROWN ARCHITECT	\$2,600,000.00	DECEMBER, 2010		80.00%

NAME TITLES CONSTRUCTION EXPERIENCE

TODD BERTHELOT PRESIDENT 10 YEARS

TOBY BERTHELOT VICE PRESIDENT 15 YEARS

JUDSON SANDERS DIRECTOR OF OPERATIONS- NEW ORLEANS 6 YEARS



BRUSLY, LA (225) 749-2419

PHYSICAL ADDRESS: 6105 HWY. 1 SOUTH
BRUSLY, LA. 70719

PRESIDENT: TODD BERTHELOT
VICE PRESIDENT: TOBY BERTHELOT
SECRETARY-TREAS: SUZANNE BERTHELOT
DIRECTOR OF OPERATIONS: JUDSON SANDERS

PURCHASING AGENT: BRENT MORRISON & DON TURNER

NATURE OF BUSINESS: ELECTRICAL CONTRACTING

HOW LONG IN BUSINESS: SINCE 1978

FEDERAL ID#: 72-1094335 **D & B #:** 19-566-6565

TAX EXEMPT: NO

CREDIT REFERENCES

1. **BANK:** PLAQUEMINE BANK & TRUST
PLAQUEMINE, LA. PH: (225) 687-6388
CONTACT: DALE PLAUCHE

2. **VENDORS:** REXEL/SOUTHERN
8536 S. CHOCTAW DRIVE
BATON ROUGE, LA. 70821-2821
PH: (225) 926-3800 FAX: (225) 926-4130

REILY/WESCO
P.O. BOX 15198
BATON ROUGE, LA. 70895
PH: (225) 755-0066 FAX: (225) 755-0150

TECHE ELECTRIC SUPPLY
P.O. BOX 61725
LAFAYETTE, LA. 70596
PH: (225) 292-0082 FAX: (225) 292-0084


ATTACHMENT E

SUN ELECTRICAL & INSTRUMENTATION, L.L.C.

REVIEWED FINANCIAL STATEMENTS

DECEMBER 31, 2010 AND 2009

ADDIS. LOUISIANA

 **Hannis T. Bourgeois, LLP**
Certified Public Accountants

SUN ELECTRICAL AND INSTRUMENTATION, L.L.C.

BALANCE SHEETS

ATTACHMENT E

AS OF DECEMBER 31, 2010 AND 2009

ASSETS

	2010	2009
Current Assets:		
Cash	\$ 780,299	\$ 587
Receivables:		
Billings	2,169,421	3,057,672
Retainages	225,636	615,635
Miscellaneous	490	384
	2,395,547	3,673,691
Costs and Estimated Earnings in Excess of Billings on Incomplete Contracts	164,773	210,614
Due From Members	168,000	-
Due From Related Party	54,000	54,000
Inventory	-	53,518
Total Current Assets	3,562,619	3,992,410
Property and Equipment:		
Office Furniture and Equipment	59,031	59,031
Machinery and Equipment	752,269	618,943
Vehicles	355,493	393,290
Leasehold Improvements	2,839	2,839
	1,169,632	1,074,103
Less: Accumulated Depreciation	(616,163)	(611,411)
	553,469	462,692
Due From Related Party	568,825	622,825
	\$ 4,684,913	\$ 5,077,927

See independent accountant's review report and the accompanying notes.

SUN ELECTRICAL AND INSTRUMENTATION, L.L.C.

STATEMENTS OF INCOME (LOSS) AND MEMBERS'/STOCKHOLDERS' EQUITY

FOR THE YEARS ENDED DECEMBER 31, 2010 AND 2009

	<u>2010</u>	<u>2009</u>
Income:		
Contract Billings	\$ 11,610,018	\$ 13,656,982
Contract Costs	<u>9,450,180</u>	<u>10,640,403</u>
Gross Profit	2,159,838	3,016,579
General and Administrative Expenses	<u>2,569,424</u>	<u>2,219,078</u>
	(409,586)	797,501
Other Income (Expenses):		
Bad Debt Expense	(17,542)	(81,355)
Gain on Sale of Assets	23,226	72,713
Interest Expense	(7,729)	(4,710)
Claim Settlement	-	(117,222)
Other Income	<u>17,192</u>	<u>5,012</u>
	<u>15,147</u>	<u>(125,562)</u>
Net Income (Loss)	(394,439)	671,939
Stockholders' Equity - Beginning of Year	3,247,025	3,325,086
Distributions	<u>(352,000)</u>	<u>(750,000)</u>
Members' Equity - End of Year	<u>\$ 2,500,586</u>	<u>\$ 3,247,025</u>

See independent accountant's review report and the accompanying notes.

ATTACHMENT E

LIABILITIES AND MEMBERS'/STOCKHOLDERS' EQUITY

	<u>2010</u>	<u>2009</u>
Current Liabilities:		
Outstanding Checks in Excess of Bank Balance	\$ -	\$ 11,082
Current Portion of Long-Term Debt	74,495	32,687
Accounts Payable	940,496	811,397
Retainages Payable	46,711	89,316
Billings in Excess of Costs and Estimated Earnings on Incomplete Contracts	826,112	569,856
Accrued Liabilities:		
Payroll and Payroll Taxes	70,352	62,413
Insurance	30,000	66,729
Other	9,702	62,500
	<u>110,054</u>	<u>191,642</u>
Total Current Liabilities	1,997,868	1,705,980
Long -Term Debt	186,459	124,922
Members'/Stockholders' Equity	<u>2,500,586</u>	<u>3,247,025</u>
	<u>\$ 4,684,913</u>	<u>\$ 5,077,927</u>



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/2/2011

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 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).


INSURER Wright & Percy Insurance Division of BancorpSouth Insurance Services Box 3809 Monroe, LA 70821-3809	(225) 336-3200	CONTACT NAME: Angela Oubre, CIC, CISR	PHONE (A/C, No, Ext): 225.336.3262	FAX (A/C, No): 225.490.9262
		E-MAIL ADDRESS: angela.oubre@bxsl.com	PRODUCER CUSTOMER ID #: SUNELEC-01	INSURER(S) AFFORDING COVERAGE
INSURED Sun Electrical & Instrumentation, Inc PO Box 149 Madisonville, LA 70710	INSURER A: Travelers Indemnity Company of Connecticut			
	INSURER B: Travelers Indemnity Company			
	INSURER C: Louisiana Work Comp Corporation			22350
	INSURER D: AGCS Marine Insurance Company			
	INSURER E:			
	INSURER F:			

COVERAGE CERTIFICATE NUMBER: _____ **REVISION NUMBER:** _____

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

TYPE OF INSURANCE	ADDL. SUBR. INSR. WVD	POLICY NUMBER	POLICY EFF. (MM/DD/YYYY)	POLICY EXP. (MM/DD/YYYY)	LIMITS
GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		8507L222CO	1/1/2011	1/1/2012	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC					
AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		DT810507L222	1/1/2011	1/1/2012	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ \$
<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE		CUP8507L.222	1/1/2011	1/1/2012	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000 \$ \$
DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 10,000					
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In Nk) <input type="checkbox"/> Y/N <input type="checkbox"/> N/A If yes, describe under DESCRIPTION OF OPERATIONS below		113659	1/1/2011	1/1/2012	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
Equipment Floater		MZI93027348	1/1/2011	1/1/2012	Lease/Rented Equipment \$300,000

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

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

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SURETY BOND BROKERS

Building

Funds

That Last



September 20, 2011

Re: Sun Electrical and Instrumentation, Inc.

To whom it may concern:

It is our understanding that the above noted client is being considered as a candidate on future projects. In this regard, our valued client, Sun Electrical and Instrumentation, Inc. has asked that we share with you our experience as their surety agent. We have had the privilege of providing bonds for the past twenty plus years. They are also a highly regarded and valued client of Merchants Bonding Company (Mutual) which is an A+ Best Rated Company and listed on the U.S. Federal Treasury List.

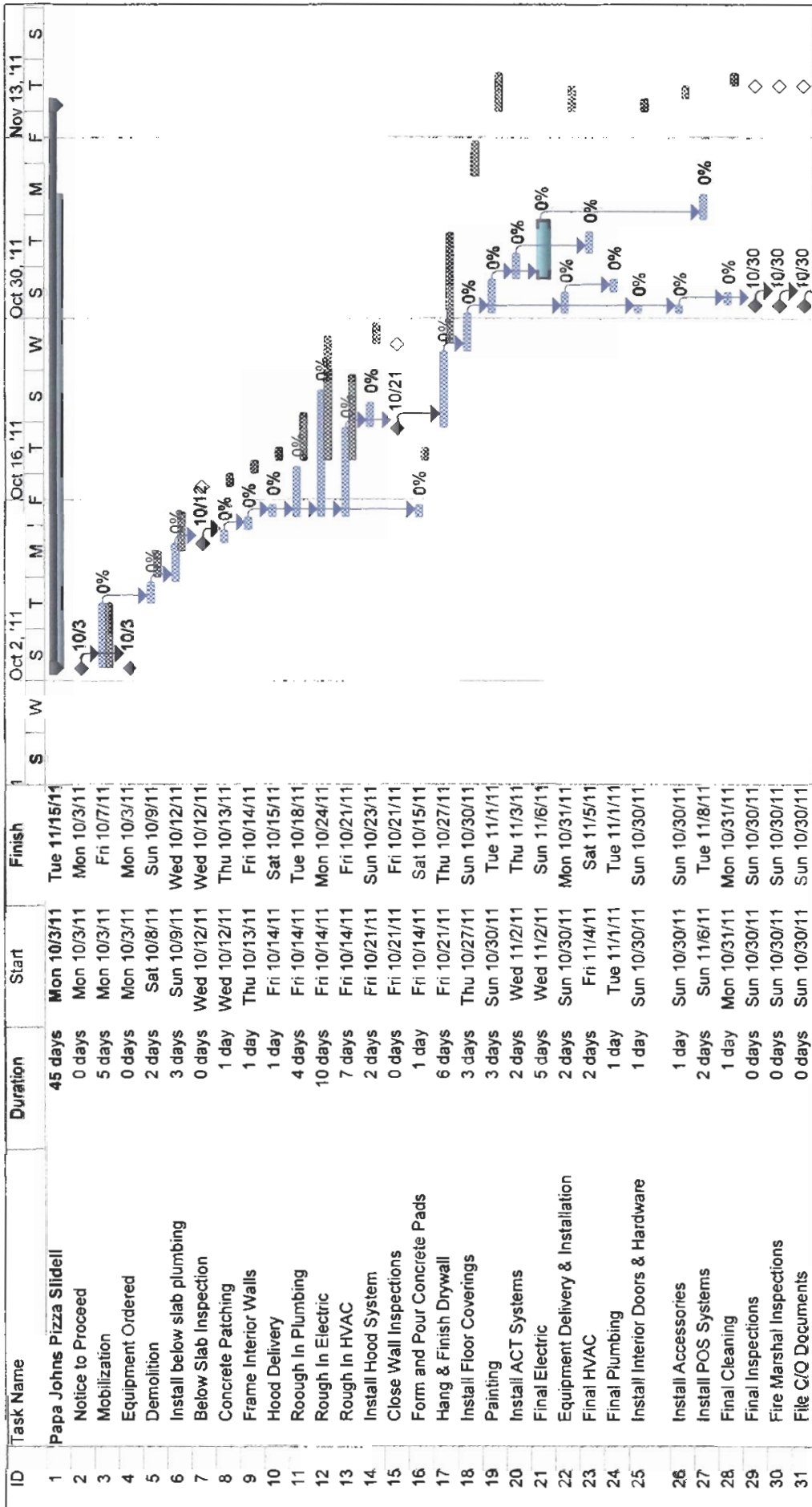
In our opinion, the company is capably staffed, properly financed and possesses successful management. We have issued bonds in excess of \$5,000,000.

Naturally, this letter is not a commitment to provide any bonds until the final contract, bond forms, underwriting conditions, and warranty period has been reviewed and accepted by the principal and the surety. However, this letter does act as an indicator for possible support on future bonds.

We would welcome the opportunity to answer any questions you may have. Feel free to contact me if you need any additional information.

Sincerely,

Cathy C. Turner



Task Name	Start	Finish	Duration	Task Type
Manual Task				Manual Task
Duration-only				Duration-only
Manual Summary Rollup				Manual Summary Rollup
Manual Summary				Manual Summary
Start-only				Start-only
Finish-only				Finish-only
Deadline				Deadline
Milestone				Milestone
Summary Progress				Summary Progress
Summary				Summary
Project Summary				Project Summary
External Tasks				External Tasks
External Milestone				External Milestone
Inactive Task				Inactive Task
Inactive Milestone				Inactive Milestone
Inactive Summary				Inactive Summary

Project: Papa Johns Project Schedule
Date: Tue 9/20/11

ID	Task Name	Duration	Start	Finish
32	Substantial Completion	0 days	Sun 10/30/11	Sun 10/30/11
33	Punch Out	3 days	Mon 10/31/11	Wed 11/2/11
34	Close Out Documents	1 day	Thu 11/3/11	Thu 11/3/11



Project: Papa Johns Project Schedule
Date: Tue 9/20/11

Manual Task	◆	Milestone	◆
Duration-only	▬	Summary Progress	▬
Manual Summary Rollup	▬	Summary	▬
Manual Summary	▬	Project Summary	▬
Start-only	▬	External Tasks	▬
Finish-only	▬	External Milestone	▬
Deadline	▬	Inactive Task	▬
		Inactive Milestone	▬
		Inactive Summary	▬
		Critical Split	◆
		Critical Progress	▬
		Task	▬
		Split	▬
		Task Progress	▬
		Baseline	▬
		Baseline Split	▬
		Baseline Milestone	◆



ELECTRICAL • INSTRUMENTATION • TECHNOLOGIES

Project: Papa John's Pizza Tenant Buildout, Slidell, LA

Qualified Subcontractors:

Mechanical: All Air

Electrical: Sun Electrical & Instrumentation, LLC

Plumbing: BC Plumbing

Floor Coverings: Modern Flooring

Painting: AHL WALL Painting

Roofing: **ROOF TECH**

BATON ROUGE

P.O. BOX 149
ADDIS, LA 70710
PHONE 225.749.2418 •

6105 LA J SOUTH
BRUSLY, LA 70719
FAX 225.749.3964

WWW.SUNEANDI.COM

NEW ORLEANS

176 HICKORY AVE
HARRAHAN, LA 70123
PHONE 504.575.3592 •

FAX 504.575.3594

Request for Taxpayer Identification Number and Certification

Give Form to the
 requester. Do not
 send to the IRS.

Print or type
 See Specific Instructions on page 2.

Name (as shown on your income tax return) Sun Electrical & Instrumentation LLC	
Business name/disregarded entity name, if different from above	
Check appropriate box for federal tax classification (required): <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) > C <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) >	
Address (number, street, and apt. or suite no.) 6105 Highway 1 South	Requester's name and address (optional)
City, state, and ZIP code Brusly IA 70719	
List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I Instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number								

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number									
7	2	-	1	0	9	4	3	3	5

Part II Certification

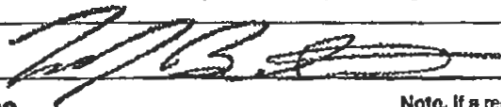
Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here

Signature of U.S. person >



Date >

8/31/11

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.