

February 25, 2024

To Whom It May Concern:

Sunshine State Officials Association, Inc. (SSOA) is submitting a proposal to supply the City of South Daytona Recreation Department with qualified officials and score keepers for all internal sports programming for the time period of March 16, 2024 through December 31, 2026. SSOA is committed to performing the work during this time period and to meet the requirements as set forth by the City of South Daytona.

SSOA believes that it is the best company to provide these services based on the fact that we are currently providing quality services to several other local city recreation programs, as well as servicing the City of South Daytona previously for 10+ years. SSOA has access to more than 150 local officials and is involved in ongoing evaluation, training and certification of these officials.

This is a firm and irrevocable offer for the above specified time period.

SSOA is a local firm located at 2944 Windle Lane in South Daytona, Florida.

Shawn Wolgemuth is the President of SSOA and has been involved in local recreational sports for more than 45 years at all levels as a player, coach and official. His officiating experience ranges from recreational level to the professional level. David Wolgemuth is the Vice President of SSOA and has been involved with local recreational sports for more than 55 years as a player, coach and official. His officiating experience ranges from recreational level to the collegiate level.

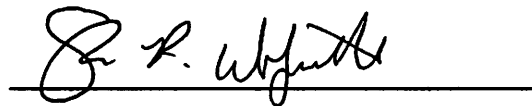
Independence

Sunshine State Officiates Association, Inc. has no interest and shall not acquire any interest, direct or indirect, financial or otherwise, which would conflict in any manner with the performance of the services proposed. No contractor will be employed that has such an interest. To the best of our knowledge, there is no officer or employee of the City of South Daytona that has a financial interest in this agreement. It is also agreed that all employees or

subcontractors performing services under this agreement are considered at all times to be independent contractors and not agents of the City of South Daytona.

Conflict of Interest

Sunshine State Officiates Association, Inc. supplies officials to several local recreation departments for multiple sports. The officials are certified by various organizations including but not limited, to AAU, USSSA, NSA, ISA ASA, FHSAA, NFHS, NAIA and NCAA. SSOA performs ongoing evaluations, training, clinics and certifications of all officials.

A handwritten signature in black ink, appearing to read "Shawn R. Wolgemuth", is written over a solid horizontal line.

Shawn R. Wolgemuth, President

Sunshine State Officials Association, Inc.

A handwritten signature in black ink, appearing to read "David R. Wolgemuth", is written over a solid horizontal line.

David R. Wolgemuth, Vice President

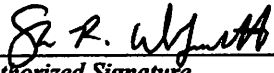
Sunshine State Officials Association, Inc.

SECTION 9: BID FORMS

BID FORM 9A: BID SUBMITTAL CHECKLIST

- ☐ Form 9B: Acknowledgement and Pricing Proposal
- ☐ Form 9C: Drug Free/Tie Preference Statement
- ☐ Form 9D: Public Entity Crimes Statement
- ☐ Form 9E: Anti-Collusion Statement
- ☐ Form 9F: Statement of Vendor Qualifications
- ☐ Form 9G: Professional References for Previous Experience
- ☐ Form 9H: Listing of Subcontractors
- ☐ Standard Agreement for Services
- ☐ Schedule of Unit Pricing: Officials and Scorekeepers/Announcers
- ☐ Copy of License(s)
- ☐ Insurance Certificate
- ☐ Submission of one (1) original marked "ORIGINAL" and one (1) digital (flash drive) copy.

BY: Sunshine State Officials Association, Inc.
Name of Business

 Shawn R. Wolgemuth President
Authorized Signature *Printed Name and Title*

2/26/24
Date

THIS DOCUMENT MUST BE COMPLETED AND RETURNED WITH YOUR BID.

BID FORM 9B: Bid Form
Acknowledgement and Pricing Proposal

PROJECT IDENTIFICATION: Officials and Scorekeepers/Announcers

BID IDENTIFICATION AND NUMBER: BID NO. 24-B-002

THIS BID IS SUBMITTED TO:

**CITY OF SOUTH DAYTONA
OFFICE OF THE CITY MANAGER
1672 S. RIDGEWOOD AVENUE
SOUTH DAYTONA, FLORIDA 32119**

Name of Bidder: Sunshine State Officials Association, Inc.

Mailing Address: 2944 Windle Lane

Street Address: _____

City/State/Zip: South Daytona FL 32119

Phone Number: (386) 566-9171 **FAX Number:** ()

I have carefully examined the Invitation to Bid (ITB), Instructions to Vendors, General and/or Special Conditions, Specifications, and any other documents accompanying or made a part of this invitation.

I hereby propose to furnish the goods or services specified in the Invitation to Bid at the prices or rates as finally negotiated. I agree that my bid will remain firm for a period of up to ninety (90) days in order to allow the City of South Daytona adequate time to evaluate the proposed bid. Furthermore, I agree to abide by all conditions of the Invitation to Bid.

I certify that all information contained in this Bid is truthful to the best of my knowledge and belief. I further certify that I am a duly authorized to submit this Bid on behalf of the Vendor / Contractor as its act and deed and that the Vendor / Contractor is ready, willing and able to perform if awarded the contract.

I propose and agree, if this Bid is accepted, to enter into an Agreement with the City in the form included in the Contract Documents to furnish all necessary materials, equipment, machinery, tools, apparatus, transportation and labor and to complete all Work as specified or indicated in the Contract Documents for the Contract Price and within the Contract Time indicated in this Bid and in accordance with the Contract Documents.

I will accept as full compensation for completion of the project in full compliance with the Contract Documents, the lump sum price for the work items submitted herein with this Bid.

I further certify that this Bid is made without prior understanding, Contract, connection, discussion, or collusion with any person, firm or corporation submitting a Bid for the same product or service; no officer, employee or agent of the City of South Daytona City Council or of any other Vendor interested in said ITB; and that the undersigned executed this Vendor's Acknowledgement with full knowledge and understanding of the matters therein contained and was duly authorized to do so.

I further certify that having read and examined the specifications and documents for the designated services and understanding the general conditions for contract under which services will be performed, does hereby propose to furnish all labor, equipment, and material to provide the services set forth in the ITB.

I hereby declare that the following listing states any clarifications, any and all variations from and exceptions to the requirements of the specifications and documents. The undersigned further declares that the "work" will be performed in strict accordance with such requirements and understands that any exceptions to the requirements of the specifications and documents may render the Bid non-responsive.

ADDENDUM ACKNOWLEDGEMENT

I have carefully examined the Invitation to Bid (ITB), Instructions to Vendors, General and/or Special Conditions, Specifications, and any other documents accompanying or made a part of this Invitation to Bid.

I acknowledge receipt and incorporation of the following addenda, and the cost, if any, of such revisions has been included in the price of the bid proposal.

Addendum Number: 1 Date: 2/7/2024 Addendum Number: _____ Date: _____
Addendum Number: _____ Date: _____ Addendum Number: _____ Date: _____

Please note that the City may award contracts to multiple contractors.

BID

The undersigned offers to furnish all materials, equipment and labor for construction of the "BID NO. 24-B-002, Officials and Scorekeepers/Announcers," for the City of South Daytona, Florida, complete in every respect in strict accordance with the drawings, specifications, exhibits, figures and any future changes therein.

The bid is attached "Schedule of Unit Pricing: Officials and Scorekeepers/Announcers."

IN WITNESS WHEREOF, Bidder has hereunto executed this form this 22nd day of February, 2024.

Sunshine State Officials Association, Inc.

(Name of Bidding Firm)

[Signature]
(Signature of person signing form)

Shawn R. Wolgemuth President
(Printed name and Title of person signing form)

STATE OF Florida
COUNTY OF Volusia

This document was sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or _____ online notarization, this 22nd day of February, 2024.

he/she is personally known to me or has presented _____ as identification.



[Signature]
Notary Public
My Commission Expires: 7/7/25

THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR BID.

I hereby declare that the following listing states my qualifications and all variants in form and exceptions to the requirements of the specifications and documents. The undersigned further declares that the "work" will be performed in strict accordance with such requirements and understands that any exceptions to the requirements of the specifications and documents may render the bid non-responsive.

ADDITIONAL INFORMATION

I have carefully examined the invitation to bid (ITB), instructions to bidders (ITB), conditions, specifications and any other documents accompanying or relating to this invitation to bid. I acknowledge receipt and incorporation of the following schedule and the cost of such revisions has been included in the price of the bid proposal.

Advertisement Number: _____ Date: _____
Advertisement Number: _____ Date: _____

I have noted that the City may award contracts to multiple contractors.

1011

The undersigned offers to furnish all materials, equipment and labor for construction of the "BID NO. 14-0-002" Officials and Scorekeepers (Announcement) for the City of South Portland, Florida, complete in every respect in strict accordance with the drawings, specifications, exhibits, figures and any future changes thereto.

The bid is attached "Schedule of Unit Pricing: Officials and Scorekeepers (Announcement)".

IN WITNESS WHEREOF, I have hereunto executed this bid on this _____ day of _____, 2014.

(Name of Bidding Firm)

(Printed name and title of person signing form)

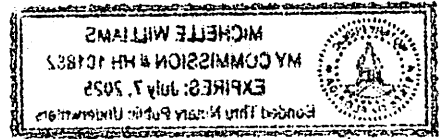
(Printed name and title of person signing form)

STATE OF _____
COUNTY OF _____

This document was signed to (or affirmed) and submitted before me by means of _____ on this _____ day of _____, 2014.

I hereby certify personally known to me and that presented as identification _____

Notary Public
My Commission Expires _____



THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR BID.

**BID FORM 9C:
Drug-Free Preference Statement**

IDENTICAL TIE BIDS - Preference shall be given to businesses with drug-free workplace programs. Whenever two or more bids, proposals, statements, or replies that are equal with respect to price, quality, and service are received by the city for the procurement of commodities or contractual services, a bid received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process. Established procedures for processing tie bids will be followed if none of the tied vendors have a drug-free workplace program.

In order to have a drug-free workplace program, a business shall:

- (1) Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
- (2) Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
- (3) Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
- (4) In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
- (5) Impose a sanction on or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
- (6) Make a good faith effort to continue to maintain a drug-free workplace through implementation of Section 287.087, Florida Statutes.

As an authorized representative of the firm, I certify that this firm complies fully with the above requirements.

Sunshine State Officials Association, Inc.

(Name of Bidding Firm)

Shawn R. Wolgemuth
(Signature of person signing form)

Shawn R. Wolgemuth President
(Printed name and Title of person signing form)

STATE OF Florida
COUNTY OF Volusia

This document was sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization, this 22nd day of February, 2024 he/she is personally known to me or has presented _____ as identification.



Michelle Williams
Notary Public
My Commission Expires: 7/7/25

THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR BID.

BID FORM 9D:
Public Entity Crimes Statement

(To be signed in the presence of notary public or other officer authorized to administer oaths.)

Before me, the undersigned Authority, personally appeared affiant who, being by me first duly sworn, made the following statement:

This sworn statement is submitted with Bid, Proposal or Contract No. 24-B-002 for
City of South Daytona. This sworn statement is submitted by
Sunshine State Officials Association, Inc. whose business address
is 2944 Windle Lane South Daytona FL 32119 and (if applicable)
its Federal Employer Identification Number (FEIN) is 27-2652139. (If the

entity has no FEIN, include the Social Security Number of the individual signing this sworn statement:

590-34-1067.)

My name is Shawn R. Wolgenuth and my relationship to the entity named above is
President

(relationship such as sole proprietor, partner, president, vice president)

- (1) I understand that a public entity crime as defined in Section 287.133 of the Florida Statutes includes a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity in Florida or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any proposal or contract for goods or services to be provided to any public entity or such an agency or political subdivision and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy or material misrepresentation.
- (2) I understand that "convicted" or "conviction" is defined by the Florida Statutes to mean a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, non-jury trial, or entry of a plea of guilt or nolo contendere.
- (3) I understand that "affiliate" is defined by the Florida Statutes to mean (1) a predecessor or successor of a person or a corporation convicted of a public entity crime, or (2) an entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime, or (3) those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate, or (4) a person or corporation who knowingly entered into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months.
- (4) I understand that a "person" as defined in Paragraph 287.133(i)(e), Florida Statutes, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.
- (5) Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. (Please indicate which statement applies).

X

Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members or agents who are active in management of the entity, nor any affiliate of the entity have been charged with and convicted of a public entity crime subsequent to July 1, 1989.

_____ The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989, AND (Please indicate which additional statement applies.)

_____ There has been a proceeding concerning the conviction before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer did not place the person or affiliate on the convicted vendor list. (Please attach a copy of the final order.)

_____ The person or affiliate was placed on the convicted vendor list. There has been a subsequent proceeding before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer determined that it was in the public interest to remove the person or affiliate from the convicted vendor list. (Please attach a copy of the final order).

As an authorized representative of the firm, I certify that this firm complies fully with the above requirements.

Sunshine State Officials Association, Inc.

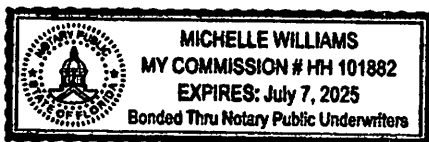
(Name of Bidding Firm)

[Signature]
(Signature of person signing form)

Shawn R. Wolgemuth President
(Printed name and Title of person signing form)

STATE OF Florida
COUNTY OF Volusia

This document was sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this 22nd day of February, 2024, he/she is personally known to me or has presented _____ as identification.



[Signature]
Notary Public
My Commission Expires: 7/7/25

THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR BID.

Whether the entity submitting this sworn statement has any officers, directors, executives, partners, shareholders, employees, members or agents who are active in management of the entity have been charged with and convicted of a crime under criminal subject to July 1, 2002.

The entity submitting this sworn statement, on one or more of the officers, directors, executives, partners, shareholders, employees, members or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a crime under criminal subject to July 1, 2002. AND (Please indicate which additional statement applies)

There has been a proceeding concerning this conviction before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order or decision rendered by the hearing officer has not placed the person or affiliate on the convicted vendor list. (Please attach a copy of the final order.)

The person or affiliate was named on the convicted vendor list. There has been a subsequent proceeding before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order or decision rendered by the hearing officer determined that it was in the public interest to remove the person or affiliate from the convicted vendor list. (Please attach a copy of the final order.)

As an authorized representative of the firm, I swear, for this firm complies fully with the above requirements.

State of Florida
 (Name of State)

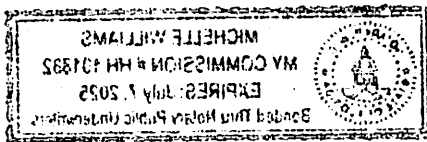
Michelle Williams
 (Printed name of person signing form)

Michelle Williams
 (Signature of person signing form)

STATE OF FLORIDA
 COUNTY OF _____

This document was sworn to (or affirmed) and subscribed before me by means of _____ (signature) in presence of _____ (names of witnesses) on this _____ day of _____, 2002. I declare that I am a duly qualified and authorized person to administer oaths.

Michelle Williams
 My Commission Expires _____
 Notary Public



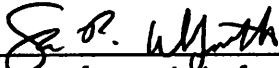
THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR BID.

**BID FORM 9E:
Anti-Collusion Statement**

By signing this form, the Proposer agrees that this Bid is made without any other understanding, agreement, or connection with any person, corporation, or firm submitting a bid for the same purpose and that the bid is in all respects fair and without collusion or fraud.

SIGN in ink in the space provided below. Unsigned Bids will be considered incomplete, and will be disqualified, and rejected.

IT IS AGREED BY THE UNDERSIGNED VENDOR THAT THE SIGNING AND DELIVERY OF THE BID REPRESENTS THE VENDORS ACCEPTANCE OF THE TERMS AND CONDITIONS OF THE FOREGOING SPECIFICATIONS, CONTRACT AND PROVISIONS, AND IF AWARDED, THIS CONTRACT WILL REPRESENT THE AGREEMENT BETWEEN THE VENDORS AND THE CITY OF SOUTH DAYTONA.


(Signature of person signing form)

Shawn R. Wolgemuth President
(Printed name and Title of person signing form)

Name of Bidder: Sunshine State Officials Association, Inc.

Address: 2944 Windle Lane

City/State/Zip: South Daytona FL 32119

Phone Number: (386) 566-9171 FAX Number: ()

FEIN Number: 27-2652139

NO Bid may be withdrawn for a period of ninety (90) days subsequent to the submittal of the Bids, without the consent of the City of South Daytona.

NO BID (REASON): _____

THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR BID.

BID FORM 9F:
Statement of Vendor Qualifications

The undersigned warrants that he or she is duly authorized to complete this document, and hereby affirms that the information contained in this Form is complete, true, and correct to the best of their knowledge and belief. If necessary, questions may be answered on separate paper and attached, with any additional information that may be pertinent.

- (1) Name of Vendor. Sunshine State Officials Association, Inc.
- (2) Permanent main office address. 2944 Windle Lane South Daytona FL 32119
- (3) Date organized. 2010
- (4) If a corporation, where incorporated. Florida
- (5) How many years have you been engaged in the contracting business under your present firm or trade name? 15 years
- (6) Contracts on hand: (Schedule these, showing amount of each contract and the appropriate anticipated dates of completion.) N/A
- (7) General character of work performed by your company.
 - Sports Officials/Scorekeepers
 - Awards
- (10) List the more important projects recently completed by your company, stating the approximate cost for each and the month and year completed. N/A
- (11) List your major equipment currently owned or leased. N/A
- (12) Experience in work similar to this type of project. 45+ years
- (13) Background and experience of the principal members of your organization, including the officers. 55+ years
- (14) The undersigned hereby authorizes and requests any person, firm, or corporation to furnish any information requested by the City in verification of the recitals comprising this Statement of Vendor Qualifications.

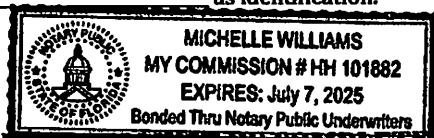
Sunshine State Officials Association, Inc.
(Name of Bidding Firm)

[Signature]
(Signature of person signing form)

Shawn R. Wolgemuth President
(Printed name and Title of person signing form)

STATE OF Florida
COUNTY OF Volusia

This document was sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this 22nd day of February, 2024, he/she is personally known to me or has presented as identification.



[Signature]
Notary Public
My Commission Expires: _____

THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR BID.

BID FORM 9G:
Professional References for Previous Experience

The Vendor proposes that he/she is qualified to perform the referenced work and has successfully done so on recent projects similar in nature and size. The City reserves the right to check references and confirm information provided herein.

Please provide three (3) current and correct references from clients for similar services. (Do not include the City of South Daytona)

Reference 1:

Company Name:	City of Ormond Beach
City, State:	Ormond Beach, FL
Contact Person:	Stefan Sibley
Telephone Number:	(386) 676-3246
Email Address:	stefan.sibley@ormondbeach.org
Description of Goods or Services provided:	Sports Officials / Awards
Contract Amount:	
Start/End Date of Contract:	2011 - Current

Reference 2:

Company Name:	City of Deland
City, State:	Deland, FL
Contact Person:	Nick Pugliese
Telephone Number:	(386) 626-7280
Email Address:	pugliesen@deland.org
Description of Goods or Services provided:	Sports Officials / Awards
Contract Amount:	
Start/End Date of Contract:	2013 - Current

Reference 3:

Company Name:	DME Academy
City, State:	Daytona Beach, FL
Contact Person:	Toby Taylor
Telephone Number:	(386) 402 - 2659
Email Address:	toby.taylor@dmesports.com
Description of Goods or Services provided:	Sports Officials / Awards
Contract Amount:	
Start/End Date of Contract:	2021 - Current

THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR BID.

BID FORM 9H: Listing of Subcontractors

The Vendor proposes that the following subcontractors are qualified to perform the referenced work and have successfully done so on recent projects similar in nature and size. All subcontractors whose work product accounts for 5% or more of the total contract value shall be listed. Upon approval of subcontractors listed, the successful Vendor shall not substitute subcontractors without approval from the City. Vendor shall attach additional sheets as necessary.

Subcontractor 1:

Name:	N/A		
City, State:			
Description of Work:			
Percent of Contract Price:		Previous Experience Together:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Subcontractor 2:

Name:	N/A		
City, State:			
Description of Work:			
Percent of Contract Price:		Previous Experience Together:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Subcontractor 3:

Name:	N/A		
City, State:			
Description of Work:			
Percent of Contract Price:		Previous Experience Together:	<input type="checkbox"/> Yes <input type="checkbox"/> No

THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR BID.

Once awarded, the applicant will enter an Agreement similar to the one below:

STANDARD AGREEMENT FOR SERVICES
--

THIS Standard Agreement for Services (hereinafter this "Agreement") is made and entered into this 25 day of February 2024, by and between the **CITY OF SOUTH DAYTONA**, a Florida municipality, whose principal address is 1672 S. Ridgewood Avenue, South Daytona, Florida 32119 (hereinafter the "CITY") and Sunshine State Officials Association corporation, whose principal address 2944 Windle Ln, S. Daytona FL 32119 (hereinafter "CONTRACTOR"). The CITY and CONTRACTOR are collectively referred to herein as the "PARTIES."

WITNESSETH

WHEREAS, the CITY is a political subdivision of the State of Florida, having a responsibility to provide certain services to benefit the citizens of the City of South Daytona; and

WHEREAS, the CITY has the full power and authority to enter into the transactions contemplated by this Agreement; and

WHEREAS, CONTRACTOR is in the business of providing the equipment, materials, labor and other such service as identified in Exhibit "A" in the City of South Daytona and elsewhere in the State of Florida; and

WHEREAS, CONTRACTOR is competent and has sufficient manpower, training, and technical expertise to perform the services contemplated by this Agreement in a timely and professional manner consistent with the standards of the industry in which CONTRACTOR operates; and

WHEREAS, Section 448.095, Fla. Stat., imposes certain obligations on public agencies with regard to the use of the E-Verify system by their contractors and subcontractors.

WHEREAS, CONTRACTOR was the successful bidder of a project competitively bid and identified as Invitation to Bid (Exhibit "A") for City of South Daytona which satisfies the CITY's Procurement Policy; and

WHEREAS, CONTRACTOR agrees to provide such goods and services as more particularly described in this Agreement, as well as in any bid or quotation documents issued in connection with this project.

NOW THEREFORE in consideration of the premises, and in consideration of the mutual conditions, covenants, and obligations hereafter expressed, the parties agree as follows:

**Schedule of Unit Pricing:
Officials and Scorekeepers/Announcers**

**SCHEDULE OF UNIT PRICING
OFFICIALS AND SCOREKEEPERS/ANNOUNCERS
Bid 24-B-002**

NAME OF BUSINESS:	Sunshine State Officials Association, Inc.
CONTACT PERSON:	Shawn Wolgemuth
EMAIL ADDRESS:	ssoashawn@aol.com
AUTHORIZED SIGNATURE:	<i>Shawn Wolgemuth</i>

Baseball - Official

Description	Number of Officials or Scorekeepers/Announcers	Price Per <u>Official</u> or Scorekeeper			Price Per Game		
		2024	2025	2026	2024	2025	2026
Pitching Machine (7-9) (1 hr Games)	1	\$70	\$72.50	\$75	\$70	\$72.50	\$75
Minors (10-11) (1 hr & 15 min Games)	2	\$70	\$72.50	\$75	\$140	\$145	\$150
Majors (12-13) (1 hr & 15 min Games)	2	\$70	\$72.50	\$75	\$140	\$145	\$150

Baseball – Scorekeeper/Announcers

Description	Number of Officials or Scorekeepers/Announcers	Price Per Official or <u>Scorekeeper</u> /Announcer			Price Per Game		
		2024	2025	2026	2024	2025	2026
Pitching Machine (7-9) (1 hr Games)	1	\$32	\$34.50	\$37	\$32	\$34.50	\$37
Minors (10-11) (1 hr & 15 min Games)	1	\$32	\$34.50	\$37	\$32	\$34.50	\$37
Majors (12-13) (1 hr & 15 min Games)	1	\$32	\$34.50	\$37	\$32	\$34.50	\$37

Flag Football- Official

Description	Number of Officials or Scorekeepers	Price Per <u>Official</u> or Scorekeeper			Price Per Game		
		2024	2025	2026	2024	2025	2026
Pee Wee (4-6) (4 - 8 min quarters)	1	\$43	\$45	\$47	\$43	\$45	\$47
Youth (7-9) (4 - 10 min quarters)	2	\$43	\$45	\$47	\$86	\$90	\$94
Juniors (10-13) (4 - 10 min quarters)	2	\$43	\$45	\$47	\$86	\$90	\$94

Flag Football - Scorekeeper

Description	Number of Officials or Scorekeepers	Price Per <u>Scorekeeper</u> Official or			Price Per Game		
		2024	2025	2026	2024	2025	2026
Youth (7-9) (4 - 10 min quarters)	1	\$20	\$22	\$24	\$20	\$22	\$24
Juniors (10-13) (4 - 10 min quarters)	1	\$20	\$22	\$24	\$20	\$22	\$24

Soccer- Official

Description	Number of Officials or Scorekeepers	Price Per <u>Official</u> or Scorekeeper			Price Per Game		
		2024	2025	2026	2024	2025	2026
Pee Wee (4-6) (4 - 8 min quarters)	1	\$43	\$45	\$47	\$43	\$45	\$47
Youth (7-9) (4 - 10 min quarters)	2	\$43	\$45	\$47	\$86	\$90	\$94
Juniors (10-13) (4 - 10 min quarters)	2	\$43	\$45	\$47	\$86	\$90	\$94

Soccer - Scorekeeper

Description	Number of Officials or Scorekeepers	Price Per <u>Scorekeeper</u> Official or			Price Per Game		
		2024	2025	2026	2024	2025	2026
Youth (7-9) (4 - 10 min quarters)	1	\$20	\$22	\$24	\$20	\$22	\$24
Juniors (10-13) (4 - 10 min quarters)	1	\$20	\$22	\$24	\$20	\$22	\$24

End of Solicitation Documents



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Detail by Entity Name

Florida Profit Corporation

SUNSHINE STATE OFFICIALS ASSOCIATION, INC.

Filing Information

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FE/EIN Number 27-2652139

Date Filed 05/28/2010

State FL

Status ACTIVE

Principal Address

2944 Windle Lane
South Daytona, FL 32119

Changed: 04/16/2018

Mailing Address

2944 Windle Lane
South Daytona, FL 32119

Changed: 04/16/2018

Registered Agent Name & Address

WOLGEMUTH, SHAWN
2944 Windle Lane
South Daytona, FL 32119

Address Changed: 04/16/2018

Officer/Director Detail

Name & Address

Title President

WOLGEMUTH, SHAWN
2944 Windle Lane
South Daytona, FL 32119

Annual Reports

Report Year	Filed Date
2022	01/25/2022

2023	03/01/2023
2024	02/08/2024

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/08/2024

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).

PRODUCER
SADLER & COMPANY, INC.
P.O. BOX 5866
COLUMBIA, SOUTH CAROLINA 29250-5866

CONTACT NAME: Sports Dept

PHONE (A/C, No. Ext): 800-822-7370 | FAX (A/C, No): 803-258-4017

E-MAIL ADDRESS: amateur@sadlersports.com

PRODUCER CUSTOMER ID#:

INSURED
Sunshine State Officials Association, Inc.
Sunshine State Officials Association, Inc.
2944 Windle Lane
South Daytona, FL 32119

Application ID: 410440

A Member of the Sports, Leisure & Entertainment RPG

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: NATIONWIDE INSURANCE COMPANY

23787

INSURER B:

INSURER C:

INSURER D:

COVERAGES**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, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSD LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> _____ <input type="checkbox"/> _____ GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	X		6B RPG0000007893500	02:17:28 AM ET 02/08/2024	12:01AM ET 02/08/2025	EACH OCCURRENCE \$1,000,000 DAMAGE TO PREMISES RENTED TO YOU (Fire Legal Liability) \$1,000,000 MEDICAL EXPENSES (other than participants) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE (other than Products-completed Operations) \$5,000,000 PRODUCTS-COMP/OP AGG \$1,000,000 LEGAL LIAB TO PARTICIPANTS \$1,000,000 PROFESSIONAL LIABILITY \$1,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS (not provided while in Hawaii) <input checked="" type="checkbox"/> NON- OWNED AUTOS (not provided while in Hawaii)			6B RPG0000007893500	02:17:28 AM ET 02/08/2024	12:01AM ET 02/08/2025	COMBINED SINGLE LIMIT (Ea Accident) \$1,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION						EACH OCCURRENCE AGGREGATE
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER / MEMBER <input type="checkbox"/> EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			N/A			<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT
A	MEDICAL PAYMENTS TO PARTICIPANTS			6B RPG0000007893500	02:17:28 AM ET 02/08/2024	12:01AM ET 02/08/2025	EXCESS MEDICAL \$25,000 AD&D NONE DEDUCTIBLE \$100

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

RE: COVERED SPORTS Umpires/ Referees Assoc. for Class B Sports 20 & Over,

The certificate holder is added as an additional insured, but only with respect to the liability arising out of the operations of the insured above.
 High Brain Injury Sports - For Deck/ Floor/ Field/ Street Hockey, Roller Hockey (quad), Cheerleading (age 19 & under); Lacrosse (age 19 & under); Tackle and contact football (age 19 & under); Soccer (age 19 & under); Water Hockey (age 19 & under); Wrestling (age 19 & under), and Umpire/ Referee Associations for the above High Risk Concussion Sports. Limited Coverage for "Brain Injury" endorsement applies- Brain Injury Limit: \$1,000,000 occurrence/ \$1,000,000 aggregate; Brain Injury Loss Adjustment Expense Limit: \$1,000,000 occurrence/ \$1,000,000 aggregate. "Brain Injury" means concussion, chronic traumatic encephalopathy, or any other injury to the brain and any symptoms, conditions, disorders and diseases, including death, resulting therefrom but only if such injury occurs as a result of specific events occurring during the policy period.

CERTIFICATE HOLDER**CANCELLATION**

RELATIONSHIP:
Property Owner/ Lessor

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

City of South Daytona
PO Box 214960
South Daytona, FL 32121

AUTHORIZED REPRESENTATIVE

Coverage is only extended to U.S. events and activities

** NOTICE TO TEXAS INSURED: The Insurer for the purchasing group may not be subject to all the insurance laws and regulations of the State of Texas.

ACORD 25 (2014/01)

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