

FORMAL QUOTE NO.: Q-120095

LEE COUNTY, FLORIDA  
PROPOSAL QUOTE FORM  
FOR  
CONTRACT PRINTING

DATE SUBMITTED: 3/26/12

VENDOR NAME: Cape Coral Minuteman Press, Inc.

TO: The Board of County Commissioners  
Lee County  
Fort Myers, Florida

Having carefully examined the "General Conditions", and the "Detailed Specifications", all of which are contained herein, the Undersigned proposes to furnish the following which meet these specifications:

**NOTE NEW REQUIREMENT: EFFECTIVE 2/1/12 VENDORS WILL NO LONGER BE RECEIVING A POST CARD TO NOTIFY YOU OF PROJECTS ON THE STREET FOR BIDDING/QUOTING. WE WILL CONTINUE TO ADVERTISE IN THE NEWS PRESS RUNNING THE ADS ON FRIDAYS FOR FORMAL PROJECTS. NEW PROJECTS ARE POSTED ON OUR WEB SITE ON FRIDAYS. IT IS THE SOLE RESPONSIBILITY OF THE VENDOR TO CHECK THE LEE COUNTY PROCUREMENT MANAGEMENT WEB SITE FOR ANY PROJECTS. OUR WEB ADDRESS IS WWW.LEE-COUNTY.COM/PROCUREMENTMANAGEMENT CLICK ON PROJECTS AND OPEN TO VIEW THE PROJECTS.**

The undersigned acknowledges receipt of Addenda numbers: 1

[Signature]

TOTAL \$ 73.<sup>00</sup>

SECTION 1:

TOTAL \$ 4638.<sup>00</sup>

SECTION 2:

TOTAL \$ 3874.<sup>00</sup>

SECTION 3:

TOTAL \$ 8585.<sup>00</sup>

GRAND TOTAL: SECTIONS 1, 2 AND 3



**SECTION 1: BUSINESS CARDS:**

1. INCLUDES TYPESETTING
2. ROYAL SILK PLUS
3. WEIGHT - 80 COVER
4. PACKING - BOX
5. PROOF - REQUIRED

QUANTITY	DELIVERED PRICE PER BOX OF 100	DELIVERED PRICE PER BOX OF 500
ONE SIDED, ONE COLOR, 2" X 3 1/2"	\$ 13. <sup>50</sup> / <sub>100</sub>	\$ 23. <sup>00</sup> / <sub>100</sub>
ONE SIDED, MULTICOLOR COLOR, 2" X 3 1/2"	\$ 13. <sup>50</sup> / <sub>100</sub>	\$ 23. <sup>00</sup> / <sub>100</sub>

THE COUNTY RESERVES THE RIGHT TO NEGOTIATE FOR ANY OTHER CARDS TO BE PRINTED.

TOTAL \$ 73. <sup>00</sup>/<sub>100</sub>

SECTION 1:

**SECTION 2: LETTERHEAD AND ENVELOPES:**

A. NATURAL ROYAL RESOURCE WRITING PAPER

1. INCLUDES PRINTING
2. INCLUDES SET-UP
3. ONE COLOR
4. SHRINK WRAP
5. 8 1/2 X 11 LETTERHEAD
6. 24 lbs

QUANTITY	PRICE
500	\$ 38. <sup>00</sup> / <sub>100</sub>
1000	\$ 64. <sup>00</sup> / <sub>100</sub>
2000	\$ 118. <sup>00</sup> / <sub>100</sub>
3000	\$ 167. <sup>00</sup> / <sub>100</sub>
4000	\$ 215. <sup>00</sup> / <sub>100</sub>
5000	\$ 260. <sup>00</sup> / <sub>100</sub>
10,000	\$ 475. <sup>00</sup> / <sub>100</sub>

ADDENDUM NO. 1 QUOTE NO. Q-120095

B. NATURAL ROYAL RESOURCE WRITING ENVELOPES

1. INCLUDES PRINTING
2. INCLUDES SET-UP
3. ONE COLOR
4. NO. 10/24 LB

QUANTITY	PRICE
500	\$ 60. <sup>00</sup>
1000	\$ 110. <sup>00</sup>
2000	\$ 206. <sup>00</sup>
3000	\$ 297. <sup>00</sup>
4000	\$ 386. <sup>00</sup>
5000	\$ 472. <sup>00</sup>
10,000	\$ 887. <sup>00</sup>

C. WHITE WOVE ENVELOPES

1. NO. 10 WINDOW
2. INCLUDES SET-UP
3. ONE COLOR
4. 24 LB WHITE WOVE

QUANTITY	PRICE
500	\$ 28. <sup>00</sup>
1000	\$ 42. <sup>00</sup>
2000	\$ 80. <sup>00</sup>
3000	\$ 114. <sup>00</sup>
4000	\$ 145. <sup>00</sup>
5000	\$ 174. <sup>00</sup>
10,000	\$ 300. <sup>00</sup>

THE COUNTY RESERVES THE RIGHT TO NEGOTIATE FOR ANY OTHER PRINTING SERVICES.

SECTION 2:

TOTAL \$ 4638.<sup>00</sup>

SECTION 3:

A. BROCHURE  
1. 80 LB #3 GRADE FLO (GLOSS OR DULL)

QUANTITY	DESCRIPTION	PRICE
250	ONE COLOR, SINGLE FOLD	\$ 25. <sup>00</sup>
500	ONE COLOR, SINGLE FOLD	\$ 39. <sup>00</sup>
1000	ONE COLOR, SINGLE FOLD	\$ 66. <sup>00</sup>
2000	ONE COLOR, SINGLE FOLD	\$ 123. <sup>00</sup>
5000	ONE COLOR, SINGLE FOLD	\$ 309. <sup>00</sup>
EACH ADDITIONAL	ONE COLOR, SINGLE FOLD	\$ 51. <sup>00</sup>
1,000	TWO COLOR, SINGLE FOLD	\$ 94. <sup>00</sup>
250		
500	TWO COLOR, SINGLE FOLD	131. <sup>00</sup>
1000	TWO COLOR, SINGLE FOLD	177. <sup>00</sup>
2000	TWO COLOR, SINGLE FOLD	255. <sup>00</sup>
5000	TWO COLOR, SINGLE FOLD	\$ 525. <sup>00</sup>
EACH ADDITIONAL	TWO COLOR, SINGLE FOLD	\$ 105. <sup>00</sup>
1,000	THREE COLOR, SINGLE FOLD	95. <sup>00</sup>
250		
500	THREE COLOR, SINGLE FOLD	132. <sup>00</sup>
1000	THREE COLOR, SINGLE FOLD	145. <sup>00</sup>
2000	THREE COLOR, SINGLE FOLD	233. <sup>00</sup>
5000	THREE COLOR, SINGLE FOLD	317. <sup>00</sup>
EACH ADDITIONAL	THREE COLOR, SINGLE FOLD	65. <sup>00</sup>
1,000	FOUR COLOR, SINGLE FOLD	95. <sup>00</sup>
250		

ADDENDUM NO. 1 QUOTE NO. Q-120095

500	FOUR COLOR, SINGLE FOLD	132. <sup>00</sup>
1000	FOUR COLOR, SINGLE FOLD	145. <sup>00</sup>
2000	FOUR COLOR, SINGLE FOLD	233. <sup>00</sup>
5000	FOUR COLOR, SINGLE FOLD	317. <sup>00</sup>
EACH ADDITIONAL 1000	FOUR COLOR, SINGLE FOLD	65. <sup>00</sup>

THE COUNTY RESERVES THE RIGHT TO NEGOTIATE FOR ANY OTHER PRINTING SERVICES.

TOTAL \$ 3874.<sup>00</sup>

SECTION 3:

DELIVERY:

STOCK: 3 WORKING DAYS

NON STOCK: 5 WORKING DAYS

FORMAL QUOTE NO.: Q-120095

WILL YOU DELIVER WITH YOUR OWN VEHICLE AS OPPOSED TO COMMON CARRIE?

YES X NO \_\_\_\_\_

TO BE STARTED WITHIN ONE CALENDAR DAYS AFTER RECEIPT OF AWARD AND PURCHASE ORDER.

Quoters should carefully read all the terms and conditions of the specifications. Any representation of deviation or modification to the quote may be grounds to reject the quote.

Are there any modifications to the quote or specifications:

Yes \_\_\_\_\_ No X

Failure to clearly identify any modifications in the space below or on a separate page may be grounds for the quoter being declared nonresponsive or to have the award of the quote rescinded by the County.

MODIFICATIONS:

Quoter shall submit his/her quote on the County's Proposal Quote Form, including the firm name and authorized signature. Any blank spaces on the Proposal Quote Form, qualifying notes or exceptions, counter offers, lack of required submittals, or signatures, on County's Form may result in the Quoter/Quote being declared non-responsive by the County.

Is your firm interested in being considered for the Local Vendor Preference?

Yes X No \_\_\_\_\_

If yes, then read the paragraph entitled "Local Vendor Preference" included in these specifications. Also complete the Local Vendor Preference Questionnaire and return with your quotation.

FORMAL QUOTE NO.: Q-120095

ANTI-COLLUSION STATEMENT

THE BELOW SIGNED QUOTER HAS NOT DIVULGED TO, DISCUSSED OR COMPARED HIS QUOTE WITH OTHER QUOTERS AND HAS NOT COLLUDED WITH ANY OTHER QUOTER OR PARTIES TO A QUOTE WHATSOEVER. NOTE: NO PREMIUMS, REBATES OR GRATUITIES TO ANY EMPLOYEE OR AGENT ARE PERMITTED EITHER WITH, PRIOR TO, OR AFTER ANY DELIVERY OF MATERIALS. ANY SUCH VIOLATION WILL RESULT IN THE CANCELLATION AND/OR RETURN OF MATERIAL (AS APPLICABLE) AND THE REMOVAL FROM THE MASTER BIDDERS LIST.

FIRM NAME Cape Coral Minuteman Press

BY (Printed): Jeffrey Reich

BY (Signature): Jeffrey Reich

TITLE: President

FEDERAL ID # OR S.S. # 26-2475673

ADDRESS: 2816 Del Prado Blvd, S

Cape Coral, FL 33904

PHONE NO.: 541-3255

FAX NO.: 541-3055

CELLULAR PHONE/PAGER NO.: 239-994-4007

DUNS #: 2759

LEE COUNTY LOCAL BUSINESS TAX ACCOUNT NUMBER: 0506110

E-MAIL ADDRESS: jreich@minutemanpress.com

REVISED: 5/3/11

**ATTACHMENT A**

**LOCAL VENDOR PREFERENCE QUESTIONNAIRE  
(LEE COUNTY ORDINANCE NO. 08-26)**

Instructions: Please complete either Part A or B whichever is applicable to your firm

**PART A: VENDOR'S PRINCIPAL PLACE OF BUSINESS IS LOCATED WITHIN LEE/COLLIER COUNTY (Only complete Part A if your principal place of business is located within the boundaries of Lee/Collier County)**

1. **What is the physical location of your principal place of business that is located within the boundaries of Lee/Collier County, Florida?**

2816 Del Prado Blvd, S.  
Cape Coral, FL 33904

2. **What is the size of this facility (i.e. sales area size, warehouse, storage yard, etc.)**

1250 Sq Ft

**PART B: VENDOR'S PRINCIPAL PLACE OF BUSINESS IS NOT LOCATED WITHIN LEE/COLLIER COUNTY OR DOES NOT HAVE A PHYSICAL LOCATION WITHIN LEE/COLLIER COUNTY (Please complete this section.)**

1. **How many employees are available to service this contract?** \_\_\_\_\_

2. **Describe the types, amount and location of equipment you have available to service this contract.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



FORMAL QUOTE NO.: Q-120095

AFFIDAVIT CERTIFICATION  
IMMIGRATION LAWS

SOLICITATION NO.: Q120095 PROJECT NAME: Contract Printing

LEE COUNTY WILL NOT INTENTIONALLY AWARD COUNTY CONTRACTS TO ANY CONTRACTOR WHO KNOWINGLY EMPLOYS UNAUTHORIZED ALIEN WORKERS, CONSTITUTING A VIOLATION OF THE EMPLOYMENT PROVISIONS CONTAINED IN 8 U.S.C. SECTION 1324 a(e) {SECTION 274A(e) OF THE IMMIGRATION AND NATIONALITY ACT ("INA").

LEE COUNTY MAY CONSIDER THE EMPLOYMENT BY ANY CONTRACTOR OF UNAUTHORIZED ALIENS A VIOLATION OF SECTION 274A (e) OF THE INA. **SUCH VIOLATION BY THE RECIPIENT OF THE EMPLOYMENT PROVISIONS CONTAINED IN SECTION 274A (e) OF THE INA SHALL BE GROUNDS FOR UNILATERAL CANCELLATION OF THE CONTRACT BY LEE COUNTY.**

BIDDER ATTESTS THAT THEY ARE FULLY COMPLIANT WITH ALL APPLICABLE IMMIGRATION LAWS (SPECIFICALLY TO THE 1986 IMMIGRATION ACT AND SUBSEQUENT AMENDMENTS).

Company Name: Cape Coral Minuteman Press  
Signature: Jeffrey Reich Title: President Date: 3-26-12

STATE OF FL  
COUNTY OF LEE

The foregoing instrument was signed and acknowledged before me this 26<sup>th</sup> day of March, 2012, by JEFFREY S. REICH who has produced EX 219 as identification.  
(Print or Type Name)  
FLX R20043553100  
(Type of Identification and Number)

Jennifer Suarez  
Notary Public Signature  
Printed Name of Notary Public



Jennifer Suarez  
Notary Public  
State of Florida  
My Commission Expires 10/26/2015  
Commission No. EE 141874

EE141874 10/26/15  
Notary Commission Number/Expiration

The signee of this Affidavit guarantees, as evidenced by the sworn affidavit required herein, the truth and accuracy of this affidavit to interrogatories hereinafter made. **LEE COUNTY RESERVES THE RIGHT TO REQUEST SUPPORTING DOCUMENTATION, AS EVIDENCE OF SERVICES PROVIDED, AT ANY TIME.**

FORMAL QUOTE NO.: Q-120095

LEE COUNTY PROCUREMENT MANAGEMENT - BIDDERS CHECK LIST

**IMPORTANT:** Please read carefully and return with your bid proposal.  
Please check off each of the following items as the necessary action is completed:

- ☒ 1. The Quote has been signed.
- ☒ 2. The Quote prices offered have been reviewed.
- ☒ 3. The price extensions and totals have been checked.
- ☒ 4. The original (must be manually signed) and 1 additional copy of the quote has been submitted.
- ☒ 5. Two (2) identical sets of descriptive literature, brochures and/or data (if required) have been submitted under separate cover.
- ☒ 6. All modifications have been acknowledged in the space provided.
- ☒ 7. All addendums issued, if any, have been acknowledged in the space provided.
- ☒ 8. Erasures or other changes made to the quote document have been initialed by the person signing the quote.
- ☒ 9. Bid Bond and/or certified Check, (if required) have been submitted with the quote in amounts indicated.
- ☒ 10. Any Delivery information required is included.
- ☒ 11. Affidavit Certification Immigration Signed and Notarized
- ☒ 12. The mailing envelope has been addressed to:  

**MAILING ADDRESS**  
Lee County Procurement Mgmt.  
P.O. Box 398  
Ft. Myers, FL 33902-0398

**PHYSICAL ADDRESS**  
Lee County Procurement Mgmt.  
1825 Hendry St 3<sup>rd</sup> Floor  
Ft. Myers, FL 33901
- ☒ 13. The mailing envelope **MUST** be sealed and marked with:  
Quote Number \_\_\_\_\_  
Opening Date and/or Receiving Date \_\_\_\_\_
- ☒ 14. The quote will be mailed or delivered in time to be received no later than the specified opening date and time. (Otherwise quote cannot be considered or accepted.)
- ☐ 15. If submitting a "NO BID" please write quote number here \_\_\_\_\_ and check one of the following:  
☐ Do not offer this product  
☐ Insufficient time to respond.  
☐ Unable to meet specifications (why) \_\_\_\_\_  
☐ Unable to meet bond or insurance requirement.  
Other: \_\_\_\_\_

Company Name and Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Ciccarelli, Kathryn**

**From:** Jeff Reich [jreich@minutemanpress.com]  
**Sent:** Thursday, March 29, 2012 8:22 AM  
**To:** Ciccarelli, Kathryn  
**Subject:** Re: insurance certificate

Kathy;

I will get them corrected.

Jeff Reich, Owner  
Cape Coral Minuteman Press  
2816 Del Prado Blvd, S. Unit 6  
Cape Coral, FL 33904  
[www.capecoral.minutemanpress.com](http://www.capecoral.minutemanpress.com)  
<http://literaturepackaging.com/?CustomerID=MMPFLJR>

541-3255

----- Original Message -----

**From:** Ciccarelli, Kathryn  
**To:** Jeff Reich  
**Sent:** Thursday, March 29, 2012 8:11 AM  
**Subject:** RE: insurance certificate

Hi Jeff,

They were in the other envelope but were not done properly for us. The general liability is for the School Board not for Lee County BOCC. Also, I need your auto insurance. Please look at the sample I sent you. If you have any questions please give me a call.

Thank you

Kathy Ciccarelli, CPPB  
Procurement Agent  
Division of Procurement Management  
Phone 239-533-5456  
Fax 239-485-5460



Attention Lee County Vendors: Subscribe to the new Lee County Procurement Open Projects RSS feed and never miss out on a bid opportunity again. Get every new open project downloaded to your computer as soon as announced. For each open project - quote, bid, competitive negotiation, letter of interest, request for proposal, request for qualification - you'll receive the project name, solicitation number, pre-bid information, opening information and contact information.

**From:** Jeff Reich [mailto:jreich@minutemanpress.com]  
**Sent:** Wednesday, March 28, 2012 5:08 PM  
**To:** Ciccarelli, Kathryn  
**Subject:** Re: insurance certificate

I put them in the 2nd envelope?? not the sealed bid envelope?

Jeff Reich, Owner  
Cape Coral Minuteman Press

2816 Del Prado Blvd, S. Unit 6  
Cape Coral, Fl. 33904  
[www.capecoral.minutemanpress.com](http://www.capecoral.minutemanpress.com)  
<http://literaturepackaging.com/?CustomerID=MMPFLJR>

541-3255

----- Original Message -----

**From:** Ciccarelli, Kathryn  
**To:** [jreich@minutemanpress.com](mailto:jreich@minutemanpress.com) ; Steve Delaney  
**Sent:** Wednesday, March 28, 2012 4:50 PM  
**Subject:** insurance certificate

I need your insurance certificates in order to proceed. Please remember that we must be named as additional insured and certificate holder. I have attached a sample of how they need to be filled out. You will have ten days to get your certificate to me. Your certificate must be here by 4:00 p.m. on 4/7/12. The sooner you can get your insurance certificate back to me the better. Remember this still has to be approved by the Board.  
Thank you

Kathy Ciccarelli, CPPB  
Procurement Agent  
Division of Procurement Management  
Phone 239-533-5456  
Fax 239-485-5460



Attention Lee County Vendors: Subscribe to the new Lee County Procurement Open Projects RSS feed and never miss out on a bid opportunity again. Get every new open project downloaded to your computer as soon as it's announced. For each open project - quote, bid, competitive negotiation, letter of interest, request for proposal, or request for qualification - you'll receive the project name, solicitation number, pre-bid information, opening information and contact information.

Please note: Florida has a very broad public records law. Most written communications to or from County Employees and officials regarding County business are public records available to the public and media upon request. Your email communication may be subject to public disclosure.

Under Florida law, email addresses are public records. If you do not want your email address released in response to a public records request, do not send electronic mail to this entity. Instead, contact this office by phone or in writing.

**Ciccarelli, Kathryn**

---

**From:** Jeff Reich [jreich@minutemanpress.com]  
**To:** Ciccarelli, Kathryn  
**Sent:** Wednesday, March 28, 2012 5:06 PM  
**Subject:** Read: insurance certificate

Your message was read on Wednesday, March 28, 2012 5:06:01 PM (GMT-05:00) Eastern Time (US & Canada).

**Ciccarelli, Kathryn**

---

**From:** Jeff Reich [jreich@minutemanpress.com]  
**To:** Ciccarelli, Kathryn  
**Sent:** Thursday, March 29, 2012 8:12 AM  
**Subject:** Read: insurance certificate

Your message was read on Thursday, March 29, 2012 8:12:14 AM (GMT-05:00) Eastern Time (US & Canada).

**Ciccarelli, Kathryn**

**From:** Figueroa, Mike  
**Sent:** Wednesday, April 04, 2012 9:04 AM  
**To:** Ciccarelli, Kathryn  
**Subject:** RE: insurance certificate - Minute Man

Kathy-

Good to go.

Respectfully,

**Mike Figueroa**, Risk Manager  
Lee County Risk Management  
P.O. Box 398  
Fort Myers, Florida 33902  
[mfigueroa@leegov.com](mailto:mfigueroa@leegov.com)

**Office (239) 533-2310**

**Please Note New Fax Number: (888) 242-3233**

**From:** Ciccarelli, Kathryn  
**Sent:** Wednesday, April 04, 2012 8:48 AM  
**To:** Figueroa, Mike  
**Subject:** insurance certificate - Minute Man

Hi Mike,

Here is another certificate for Q-120095 Contract Printing. Do they comply?

Thank you

Kathy Ciccarelli, CPPB  
Procurement Agent  
Division of Procurement Management  
Phone 239-533-5456  
Fax 239-485-5460



Attention Lee County Vendors: Subscribe to the new Lee County Procurement Open Projects RSS feed and never miss out on a bid opportunity again. Get every new open project downloaded to your computer as soon as it's announced. For each open project - quote, bid, competitive negotiation, letter of interest, request for proposal, or request for qualification - you'll receive the project name, solicitation number, pre-bid information, opening information and contact information.

Please note: Florida has a very broad public records law. Most written communications to or from County Employees and officials regarding County business are public records available to the public and media upon request. Your email communication may be subject to public disclosure.

Under Florida law, email addresses are public records. If you do not want your email address released in response to a public records request, do not send electronic mail to this entity. Instead, contact this office by phone or in writing.



Phone: 239-541-3255  
Fax: 239-541-3055

1413 SE 47th Terrace  
Cape Coral, FL 33904  
www.CapeCoralMinutemanPress.com

Date

3/30/12

To:

Kathy Cicerelli

Company:

Fax Number:

From:

Jeff Reich

Number of pages (Includes Cover)

Kathy

Hopefully these are correct, and what you need

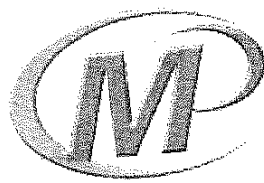
Thank You  
Jeff

- Brochures
- Business Forms
- Newsletters
- Graphic Design
- Carbonless Forms
- Sales Bulletins

- Letterhead
- Envelopes
- Business Cards
- Books
- Continuous Forms
- Announcements

- Flyers
- Catalogs
- Rubber Stamps
- Resumes
- Price Lists
- Invitations





*Cape Coral*  
**Minuteman  
Press.**  
Design • Print • Direct Mail

*Helping Your Business Succeed  
Through Quality Printing*

## Order Conveniently:

Online through our website  
[www.capecoral.minutemanpress.com](http://www.capecoral.minutemanpress.com)

Price Lists  
Computer Forms

email Jeff or Erin

[jreich@MinutemanPress.com](mailto:jreich@MinutemanPress.com)

Copying

[cgraphics@MinutemanPress.com](mailto:cgraphics@MinutemanPress.com)

Multi-Color Printing

Call or Fax us!  
Tel: 239.541.3255  
Fax: 239.541.3055

Graphic Design

Booklets

Newsletters

Brochures

Bulletins

Flyers

Business Cards

We are located at  
2816 Del Prado Blvd., S.  
Unit 6  
Cape Coral, FL 33904

Catalogues

Labels

Invitations

Envelopes

NCR Forms

Digital Color

Menus

Memo Pads











Mailing

Post cards

## Quality Printing You Can Afford!

Quoted paper specified in Bid

Royal Resource™

ENVIRONMENTAL CERTIFICATIONS	 	<p>All items are Forest Stewardship Council certified to contain product from well-managed forests and controlled sources. All items except Brilliant White also contain recycled post-consumer fiber. Cert. No. SW-COC-001724</p> <p>Specified items are Green Seal™ certified and contain 30% recycled post-consumer fiber. 94B White contains 100% recycled post-consumer fiber.</p>
RECYCLED CONTENT		<p>All items contain 30% recycled post-consumer fiber, except Brilliant White. 94B White contains 100% recycled post-consumer fiber.</p>
LASER, INKJET & COPIER GUARANTEED		<p>Writing, Text and 65 lb. Cover</p>
ACID-FREE LIGNIN-FREE		<p>All items</p>
BRIGHTNESS		<p>Brilliant White = 98 Brightness White = 94 Brightness</p>
OPACITY		<p>24 lb. Writing = 91 70 lb. Text = 93 80 lb. Text = 94 &amp; 95</p>
WATERMARKS	 	<p>Brilliant White Writing weights</p> <p>All other Writing weights</p>
ENVELOPES		<p>Matching envelopes available</p>

## STOCKING, PRINTING &amp; HANDLING INFORMATION

1544a. *Impatiens* *sp.* (Crucif. 100) in Corn. Potted with soil and sand. 1.5 ft. tall.  
Trans. Root bearing 1.5 ft. tall. White at the base. P. also with black or brownish base. Petal. 5 mm. long.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
04/02/2012

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  
The Thompson Agency  
2132 McGregor Blvd  
Fort Myers, FL 33919

CONTACT NAME: Philip R Thompson  
PHONE (A/C, No, Ext): 239-689-8570 FAX (A/C, No): 239-278-1074  
E-MAIL: phil@thompsoninsurancefl.com  
ADDRESS:  
PRODUCER  
CUSTOMER ID #:

INSURED MinuteMan Press of Cape Coral  
2816 Del Prado Blvd S, Ste 6  
Cape Coral, FL 33904

INSURER(S) AFFORDING COVERAGE  
INSURER A: Bankers Insurance Group  
INSURER B: Safeco Insurance  
INSURER C:  
INSURER D:  
INSURER E:  
INSURER F:

NAIC #

REVISION NUMBER:

## COVERAGES

CERTIFICATE 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.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY	X	09-0004988606-7-00	12/19/11	12/19/12	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC					
B	AUTOMOBILE LIABILITY		F2507428	4/2/2012	4/2/2013	COMBINED SINGLE LIMIT (Ea accident) \$ 500,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ 500,000
	ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS					
	UMBRELLA LIAB EXCESS LIAB	OCCUR CLAIMS-MADE				EACH OCCURRENCE \$ AGGREGATE \$
	DEDUCTIBLE RETENTION					WC STATUTORY LIMITS OTH-ER
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A				E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
Lee County, a political subdivision and Charter County of the State of Florida, its agents, employees, and public officials

## CANCELLATION

### CERTIFICATE HOLDER

Lee County Board of County Commissioners  
ATTN: Procurement Management  
PO Box 398  
Ft. Myers, FL 33902

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

© 1988-2009 ACORD CORPORATION. All rights reserved.



# CERTIFICATE OF LIABILITY INSURANCE

KKC  
R054DATE (MM/DD/YYYY)  
03-21-2012

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  
AUTOMATIC DATA PROCESSING INS AGCY  
250717 P: (877) 287-1316 F: (888) 443-6112  
PO BOX 33015  
SAN ANTONIO TX 78265

CONTACT NAME:  
PHONE (A/C, No, Ext): (877) 287-1316 FAX (A/C, No): (888) 443-6112  
E-MAIL ADDRESS:  
PRODUCER CUSTOMER ID #:

INSURED  
CAPE CORAL MINUTEMAN PRESS, IN, INC  
2816 DEL PRADO BLVD S STE 6  
CAPE CORAL FL 33904

INSURER(S) AFFORDING COVERAGE  
INSURER A: Hartford Underwriters Ins Co  
INSURER B:  
INSURER C:  
INSURER D:  
INSURER E:  
INSURER F:

REVISION NUMBER:

## COVERAGES

CERTIFICATE 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.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY					EACH OCCURRENCE \$
	COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence) \$
	CLAIMS-MADE <input type="checkbox"/> OCCUR <input type="checkbox"/>					MED EXP (Any one person) \$
						PERSONAL & ADV INJURY \$
						GENERAL AGGREGATE \$
	GEN'L AGGREGATE LIMIT APPLIES PER:					PRODUCTS - COMP/OP AGG \$
	<input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC					\$
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$
	ANY AUTO					BODILY INJURY (Per person) \$
	ALL OWNED AUTOS					BODILY INJURY (Per accident) \$
	SCHEDULED AUTOS					PROPERTY DAMAGE (Per accident) \$
	HIRED AUTOS					\$
	NON-OWNED AUTOS					\$
	UMBRELLA LIAB	OCCUR <input type="checkbox"/>				EACH OCCURRENCE \$
	EXCESS LIAB	CLAIMS-MADE <input type="checkbox"/>				AGGREGATE \$
	DEDUCTIBLE					\$
	RETENTION \$					\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N <input type="checkbox"/>	76 WEG ER4571	12/19/2011	12/19/2012	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER \$ 500,000
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/>				E.L. EACH ACCIDENT \$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE \$ 500,000
						E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
Those usual to the Insured's Operations.

## CERTIFICATE HOLDER

Lee County Board of County Commissioners c/o Lee County Purchasing  
PO BOX 398  
FORT MYERS, FL 33902

## 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

© 1988-2009 ACORD CORPORATION. All rights reserved.

# TRAVELERS

of Florida

AAA INS AGENCY - FT MYER  
PO BOX 31087  
TAMPA FL 33631  
01719

August 22, 2011

Policy Number 987418057 101 1  
Policy Period 09/30/2011 - 09/30/2012  
12:01 AM STANDARD TIME AT THE RESIDENCE PREMISES

*Cape Coral Minuteman Press*

DOREEN AND JEFFREY REICH  
3513 SE 18TH AVE  
CAPE CORAL FL 339044472

## Thank you for your business!

### QUESTIONS? CONTACT US!

Policy questions or changes . . . . .	1.800.891.4222
24 hour claim service . . . . .	1.800.CLAIM33
	1.800.252.4633
Billing and Payment Information . . . . .	1.800.550.7716
Online service . . . . .	travelersfl.com

Thank you for trusting Travelers of Florida with your auto insurance. We're always available to assist you with questions, additional insurance needs, or claims.

The enclosed, personalized policy package was created just for you.

- **Please review these materials for accuracy:**

- Your auto renewal policy
- Your auto insurance identification card(s)
- Other important notices

- **Identification Cards.** You may need these cards as proof of insurance so keep them in a safe place in your vehicle, such as your glove box.
- **Claim Cards.** Use the handy claim cards below if you're ever in an accident. Simply break the card in half and give the right side to the other driver.

On behalf of AAA INS AGENCY - FT MYER, we thank you for your continued business.

Sincerely,

*Gregory C. Toczydlowski*

Gregory C. Toczydlowski  
President  
Personal Insurance

PL-13512R FL 06-09

TRAVELERS  
of Florida

Call us immediately  
to report your loss

800.252.4633  
(800.CLAIM33)

We're here to help

24 hours a day, 365 days a year

Break in half.  
(See other side.) →

FOR YOU

TRAVELERS  
of Florida

Call us immediately  
to report your loss

800.252.4633  
(800.CLAIM33)

We're here to help

24 hours a day, 365 days a year

← Break in half.  
(See other side.)

FOR OTHER DRIVER

TRAVELERS  
of Florida

Call us immediately  
to report your loss

800.252.4633  
(800.CLAIM33)

We're here to help

24 hours a day, 365 days a year

Break in half.  
(See other side.) →

FOR YOU

TRAVELERS  
of Florida

Call us immediately  
to report your loss

800.252.4633  
(800.CLAIM33)

We're here to help

24 hours a day, 365 days a year

← Break in half.  
(See other side.)

FOR OTHER DRIVER



Jeff Reich  
Owner

2816 Del Prado Blvd., S.  
Unit 6  
Cape Coral, FL 33904

Tel: 239-541-3255  
Fax: 239-541-3055

www.CapeCoral.MinuteManPress.com  
jreich@minutemanpress.com

Printed on  
Paper 4x6

Bid Q120095 Contract Printing

Bid opening 3/27/12 2:30pm

Lee County Procurement Mgmt.  
1825 Hendry St. 3rd Fl  
Ft. Myers, FL 33901

MAR 27 12 10:15

FA

Design • Print • Direct Mail



Cape Coral

**Minuteman  
Press®**

The First & Last Step in Printing

**Jeff Reich**

Owner

2816 Del Prado Blvd., S.  
Unit 6  
Cape Coral, FL 33904

**Tel: 239-541-3255**

**Fax: 239-541-3055**

[www.CapeCoral.MinutemanPress.com](http://www.CapeCoral.MinutemanPress.com)  
[jreich@minutemanpress.com](mailto:jreich@minutemanpress.com)

MAR 23 12:30 PM '04

KA

Paid opening: 3/27/12

2:30 PM

Scaled Bid

# Q12 0095

Contract  
Printing

Lee County Procurement MSMT  
1825 Hendry ST 3rd FL.

FT. MYERS, FL. 33901