

BILL NO.: 24-0206

ORDINANCE NO.: 24- 0128

INTRODUCED BY: COUNCIL MEMBER (s) Groetke

1 **AN ORDINANCE AUTHORIZING THE JEFFERSON COUNTY,**
2 **MISSOURI, COUNTY EXECUTIVE TO EXECUTE THE LEASE FOR REAL**
3 **PROPERTY LOCATED AT 5 MERCHANT DRIVE, HILLSBORO, MISSOURI;**
4 **AND AUTHORIZATION FOR THE COUNTY EXECUTIVE TO EXECUTE ANY**
5 **NECESSARY AGREEMENTS OR CONTRACTS TO EFFECTUATE THE LEASE**
6 **FOR THE JUVENILE DIVISION OF THE CIRCUIT COURT OF THE TWENTY-**
7 **THIRD (23RD) JUDICIAL CIRCUIT OF MISSOURI.**

8 **WHEREAS,** the Juvenile Division of the Circuit Court of the Twenty-Third (23rd)
9 Judicial Circuit of Missouri recommends the continuation of the lease of the real property
10 5 Merchant Drive (also referred to as #5 Merchant Street), Hillsboro, Missouri from
11 Bradford Properties, LLC; and

12 **WHEREAS,** the Juvenile Division of the Circuit Court of the Twenty-Third (23rd)
13 Judicial Circuit of Missouri refers juveniles to the center located at 5 Merchant Drive (also
14 referred to as #5 Merchant Street), Hillsboro, Missouri operated by the Missouri
15 Department of Social Services, Division of Youth Services; and

16 **WHEREAS,** the center provides education, counseling, and treatment for said
17 juveniles; and

18 **WHEREAS,** Jefferson County currently leases the real property at 5 Merchant Drive
19 (also referred to as #5 Merchant Street), Hillsboro, Missouri from Bradford Properties,

1 LLC, pursuant to a lease approved by Ordinance 14-0495 and would like to continue to
2 lease the premises to operate the center for the education, counseling, and treatment of
3 juveniles by the Missouri Department of Social Services, Division of Youth Services as
4 described above and pursuant to an agreement between the Juvenile Division and the
5 Division of Youth Services; and

6 LEASE LOCATION

7 5 Merchant Drive (also referred to as #5 Merchant Street),

8 LESSOR

9 Bradford Properties, LLC

10 ORDINANCE NUMBERS

11 14-0495, 15-0578, 16-0492, 18-0113, 18-0484 and 19-0512 21-0107, 22-0127, 23-0108

12 **WHEREAS**, the Jefferson County, Missouri, Council finds it is in the best interests
13 of the County to lease the property 5 Merchant Drive (also referred to as #5 Merchant
14 Street), Hillsboro, Missouri from Bradford Properties LLC for the term from the date of
15 approval to December 31, 2024 in the amount of **\$6,100.00** per month for an annual amount
16 up to **\$73,200.00** subject to budgetary limitations and with approval of the County Council
17 and County Executive; and

18 **BE IT ENACTED BY THE JEFFERSON COUNTY, MISSOURI, COUNCIL,**
19 **AS FOLLOWS:**

20 Section 1. The County authorizes the renewal of the lease originally approved
21 pursuant to Ordinance 14-0495 for an additional one-year term as follows:


22 LEASE LOCATION

THIS BILL BEING DULY INTRODUCED, THE MEMBERS OF THE JEFFERSON COUNTY, MISSOURI, COUNCIL VOTED AS FOLLOWS:

Council Member District 1, Brian Haskins	<u>yes</u>
Council Member District 2, Gene F. Barbagallo	<u>yes</u>
Council Member District 3, Lori Arons	<u>yes</u>
Council Member District 4, Charles Groetke	<u>yes</u>
Council Member District 5, Scott Seek	<u>yes</u>
Council Member District 6, Daniel Stallman	<u>yes</u>
Council Member District 7, Bob Tullock	<u>yes</u>

THE ABOVE BILL ON THIS B DAY OF February, 2024:

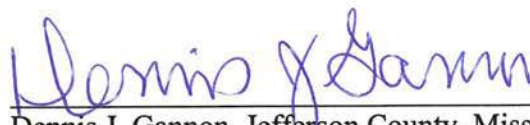
PASSED **FAILED**


Charles Groetke, County Council Chair


Cherlynn Boyer, Council Executive Assistant

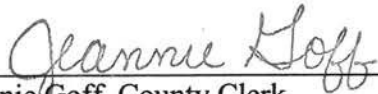
THIS BILL WAS ✓ APPROVED BY THE JEFFERSON COUNTY EXECUTIVE AND ENACTED AS AN ORDINANCE OF JEFFERSON COUNTY, MISSOURI, THIS 15 DAY OF February, 2024.

THIS BILL WAS _____ VETOED AND RETURNED TO THE JEFFERSON COUNTY, MISSOURI, COUNCIL WITH WRITTEN OBJECTIONS BY THE JEFFERSON COUNTY EXECUTIVE, THIS _____ DAY OF _____, 2024.



Dennis J. Gannon, Jefferson County, Missouri, Executive

ATTEST:



Jeannie Goff, County Clerk

BY: 

First Reading: 02-13-2024



County of Jefferson

State of Missouri

Administration Center
729 Maple Street · PO Box 100
Hillsboro, Missouri 63050



ORDINANCE NO.

24-0128

Dennis Gannon

County Executive

DEPARTMENT OF ADMINISTRATIVE SERVICES

David Courtway - Director

Web Address: www.jeffcomo.org

Dana Downs
Human Resources Manager
(636)797-5563 / Fax (636)797-5596

Jackie Doyle
General Services/Contracts & Grants Manager
(636)797-5380 / Fax (636)797-5067

BRADFORD PROPERTIES LLC
ATTN: THEODORE BRADFORD
PO BOX 377
HILLSBORO MO 63050



January 5, 2024

Attn: Theodore Bradford

The County of Jefferson, Missouri leases property located at #5 Merchant Drive, Hillsboro, Missouri. The renewal option for the lease expires on December 31, 2023.

The County of Jefferson, Missouri may desire to lease the property located at #5 Merchant Street, Hillsboro, Missouri for a one-year term with the same terms and conditions subject to approval by the County Council and County Executive. The new lease term shall be from January 1, 2024 through December 31, 2024.

This lease states and will require that you do not owe any delinquent real or personal property taxes in Jefferson County.

Please include your updated insurance certificates required with this bid.

If you do not own any real or personal property in Jefferson County, please provide a letter stating so and return it with the renewal letter.

Please sign and return as soon as possible if your company agrees to lease this property.

Janet Coyle

Printed Name of Authorizing Agent

Signature

Janet Coyle

Date

If your company does not wish to lease this property, please advise as soon as possible. Any questions please contact me at (636) 797-5380.

Respectfully,

Jackie Doyle

Jackie Doyle

Department of Administrative Services

In Witness thereof, the parties hereto have executed this Agreement, in triplicate, as of this 15 day of February 2024:

Bradford Properties LLC
Company Name

County of Jefferson, State of Missouri

Janet Coge
Signature
Janet Coge
Print

Dennis J. Gannon
Dennis J. Gannon County Executive

Company Address: _____

PO 377

Hillsboro, Mo 63050

Phone: 314-808-3251

I hereby certify under section 50.660 RSMo there is either: (1) a balance of funds, otherwise unencumbered, to the credit of the appropriation to which the obligation contained herein is chargeable, and a cash balance otherwise unencumbered, in the treasury, to the credit of the funds from which payment is to be made, each sufficient to meet the obligation contained herein; or (2) bonds or taxes have been authorized by vote of the people and there is a sufficient unencumbered amount of the bonds yet to be sold or of the taxes levied and yet to be collected to meet the obligation in case there is not a sufficient unencumbered cash balance in the treasury.

Kristy Wapell
County Auditor

APPROVED AS TO FORM

[Signature]
County Counselor

JEFFERSON COUNTY TAX RECEIPT
2023 REAL ESTATE

1/11/2024 1:25 PM

MICHELLE WORTH, COLLECTOR

729 MAPLE ST., STE 38
HILLSBORO, MO 63050
PHONE: (636) 737-5405

Email: collector@jeffco.mo.gov

PARCEL NUMBER: 17-2.0-03.0-4-001-014.

RECEIPT#: 2023169506

TOTAL VALUATION: 371,400
ACRES 6.12

BRADFORD PROPERTIES LLC
PO BOX 377
HILLSBORO, MO 63050

TAX DISTRICT

CITY OF HILLSBORO	1,055.40
HEALTH UNIT TAX	375.00
HILLSBORO FIRE	2,348.00
HILLSBORO SCHOOL	14,452.85
HILLSBORO SPECIAL	682.36
JC DEV DISABILITIES	218.29
JEFFERSON COLLEGE	1,155.80
MENTAL HEALTH TAX	318.29
MERCHANT SUR TAX	891.36
PARK TAX	95.08
STATE TAX	111.42
VALLE AMBULANCE	973.07

TOTAL TAXES 24,259.86
TOTAL PAID 24,259.86

PROPERTY DESCRIPTION

MERRY & ONEILS
PT LOTS 9 & 12 &
PT E1/2

SITUS: 4621 YEAGER RD
4629 YEAGER RD
4633 YEAGER RD
4635 YEAGER RD

PAID

*This receipt is valid ONLY
if the payment is funded*

2023 Jefferson County Real Estate Paid Receipt

1/11/2024 1:25 PM

Tax Year: 2023

PARCEL NUMBER: 17-2.0-03.0-4-001-014.

BRADFORD PROPERTIES LLC
PO BOX 377
HILLSBORO, MO 63050

Date Paid: 12/31/2023
Amount Paid: \$24,259.86
Receipt #: 2023169506
Batch #: 2023000443
Payment Type: CHECK
Check #: 3281

REAL ESTATE TAX RECEIPTS CANNOT BE USED
TO LICENSE VEHICLES

JEFFERSON COUNTY TAX RECEIPT
2023 REAL ESTATE

1/11/2024 1:25 PM

PARCEL NUMBER: 17-2.0-03.0-3-001-001.

RECEIPT#: 2023169506

TOTAL VALUATION: 218,000
ACRES 1.50

BRADFORD PROPERTIES LLC
PO BOX 377
HILLSBORO, MO 63050

MICHELLE WORTH, COLLECTOR
729 MAPLE ST., STE 36
HILLSBORO, MO 63050
PHONE: (636) 797-5406
Email: collector@jeffcomo.org

PROPERTY DESCRIPTION

PT NE1/4 SW1/4

SITUS: 10707 BUSINESS 21
747 MAPLE ST
749 MAPLE ST
753 MAPLE ST

TAX DISTRICT	TAX
CITY OF HILLSBORO	1,071.47
HEALTH UNIT TAX	218.65
HILLSBORO FIRE	1,790.22
HILLSBORO SCHOOL	8,489.14
HILLSBORO SPECIAL	402.65
JC DEV DISABILITIES	166.83
JEFFERSON COLLEGE	678.42
MENTAL HEALTH TAX	186.83
MERCHANT SUR TAX	523.20
PARK TAX	55.81
STATE TAX	65.40
VALLE AMBULANCE	571.16
TOTAL TAXES	14,239.78
TOTAL PAID	14,239.78

PAID

*This receipt is valid ONLY
if the payment is funded*

2023 Jefferson County Real Estate Paid Receipt

1/11/2024 1:25 PM

Tax Year: 2023

PARCEL NUMBER: 17-2.0-03.0-3-001-001.

BRADFORD PROPERTIES LLC
PO BOX 377
HILLSBORO, MO 63050

Date Paid: 12/31/2023
Amount Paid: \$14,239.78
Receipt #: 2023169506
Batch #: 2023000443
Payment Type: CHECK
Check #: 3281

**REAL ESTATE TAX RECEIPTS CANNOT BE USED
TO LICENSE VEHICLES**

JEFFERSON COUNTY TAX RECEIPT
2023 REAL ESTATE

1/11/2024 1:25 PM

PARCEL NUMBER: 17-2.0-03.0-4-001-008.

RECEIPT#: 2023169506

TOTAL VALUATION: 622,500
ACRES 38.66

MICHELLE WORTH, COLLECTOR
729 MAPLE ST., STE 36
HILLSBORO, MO 63050
PHONE: (636) 797-5406
Email: collector@jeffco.org

BRADFORD PROPERTIES LLC
PO BOX 377
HILLSBORO, MO 63050

PROPERTY DESCRIPTION

PT N1/2 SE1/4

SITUS: 4610 YEAGER RD
4626 YEAGER RD
4632 YEAGER RD
4650 W COMMERCIAL DR

TAX DISTRICT	TAX
CITY OF HILLSBORO	3,059.59
HEALTH UNIT TAX	524.37
HILLSBORO FIRE	5,111.97
HILLSBORO SCHOOL	24,240.77
HILLSBORO SPECIAL	1,149.76
JC DEV DISABILITIES	533.48
JEFFERSON COLLEGE	1,937.22
MENTAL HEALTH TAX	533.48
MERCHANT SUR TAX	1,461.84
PARK TAX	159.36
STATE TAX	186.75
VALLE AMBULANCE	1,630.95
TOTAL TAXES	40,629.54
TOTAL PAID	40,629.54

PAID

This receipt is valid ONLY if the payment is funded

2023 Jefferson County Real Estate Paid Receipt

1/11/2024 1:25 PM

Tax Year: 2023

PARCEL NUMBER: 17-2.0-03.0-4-001-008.

BRADFORD PROPERTIES LLC
PO BOX 377
HILLSBORO, MO 63050

Date Paid: 12/31/2023
Amount Paid: \$40,629.54
Receipt #: 2023169506
Batch #: 2023000443
Payment Type: CHECK
Check #: 3281

REAL ESTATE TAX RECEIPTS CANNOT BE USED
TO LICENSE VEHICLES

JEFFERSON COUNTY TAX RECEIPT
2023 REAL ESTATE

1/11/2024 1:25 PM

PARCEL NUMBER: 19-3.0-05.0-3-004-003.

RECEIPT#: 2023169506

TOTAL VALUATION: 50,500
ACRES 0.31

BRADFORD PROPERTIES LLC
PO BOX 377
HILLSBORO, MO 63050

MICHELLE WORTH, COLLECTOR
729 MAPLE ST., STE 36
HILLSBORO, MO 63050
PHONE: (636) 797-5406
Email: collector@jeffcomo.org

TAX DISTRICT	TAX
CITY OF CRYSTAL	377.39
CRYSTAL CITY SCHOOL	2,380.97
FESTUS SPECIAL	86.05
HEALTH UNIT TAX	50.65
JC DEV DISABILITIES	43.28
JEFFERSON COLLEGE	157.16
JOACHIM-PLATTIN AMB	62.17
MENTAL HEALTH TAX	43.28
MERCHANT SUR TAX	121.20
PARK TAX	12.93
STATE TAX	15.15

TOTAL TAXES 3,350.23
TOTAL PAID 3,350.23

PROPERTY DESCRIPTION

CRYSTAL CITY 6 ADD
PT LOT 5

SITUS: 510 BAILEY RD

PAID

*This receipt is valid ONLY
if the payment is funded*

2023 Jefferson County Real Estate Paid Receipt

1/11/2024 1:25 PM

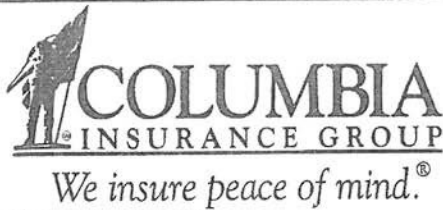
Tax Year: 2023

PARCEL NUMBER: 19-3.0-05.0-3-004-003.

BRADFORD PROPERTIES LLC
PO BOX 377
HILLSBORO, MO 63050

Date Paid: 12/31/2023
Amount Paid: \$3,350.23
Receipt #: 2023169506
Batch #: 2023000443
Payment Type: CHECK
Check #: 3281

REAL ESTATE TAX RECEIPTS CANNOT BE USED
TO LICENSE VEHICLES



2102 White Gate Drive
P.O. Box 618
Columbia, MO 65205

POLICY NUMBER: CMPMO2000020015
RENEWAL OF: NEW

COMMERCIAL PROPERTY DECLARATIONS

ASSOCIATION CASUALTY INSURANCE COMPANY

Named Insured and Mailing Address

BRADFORD PROPERTIES LLC
PO BOX 377
HILLSBORO MO 63050-0377

Policy Period From: 04/04/2023 To: 04/04/2024 at 12:01 A.M. Time at Your Mailing Address Shown Above.

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

Business Description:	Form Of Business: LIMITED LIABILITY COMPANY
Locations: SEE SCHEDULE OF LOCATIONS	

LOCATION DESCRIPTION

Loc. No.	Bldg. No.	Construction	Deductible
001	001	JOISTED MASONRY	\$ 5,000

COVERAGES PROVIDED Insurance at the described premises applies only for coverages for which a limit of insurance is shown.

Loc. No.	Bldg. No.	Coverage	Limit Of Insurance	Covered Causes Of Loss	Coinsurance*	Premium
001	001	BUILDING	\$ 746,500	SPEC W/ EQ	80	\$ 3,472

* If Extra Expense Coverage, Limits On Loss Payment

OPTIONAL COVERAGES Applicable only when entries are made in the schedule below.

Agreed Value	Replacement Cost
Expiration Date: _____ Amount: _____	<input checked="" type="checkbox"/> Building <input type="checkbox"/> Personal Property <input type="checkbox"/> Including "Stock"
Inflation Guard: % Building % Personal Property	<input type="checkbox"/> Maximum Period of Indemnity
Earthquake and Volcanic Eruption Deductible: 15 %	Business Income Time Period: _____
Business Income Monthly Limit of Indemnity: _____	Business Income Extended Days of Indemnity: _____

LOCATION DESCRIPTION

Loc. No.	Bldg. No.	Construction	Deductible
003	001	JOISTED MASONRY	\$ 5,000

COVERAGES PROVIDED Insurance at the described premises applies only for coverages for which a limit of insurance is shown.

Loc. No.	Bldg. No.	Coverage	Limit Of Insurance	Covered Causes Of Loss	Coinsurance*	Premium
003	001	BUILDING	\$ 423,000	SPEC W/ EQ	80	\$ 5,795

* If Extra Expense Coverage, Limits On Loss Payment

OPTIONAL COVERAGES Applicable only when entries are made in the schedule below.

Agreed Value	Replacement Cost
Expiration Date: _____ Amount: _____	<input checked="" type="checkbox"/> Building <input type="checkbox"/> Personal Property <input type="checkbox"/> Including "Stock"
Inflation Guard: % Building % Personal Property	<input type="checkbox"/> Maximum Period of Indemnity
Earthquake and Volcanic Eruption Deductible: 15 %	Business Income Time Period: _____
Business Income Monthly Limit of Indemnity: _____	Business Income Extended Days of Indemnity: _____

LOCATION DESCRIPTION

Loc. No.	Bldg. No.	Construction	Deductible
004	001	NON-COMBUSTIBLE	\$ 5,000

COVERAGES PROVIDED Insurance at the described premises applies only for coverages for which a limit of insurance is shown.

Loc. No.	Bldg. No.	Coverage	Limit Of Insurance	Covered Causes Of Loss	Coinsurance*	Premium
004	001	BUILDING	\$ 720,000	SPEC W/ EQ	80	\$ 2,469

* If Extra Expense Coverage, Limits On Loss Payment

OPTIONAL COVERAGES Applicable only when entries are made in the schedule below.

Agreed Value		Replacement Cost		
Expiration Date:	Amount:	<input checked="" type="checkbox"/> Building	<input type="checkbox"/> Personal Property	<input type="checkbox"/> Including "Stock"
Inflation Guard:	% Building	% Personal Property	<input type="checkbox"/> Maximum Period of Indemnity	
Earthquake and Volcanic Eruption Deductible: 15 %		Business Income Time Period:		
Business Income Monthly Limit of Indemnity:		Business Income Extended Days of Indemnity:		

LOCATION DESCRIPTION

Loc. No.	Bldg. No.	Construction	Deductible
005	001	FRAME	\$ 5,000

COVERAGES PROVIDED Insurance at the described premises applies only for coverages for which a limit of insurance is shown.

Loc. No.	Bldg. No.	Coverage	Limit Of Insurance	Covered Causes Of Loss	Coinsurance*	Premium
005	001	BUILDING	\$ 810,000	SPEC W/ EQ	80	\$ 3,217

* If Extra Expense Coverage, Limits On Loss Payment

OPTIONAL COVERAGES Applicable only when entries are made in the schedule below.

Agreed Value		Replacement Cost		
Expiration Date:	Amount:	<input checked="" type="checkbox"/> Building	<input type="checkbox"/> Personal Property	<input type="checkbox"/> Including "Stock"
Inflation Guard:	% Building	% Personal Property	<input type="checkbox"/> Maximum Period of Indemnity	
Earthquake and Volcanic Eruption Deductible: 15 %		Business Income Time Period:		
Business Income Monthly Limit of Indemnity:		Business Income Extended Days of Indemnity:		

LOCATION DESCRIPTION

Loc. No.	Bldg. No.	Construction	Deductible
006	001	FRAME	\$ 5,000

COVERAGES PROVIDED Insurance at the described premises applies only for coverages for which a limit of insurance is shown.

Loc. No.	Bldg. No.	Coverage	Limit Of Insurance	Covered Causes Of Loss	Coinsurance*	Premium
006	001	BUILDING	\$ 1,262,000	SPEC W/ EQ	80	\$ 4,102

* If Extra Expense Coverage, Limits On Loss Payment

OPTIONAL COVERAGES Applicable only when entries are made in the schedule below.

Agreed Value		Replacement Cost		
Expiration Date:	Amount:	<input checked="" type="checkbox"/> Building	<input type="checkbox"/> Personal Property	<input type="checkbox"/> Including "Stock"
Inflation Guard:	% Building	% Personal Property	<input type="checkbox"/> Maximum Period of Indemnity	
Earthquake and Volcanic Eruption Deductible: 15 %		Business Income Time Period:		
Business Income Monthly Limit of Indemnity:		Business Income Extended Days of Indemnity:		

LOCATION DESCRIPTION

Loc. No.	Bldg. No.	Construction	Deductible
007	001	FRAME	\$ 5,000

COVERAGES PROVIDED Insurance at the described premises applies only for coverages for which a limit of insurance is shown.

Loc. No.	Bldg. No.	Coverage	Limit Of Insurance	Covered Causes Of Loss	Coinsurance*	Premium
007	001	BUILDING	\$ 931,500	SPEC W/ EQ	80	\$ 3,325

* If Extra Expense Coverage, Limits On Loss Payment

OPTIONAL COVERAGES Applicable only when entries are made in the schedule below.

Agreed Value		Replacement Cost			
Expiration Date:	Amount:	<input checked="" type="checkbox"/> Building	<input type="checkbox"/> Personal Property	<input type="checkbox"/> Including "Stock"	
Inflation Guard:	% Building	% Personal Property	<input type="checkbox"/> Maximum Period of Indemnity		
Earthquake and Volcanic Eruption Deductible: 15 %			Business Income Time Period:		
Business Income Monthly Limit of Indemnity:			Business Income Extended Days of Indemnity:		

LOCATION DESCRIPTION

Loc. No.	Bldg. No.	Construction	Deductible
008	001	NON-COMBUSTIBLE	\$ 5,000

COVERAGES PROVIDED Insurance at the described premises applies only for coverages for which a limit of insurance is shown.

Loc. No.	Bldg. No.	Coverage	Limit Of Insurance	Covered Causes Of Loss	Coinsurance*	Premium
008	001	BUILDING	\$ 931,500	SPEC W/ EQ	80	\$ 2,990

* If Extra Expense Coverage, Limits On Loss Payment

OPTIONAL COVERAGES Applicable only when entries are made in the schedule below.

Agreed Value		Replacement Cost			
Expiration Date:	Amount:	<input checked="" type="checkbox"/> Building	<input type="checkbox"/> Personal Property	<input type="checkbox"/> Including "Stock"	
Inflation Guard:	% Building	% Personal Property	<input type="checkbox"/> Maximum Period of Indemnity		
Earthquake and Volcanic Eruption Deductible: 15 %			Business Income Time Period:		
Business Income Monthly Limit of Indemnity:			Business Income Extended Days of Indemnity:		

LOCATION DESCRIPTION

Loc. No.	Bldg. No.	Construction	Deductible
009	001	FRAME	\$ 5,000

COVERAGES PROVIDED Insurance at the described premises applies only for coverages for which a limit of insurance is shown.

Loc. No.	Bldg. No.	Coverage	Limit Of Insurance	Covered Causes Of Loss	Coinsurance*	Premium
009	001	BUILDING	\$ 1,031,000	SPEC W/ EQ	80	\$ 3,969

* If Extra Expense Coverage, Limits On Loss Payment

OPTIONAL COVERAGES Applicable only when entries are made in the schedule below.

Agreed Value		Replacement Cost			
Expiration Date:	Amount:	<input checked="" type="checkbox"/> Building	<input type="checkbox"/> Personal Property	<input type="checkbox"/> Including "Stock"	
Inflation Guard:	% Building	% Personal Property	<input type="checkbox"/> Maximum Period of Indemnity		
Earthquake and Volcanic Eruption Deductible: 15 %			Business Income Time Period:		
Business Income Monthly Limit of Indemnity:			Business Income Extended Days of Indemnity:		

LOCATION DESCRIPTION

Loc. No.	Bldg. No.	Construction	Deductible
010	001	FRAME	\$ 5,000

COVERAGES PROVIDED Insurance at the described premises applies only for coverages for which a limit of insurance is shown.

Loc. No.	Bldg. No.	Coverage	Limit Of Insurance	Covered Causes Of Loss	Coinsurance*	Premium
010	001	BUILDING	\$ 576,000	SPEC W/ EQ	80	\$ 2,264

* If Extra Expense Coverage, Limits On Loss Payment

OPTIONAL COVERAGES Applicable only when entries are made in the schedule below.

Agreed Value		Replacement Cost			
Expiration Date:	Amount:	<input checked="" type="checkbox"/> Building	<input type="checkbox"/> Personal Property	<input type="checkbox"/> Including "Stock"	
Inflation Guard:	% Building	% Personal Property	<input type="checkbox"/> Maximum Period of Indemnity		
Earthquake and Volcanic Eruption Deductible: 15 %			Business Income Time Period:		
Business Income Monthly Limit of Indemnity:			Business Income Extended Days of Indemnity:		

LOCATION DESCRIPTION

Loc. No.	Bldg. No.	Construction	Deductible
			\$

COVERAGES PROVIDED Insurance at the described premises applies only for coverages for which a limit of insurance is shown.

Loc. No.	Bldg. No.	Coverage	Limit Of Insurance	Covered Causes Of Loss	Coinsurance*	Premium

* If Extra Expense Coverage, Limits On Loss Payment

OPTIONAL COVERAGES Applicable only when entries are made in the schedule below.

Agreed Value		Replacement Cost			
Expiration Date:	Amount:	<input type="checkbox"/> Building	<input type="checkbox"/> Personal Property	<input type="checkbox"/> Including "Stock"	
Inflation Guard:	% Building	% Personal Property	<input type="checkbox"/> Maximum Period of Indemnity		
Earthquake and Volcanic Eruption Deductible:			Business Income Time Period:		
Business Income Monthly Limit of Indemnity:			Business Income Extended Days of Indemnity:		

LOCATION DESCRIPTION

Loc. No.	Bldg. No.	Construction	Deductible
			\$

COVERAGES PROVIDED Insurance at the described premises applies only for coverages for which a limit of insurance is shown.

Loc. No.	Bldg. No.	Coverage	Limit Of Insurance	Covered Causes Of Loss	Coinsurance*	Premium

* If Extra Expense Coverage, Limits On Loss Payment

OPTIONAL COVERAGES Applicable only when entries are made in the schedule below.

Agreed Value		Replacement Cost			
Expiration Date:	Amount:	<input type="checkbox"/> Building	<input type="checkbox"/> Personal Property	<input type="checkbox"/> Including "Stock"	
Inflation Guard:	% Building	% Personal Property	<input type="checkbox"/> Maximum Period of Indemnity		
Earthquake and Volcanic Eruption Deductible:			Business Income Time Period:		
Business Income Monthly Limit of Indemnity:			Business Income Extended Days of Indemnity:		

MORTGAGEHOLDERS

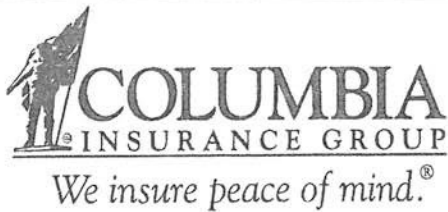
SEE SCHEDULE OF MORTGAGEHOLDER(S)

FORMS AND ENDORSEMENTS

Form(s) and Endorsement(s) made a part of this policy at time of issue: **SEE SCHEDULE OF FORMS AND ENDORSEMENTS**

Commercial Property Coverage Premium	\$	35,436.00
Certified Terrorism Coverage	\$	502.00
Total Taxes, Surcharges and Fees (if applicable)		
TOTAL PREMIUM	\$	35,938.00

THESE DECLARATIONS, TOGETHER WITH THE COMMERCIAL PROPERTY CONDITIONS AND COVERAGE FORM(S) AND ANY ENDORSEMENT(S), COMPLETE THE ABOVE NUMBERED POLICY



2102 White Gate Drive
P.O. Box 618
Columbia, MO 65205

POLICY NUMBER: CMPMO2000020015

RENEWAL OF: NEW

COMMERCIAL GENERAL LIABILITY DECLARATIONS

ASSOCIATION CASUALTY INSURANCE COMPANY

Named Insured and Mailing Address

BRADFORD PROPERTIES LLC
PO BOX 377
HILLSBORO, MO 63050-0377

Policy Period From: 04/04/2023 To: 04/04/2024 at 12:01 A.M. Time at Your Mailing Address Shown Above.

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

DESCRIPTION OF BUSINESS

BUSINESS DESCRIPTION:
FORM OF BUSINESS: LIMITED LIABILITY COMPANY

LIMITS OF INSURANCE

EACH OCCURRENCE LIMIT	\$1,000,000	
DAMAGE TO PREMISES RENTED TO YOU LIMIT	\$100,000	Any one premises
MEDICAL EXPENSE LIMIT	\$5,000	Any one person
PERSONAL & ADVERTISING INJURY LIMIT	\$1,000,000	Any one person or organization
GENERAL AGGREGATE LIMIT		\$2,000,000
PRODUCTS/COMPLETED OPERATIONS AGGREGATE LIMIT		\$2,000,000

ALL PREMISES YOU OWN, RENT OR OCCUPY

SEE SCHEDULE OF LOCATIONS

CLASSIFICATIONS

SEE SCHEDULE OF CLASSIFICATIONS

PREMIUM

GENERAL LIABILITY COVERAGE PREMIUM	\$3,335
CERTIFIED TERRORISM COVERAGE	\$50
TOTAL TAXES, SURCHARGES and FEES (if applicable)	
TOTAL PREMIUM	\$3,385

ENDORSEMENTS

ENDORSEMENTS ATTACHED TO THIS POLICY: **SEE SCHEDULE OF FORMS AND ENDORSEMENTS**

THESE DECLARATIONS, TOGETHER WITH THE COMMON POLICY CONDITIONS AND COVERAGE FORM(S) AND ANY ENDORSEMENT(S), COMPLETE THE ABOVE NUMBERED POLICY.



Policy Number:
CMPMO2000020015

SCHEDULE OF CLASSIFICATIONS

Named Insured:
BRADFORD PROPERTIES LLC
Agent Name:
SUNSTAR INSURANCE GROUP LLC DBA LAKENAN

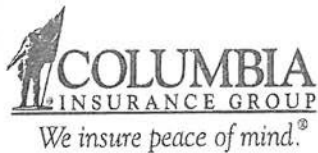
Effective Date: 04-04-23
12:01 A.M. Standard Time
Agent Number:
33092-

Code Number: 61217	Premium Basis	Premises/ Operations	
Location Number: 001/001	5,530	Rate	Premium
Classification: BUILDINGS OR PREMISES - BANK OR OFFICE - MERCANTILE OR MANUFACTURING (LESSOR'S RISK ONLY) - MAINTAINED BY THE INSURED - OTHER THAN NOT-FOR-PROFIT (PRODUCTS- COMPLETED OPERATIONS ARE SUBJECT TO THE GENERAL AGGREGATE LIMIT)		49.368	273.00
		Products/Completed Operations	
		Rate	Premium
			INCL

Code Number: 61217	Premium Basis	Premises/ Operations	
Location Number: 002/001	2,600	Rate	Premium
Classification: BUILDINGS OR PREMISES - BANK OR OFFICE - MERCANTILE OR MANUFACTURING (LESSOR'S RISK ONLY) - MAINTAINED BY THE INSURED - OTHER THAN NOT-FOR-PROFIT (PRODUCTS- COMPLETED OPERATIONS ARE SUBJECT TO THE GENERAL AGGREGATE LIMIT)		49.368	128.00
		Products/Completed Operations	
		Rate	Premium
			INCL

Code Number: 61217	Premium Basis	Premises/ Operations	
Location Number: 003/001	3,000	Rate	Premium
Classification: BUILDINGS OR PREMISES - BANK OR OFFICE - MERCANTILE OR MANUFACTURING (LESSOR'S RISK ONLY) - MAINTAINED BY THE INSURED - OTHER THAN NOT-FOR-PROFIT (PRODUCTS- COMPLETED OPERATIONS ARE SUBJECT TO THE GENERAL AGGREGATE LIMIT)		49.368	148.00
		Products/Completed Operations	
		Rate	Premium
			INCL

Code Number: 61217	Premium Basis	Premises/ Operations	
Location Number: 004/001	10,000	Rate	Premium
Classification: BUILDINGS OR PREMISES - BANK OR OFFICE - MERCANTILE OR MANUFACTURING (LESSOR'S RISK ONLY) - MAINTAINED BY THE INSURED - OTHER THAN NOT-FOR-PROFIT (PRODUCTS- COMPLETED OPERATIONS ARE SUBJECT TO THE GENERAL AGGREGATE LIMIT)		49.368	494.00
		Products/Completed Operations	
		Rate	Premium
			INCL



Policy Number:
CMPMO2000020015

SCHEDULE OF CLASSIFICATIONS

Named Insured:
BRADFORD PROPERTIES LLC
Agent Name:
SUNSTAR INSURANCE GROUP LLC DBA LAKENAN

Effective Date: 04-04-23
12:01 A.M. Standard Time
Agent Number:
33092-

Code Number: 61217	Premium Basis	Premises/Operations	
Location Number: 005/001	6,000	Rate	Premium
Classification: BUILDINGS OR PREMISES - BANK OR OFFICE - MERCANTILE OR MANUFACTURING (LESSOR'S RISK ONLY) - MAINTAINED BY THE INSURED - OTHER THAN NOT-FOR-PROFIT (PRODUCTS- COMPLETED OPERATIONS ARE SUBJECT TO THE GENERAL AGGREGATE LIMIT)		49.368	296.00
		Products/Completed Operations	
		Rate	Premium

Code Number: 61217	Premium Basis	Premises/Operations	
Location Number: 006/001	9,348	Rate	Premium
Classification: BUILDINGS OR PREMISES - BANK OR OFFICE - MERCANTILE OR MANUFACTURING (LESSOR'S RISK ONLY) - MAINTAINED BY THE INSURED - OTHER THAN NOT-FOR-PROFIT (PRODUCTS- COMPLETED OPERATIONS ARE SUBJECT TO THE GENERAL AGGREGATE LIMIT)		49.368	461.00
		Products/Completed Operations	
		Rate	Premium

Code Number: 61217	Premium Basis	Premises/Operations	
Location Number: 007/001	6,900	Rate	Premium
Classification: BUILDINGS OR PREMISES - BANK OR OFFICE - MERCANTILE OR MANUFACTURING (LESSOR'S RISK ONLY) - MAINTAINED BY THE INSURED - OTHER THAN NOT-FOR-PROFIT (PRODUCTS- COMPLETED OPERATIONS ARE SUBJECT TO THE GENERAL AGGREGATE LIMIT)		49.368	341.00
		Products/Completed Operations	
		Rate	Premium

Code Number: 61217	Premium Basis	Premises/Operations	
Location Number: 008/001	6,400	Rate	Premium
Classification: BUILDINGS OR PREMISES - BANK OR OFFICE - MERCANTILE OR MANUFACTURING (LESSOR'S RISK ONLY) - MAINTAINED BY THE INSURED - OTHER THAN NOT-FOR-PROFIT (PRODUCTS- COMPLETED OPERATIONS ARE SUBJECT TO THE GENERAL AGGREGATE LIMIT)		49.368	316.00
		Products/Completed Operations	
		Rate	Premium



Policy Number:
CMPMO2000020015

SCHEDULE OF CLASSIFICATIONS

Named Insured:
BRADFORD PROPERTIES LLC
Agent Name:
SUNSTAR INSURANCE GROUP LLC DBA LAKENAN

Effective Date: 04-04-23
12:01 A.M. Standard Time
Agent Number:
33092-

Code Number: 61217	Premium Basis	Premises/Operations	
Location Number: 009/001	7,640	Rate	Premium
Classification: BUILDINGS OR PREMISES - BANK OR OFFICE - MERCANTILE OR MANUFACTURING (LESSOR'S RISK ONLY) - MAINTAINED BY THE INSURED - OTHER THAN NOT-FOR-PROFIT (PRODUCTS- COMPLETED OPERATIONS ARE SUBJECT TO THE GENERAL AGGREGATE LIMIT)		49.368	377.00
		Products/Completed Operations	
		Rate	Premium

Code Number: 61217	Premium Basis	Premises/Operations	
Location Number: 010/001	4,000	Rate	Premium
Classification: BUILDINGS OR PREMISES - BANK OR OFFICE - MERCANTILE OR MANUFACTURING (LESSOR'S RISK ONLY) - MAINTAINED BY THE INSURED - OTHER THAN NOT-FOR-PROFIT (PRODUCTS- COMPLETED OPERATIONS ARE SUBJECT TO THE GENERAL AGGREGATE LIMIT)		49.368	197.00
		Products/Completed Operations	
		Rate	Premium

Code Number: 49451	Premium Basis	Premises/Operations	
Location Number: 011/001	1	Rate	Premium
Classification: VACANT LAND - OTHER THAN NOT-FOR-PROFIT (PRODUCTS-COMPLETED OPERATIONS ARE SUBJECT TO THE GENERAL AGGREGATE LIMIT)		2.028	2.00
		Products/Completed Operations	
		Rate	Premium

Code Number: 92100	Premium Basis	Premises/Operations	
Location Number:	10	Rate	Premium
Classification: EMPLOYEE BENEFITS			151.00
		Products/Completed Operations	
		Rate	Premium



Policy Number:
CMPMO2000020015

SCHEDULE OF CLASSIFICATIONS

Named Insured:
BRADFORD PROPERTIES LLC
Agent Name:
SUNSTAR INSURANCE GROUP LLC DBA LAKENAN

Effective Date: 04-04-23
12:01 A.M. Standard Time
Agent Number:
33092-

Code Number:	Premium Basis	Premises/ Operations	
Location Number:		Rate	Premium
Classification:			
		Products/ Completed Operations	
		Rate	Premium

Code Number:	Premium Basis	Premises/ Operations	
Location Number:		Rate	Premium
Classification:			
		Products/ Completed Operations	
		Rate	Premium

Code Number:	Premium Basis	Premises/ Operations	
Location Number:		Rate	Premium
Classification:			
		Products/ Completed Operations	
		Rate	Premium

Code Number:	Premium Basis	Premises/ Operations	
Location Number:		Rate	Premium
Classification:			
		Products/ Completed Operations	
		Rate	Premium