

Information:

Drawer: Accounts Payable - Invoices

Vendor Number: 1724636

Vendor Name: Windy City Scoop Shop LLC DBA Ben & Jer

Invoice Number: cONTRACT5127

Invoice Date: 8/13/2024

PO Number: P0013272

Check Number: E0103376

Check Amount: \$ 3,305.00

Check Date: 09/24/2024

Voucher Number: V0852323

Document Type: AP Invoice

Document Below

PO #13272



Catering Invoice

Quote Date: 8/13/2024

Contract #: 5127
Contact Name: Mary Andersen Event Date: August 19th, 2024
Contact Phone: 630-942-2739 Service Time: 11:00am - 1:30pm
Company Name: COD Event Type: Ice Cream Cup Party
Address: 425 Fawell Blvd. Event Date: August 20th, 2024
Billing City: Glen Ellyn Service Time: 11:00am - 1:30pm
Billing State: IL
Zip Code: 60137 Zip Code:
Contact Email: andersenm586@cod.ed Minimum Serv 600 each day

Party Type:

Party Description & Services	Unit Price	Quantity	Cost
8/19 Small Ice Cream Cup (2 scoops each)	\$ 6.50	600	\$ 3,900.00
8/20 Small Ice Cream Cup (2 scoops each)	\$ 6.50	600	\$ 3,900.00
School Discount of \$2.00 / serving			\$ (2,400.00)
510 Serving Credit for unused ice cream	\$ (4.50)	510	\$ (2,295.00)
			\$ -
Ice Cream Truck, Staff, Insurance, Mileage \$100/day			\$ 200.00
Total			
Total Invoice Amount:			\$ 3,305.00
Deposit:			
Total Due:			\$ -

NET30

We accept checks or credit cards.
Please make checks payable to:
Ben & Jerrys Naperville
Please include Contract # on Check.

Please remit payment to the following address:

Ben & Jerrys Naperville
120 Water Street Suite 106
Naperville, IL 60540

Additional fees for quantities served over the contracted amount, time and any additional expenses incurred at the event will be invoiced separately. Service includes 1.50 hours of service 20 minute set up and 20 minute take down. We accept checks or credit card payments. There is a \$35.00 fee for returned checks.

Thank you for your business! We look forward to serving you again in the future.

"Rangel Gutierrez, Jacqueline" <rangelj7781@cod.edu>

"Rangel Gutierrez, Jacqueline" <rangelj7781@cod.edu>

Mon, Sep 23, 2024 at 04:37 PM UTC

CC:

BCC:

Jacqueline Rangel

Office of Student Life

Front Desk Specialist

College of DuPage

425 Fawell Blvd. Glen Ellyn, IL 60137

630.942.3733 | SSC 1217| rangelj7781@cod.edu

1 attachment

Ben Jerrys Catering Mary Andersen Aug 19th 20th 2024 updated 080132024.pdf

College of DuPage

FOOD SERVICE WAIVER REQUEST FORM

Today's Date: _____

Type of Group: _____
(Faculty/Staff/Student/Community)

Date of Event: _____

Time of Event: _____

Your Name: _____

Name of Group: _____

Name of Contact Person: _____

Phone Number: _____

Address: _____

Name & Description of Event: _____

Description of Food/Beverage Needs:

What portion of the needs listed above can be provided by Dining Services?

Explain the reason why Dining Services cannot meet all of your needs:

All outside caterers to be utilized must submit one month prior to the event, a copy of the following articles:

1) County Health Department permit, **2)** State or Federal sanitation certification, permit or license, **3)** Certificate of insurance maintained by the caterer listing the College as the certificate holder, an additional insured, and must be accompanied by an endorsement page. Any certificate of liability insurance not meeting these requirements must be approved by Risk Management. This approval must be included with the waiver, **4)** Business License, and **5)** Menu, portion, and pricing quotation for the event.

All beverages served, sold, distributed, supplied or donated in connection with any event at College of DuPage shall be exclusively brands distributed by Pepsi-Cola unless specifically authorized in writing by the Director of Business Affairs.

All expenditures for outside caterers must be contracted through an authorized purchase order prior to the event. A copy of the approved waiver form must be submitted with the requisition. Expenses for non-perishable food (not requiring heating or chilling for health reasons) that do not exceed \$400 per event are exempt from food waivers.

(For Dining Services Use Only)

Approved:

Denied:

Comments:

Approved by L. Konicek via 8.15.24 email

Signature of Catering Manager

Signature of Director Business Affairs

02/20/23

DuPage County Health Department

Environmental Health Services

LICENSE/PERMIT

to operate an Annual Category II Food Establishment issued to:

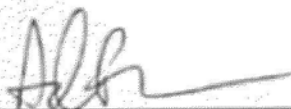
**BEN & JERRYS
120 WATER ST STE 106
NAPERVILLE, IL 60540**

PERMIT NUMBER: PT0034758

EXPIRATION DATE: 4/30/2025

This License is to be posted at all times in a location visible to patrons.

The responsibility for maintaining the License rests with the operator. This license is not transferable.



Adam Forker
Executive Director



**DUPAGE COUNTY
HEALTH DEPARTMENT**

Everyone. Everywhere. Everyday

ServSafe® CERTIFICATION

THOMAS OTOOLE III

for successfully completing the standards set forth for the ServSafe® Food Protection Manager Certification Examination, which is accredited by the American National Standards Institute (ANSI)–Conference for Food Protection (CFP).

20736671

CERTIFICATE NUMBER

6/29/2021

DATE OF EXAMINATION

Local laws apply. Check with your local regulatory agency for recertification requirements.

10752

EXAM FORM NUMBER

6/29/2026

DATE OF EXPIRATION



#0655

A handwritten signature in black ink, reading 'Sherman L. Brown'.

Sherman Brown
Executive Vice President, National Restaurant Association Solutions





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/18/2024

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 have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION** IS **WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Arthur J. Gallagher Risk Management Services, LLC 2850 Golf Road Rolling Meadows IL 60008	CONTACT NAME: Client Service Team PHONE (A/C, No, Ext): 833-391-6524 E-MAIL ADDRESS: Select_Certificates@ajg.com FAX (A/C, No):
INSURED Windy City Scoop Shop, LLC DBA Ben & Jerrys 950 Leeward Ln Pingree Grove IL 60140	INSURER(S) AFFORDING COVERAGE INSURER A: Allmerica Financial Benefit Insurance Co INSURER B: Citizens Insurance Company of America INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES**CERTIFICATE NUMBER:** 427203985**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.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	OBCH510543	3/1/2024	3/1/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		OBCH510543	3/1/2024	3/1/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		OBCH510543	3/1/2024	3/1/2025	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000 \$
A	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	W2CH510538	3/1/2024	3/1/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
B	Employment Practices Liability Data Breach Coverage		OBCH510543	3/1/2024	3/1/2025	Limit / Deductible \$25,000 / \$5,000 Limit / Deductible \$10,000 / \$1,000

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

391-1006 08 16 Businessowners Liability Special Broadening Endorsement

The college of Dupage is included as an Additional Insured as respects General Liability, pursuant to and subject to the policy's terms, definitions, conditions and exclusions.

CERTIFICATE HOLDER**CANCELLATION**The college of Dupage
425 Falwell Blvd
Glen Ellen IL 60137

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

AUTHORIZED REPRESENTATIVE

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

BUSINESSOWNERS LIABILITY SPECIAL BROADENING ENDORSEMENT

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS COVERAGE FORM

SUMMARY OF COVERAGES	Limits	Page
1. Additional Insured by Contract, Agreement or Permit	Included	1
2. Additional Insured - Broad Form Vendors	Included	2
3. Alienated Premises	Included	3
4. Broad Form Property Damage - Borrowed Equipment, Customers Goods and Use of Elevators	Included	3
5. Incidental Malpractice (Employed Nurses, EMT's and Paramedics)	Included	3
6. Personal and Advertising Injury - Broad Form	Included	4
7. Product Recall Expense	Included	4
Product Recall Expense Each Occurrence Limit	\$25,000 Occurrence	5
Product Recall Expense Aggregate Limit	\$50,000 Aggregate	5
Product Recall Deductible	\$500	5
8. Unintentional Failure to Disclose Hazards	Included	6
9. Unintentional Failure to Notify	Included	6

This endorsement amends coverages provided under the Businessowners Coverage Form through new coverages and broader coverage grants. This coverage is subject to the provisions applicable to the Businessowners Coverage Form, except as provided below.

The following changes are made to **SECTION II - LIABILITY**:

1. Additional Insured by Contract, Agreement or Permit

The following is added to **SECTION II - LIABILITY, C. Who Is An Insured**:

Additional Insured by Contract, Agreement or Permit

- a. Any person or organization with whom you agreed in a written contract, written agreement or permit to add such person or organization as an additional insured on your policy is an additional insured only with respect to liability for "bodily injury", "property damage", or "personal and advertising injury" caused, in whole or in part, by your acts or omissions, or the acts or omissions of those acting on your behalf, but only with respect to:

- (1) "Your work" for the additional insured(s) designated in the contract, agreement or permit;

- (2) Premises you own, rent, lease or occupy; or

- (3) Your maintenance, operation or use of equipment leased to you.

- b. The insurance afforded to such additional insured described above:

- (1) Only applies to the extent permitted by law; and

- (2) Will not be broader than the insurance which you are required by the contract, agreement or permit to provide for such additional insured.

- (3) Applies on a primary basis if that is required by the written contract, written agreement or permit.

- (4) Will not be broader than coverage provided to any other insured.

- (5) Does not apply if the "bodily injury", "property damage" or "personal and advertising injury" is otherwise excluded from coverage under this Coverage Part, including any endorsements thereto.

c. This provision does not apply:

- (1) Unless the written contract or written agreement was executed or permit was issued prior to the "bodily injury", "property damage", or "personal injury and advertising injury".
- (2) To any person or organization included as an insured by another endorsement issued by us and made part of this Coverage Part.
- (3) To any lessor of equipment:
 - (a) After the equipment lease expires; or
 - (b) If the "bodily injury", "property damage", "personal and advertising injury" arises out of sole negligence of the lessor.
- (4) To any:
 - (a) Owners or other interests from whom land has been leased if the "occurrence" takes place or the offense is committed after the lease for the land expires; or
 - (b) Managers or lessors of premises if:
 - (i) The "occurrence" takes place or the offense is committed after you cease to be a tenant in that premises; or
 - (ii) The "bodily injury", "property damage", "personal injury" or "advertising injury" arises out of structural alterations, new construction or demolition operations performed by or on behalf of the manager or lessor.
- (5) To "bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of or the failure to render any professional services.

This exclusion applies even if the claims against any insured allege negligence or other wrongdoing in the supervision, hiring, employment, training or monitoring of others by that insured, if the "occurrence" which caused the "bodily injury" or "property damage" or the offense which caused the "personal and advertising injury" involved the rendering of or failure to render any professional services by or for you.

d. With respect to the insurance afforded to these additional insureds, the following is added to **SECTION II - LIABILITY, D. Liability and Medical Expense Limits of Insurance**:

The most we will pay on behalf of the additional insured for a covered claim is the lesser of the amount of insurance:

1. Required by the contract, agreement or permit described in Paragraph a.; or
2. Available under the applicable Limits of Insurance shown in the Declarations.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations

- e. All other insuring agreements, exclusions, and conditions of the policy apply.

2. **Additional Insured - Broad Form Vendors**

The following is added to **SECTION II - LIABILITY, C. Who Is An Insured**:

Additional Insured - Broad Form Vendors

- a. Any person or organization that is a vendor with whom you agreed in a written contract or written agreement to include as an additional insured under this Coverage Part is an insured, but only with respect to liability for "bodily injury" or "property damage" arising out of "your products" which are distributed or sold in the regular course of the vendor's business.
- b. The insurance afforded to such vendor described above:
 - (1) Only applies to the extent permitted by law;
 - (2) Will not be broader than the insurance which you are required by the contract or agreement to provide for such vendor;
 - (3) Will not be broader than coverage provided to any other insured; and
 - (4) Does not apply if the "bodily injury", "property damage" or "personal and advertising injury" is otherwise excluded from coverage under this Coverage Part, including any endorsements thereto
- c. With respect to insurance afforded to such vendors, the following additional exclusions apply:

The insurance afforded to the vendor does not apply to:

 - (1) "Bodily injury" or "property damage" for which the vendor is obligated to pay damages by reasons of the assumption of liability in a contract or agreement. This exclusion does not apply to liability for damages that the insured would have in the absence of the contract or agreement;
 - (2) Any express warranty unauthorized by you;

- (3) Any physical or chemical change in the product made intentionally by the vendor;
 - (4) Repackaging, unless unpacked solely for the purpose of inspection, demonstration, testing, or the substitution of parts under instruction from the manufacturer, and then repackaged in the original container;
 - (5) Any failure to make such inspection, adjustments, tests or servicing as the vendor has agreed to make or normally undertakes to make in the usual course of business in connection with the sale of the product;
 - (6) Demonstration, installation, servicing or repair operations, except such operations performed at the vendor's premises in connection with the sale of the product;
 - (7) Products which, after distribution or sale by you, have been labeled or relabeled or used as a container, part or ingredient of any other thing or substance by or for the vendor;
 - (8) "Bodily injury" or "property damage" arising out of the sole negligence of the vendor for its own acts or omissions or those of its employees or anyone else acting on its behalf. However, this exclusion does not apply to:
 - (a) The exceptions contained within the exclusion in subparagraphs (4) or (6) above; or
 - (b) Such inspections, adjustments, tests or servicing as the vendor has agreed to make or normally undertakes to make in the usual course of business, in connection with the distribution or sale of the products.
 - (9) "Bodily injury" or "property damage" arising out of an "occurrence" that took place before you have signed the contract or agreement with the vendor.
 - (10) To any person or organization included as an insured by another endorsement issued by us and made part of this Coverage Part.
 - (11) Any insured person or organization, from whom you have acquired such products, or any ingredient, part or container, entering into, accompanying or containing such products.
- d. With respect to the insurance afforded to these vendors, the following is added to **SECTION II - LIABILITY, D. Liability and Medical Expense Limits of Insurance:**
- The most we will pay on behalf of the vendor for a covered claim is the lesser of the amount of insurance:
1. Required by the contract or agreement described in Paragraph a.; or
 2. Available under the applicable Limits of Insurance shown in the Declarations;
- This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.
- 3. Alienated Premises**
- SECTION II - LIABILITY, B. Exclusions, 1. Applicable To Business Liability Coverage k. Damage to Property,** paragraph (2) is replaced by the following:
- (2) Premises you sell, give away or abandon, if the "property damage" arises out of any part of those premises and occurred from hazards that were known by you, or should have reasonably been known by you, at the time the property was transferred or abandoned.
- 4. Broad Form Property Damage - Borrowed Equipment, Customers Goods, Use of Elevators**
- a. The following is added to **SECTION II - LIABILITY, B. Exclusions, 1. Applicable To Business Liability Coverage, k. Damage to Property:**
- Paragraph (4) does not apply to "property damage" to borrowed equipment while at a jobsite and not being used to perform operations.
- Paragraph (3), (4) and (6) do not apply to "property damage" to "customers goods" while on your premises nor to the use of elevators.
- b. For the purposes of this endorsement, the following definition is added to **SECTION II - LIABILITY, F. Liability and Medical Expenses Definitions:**
1. "Customers goods" means property of your customer on your premises for the purpose of being:
 - a. Worked on; or
 - b. Used in your manufacturing process.
 - c. The insurance afforded under this provision is excess over any other valid and collectible property insurance (including deductible) available to the insured whether primary, excess, contingent or on any other basis.
- 5. Incidental Malpractice - Employed Nurses, EMT's and Paramedics**
- SECTION II - LIABILITY, C. Who Is An Insured,** paragraph 2.a.(1)(d) does not apply to a nurse,

emergency medical technician or paramedic employed by you if you are not engaged in the business or occupation of providing medical, paramedical, surgical, dental, x-ray or nursing services.

6. Personal Injury - Broad Form

a. **SECTION II - LIABILITY, B. Exclusions, 2. Additional Exclusions Applicable only to "Personal and Advertising Injury"**, paragraph e. is deleted.

b. **SECTION II - LIABILITY, F. Liability and Medical Expenses Definitions, 14. "Personal and advertising injury"**, paragraph b. is replaced by the following:

b. Malicious prosecution or abuse of process.

c. The following is added to **SECTION II - LIABILITY, F. Liability and Medical Expenses Definitions, Definition 14. "Personal and advertising injury"**:

"Discrimination" (unless insurance thereof is prohibited by law) that results in injury to the feelings or reputation of a natural person, but only if such "discrimination" is:

(1) Not done intentionally by or at the direction of:

(a) The insured;

(b) Any officer of the corporation, director, stockholder, partner or member of the insured; and

(2) Not directly or indirectly related to an "employee", not to the employment, prospective employment or termination of any person or persons by an insured.

d. For purposes of this endorsement, the following definition is added to **SECTION II - LIABILITY, F. Liability and Medical Expenses Definitions**:

1. "Discrimination" means the unlawful treatment of individuals based upon race, color, ethnic origin, gender, religion, age, or sexual preference. "Discrimination" does not include the unlawful treatment of individuals based upon developmental, physical, cognitive, mental, sensory or emotional impairment or any combination of these.

e. This coverage does not apply if liability coverage for "personal and advertising injury" is excluded either by the provisions of the Coverage Form or any endorsement thereto.

7. Product Recall Expense

a. **SECTION II - LIABILITY, B. Exclusions, 1. Applicable To Business Liability Coverage,**

o. Recall of Products, Work or Impaired Property is replaced by the following:

o. Recall of Products, Work or Impaired Property

Damages claimed for any loss, cost or expense incurred by you or others for the loss of use, withdrawal, recall, inspection, repair, replacement, adjustment, removal or disposal of:

(1) "Your product";

(2) "Your work"; or

(3) "Impaired property";

If such product, work or property is withdrawn or recalled from the market or from use by any person or organization because of a known or suspected defect, deficiency, inadequacy or dangerous condition in it, but this exclusion does not apply to "product recall expenses" that you incur for the "covered recall" of "your product".

However, the exception to the exclusion does not apply to "product recall expenses" resulting from:

(4) Failure of any products to accomplish their intended purpose;

(5) Breach of warranties of fitness, quality, durability or performance;

(6) Loss of customer approval, or any cost incurred to regain customer approval;

(7) Redistribution or replacement of "your product" which has been recalled by like products or substitutes;

(8) Caprice or whim of the insured;

(9) A condition likely to cause loss of which any insured knew or had reason to know at the inception of this insurance;

(10) Asbestos, including loss, damage or clean up resulting from asbestos or asbestos containing materials; or

(11) Recall of "your products" that have no known or suspected defect solely because a known or suspected defect in another of "your products" has been found.

b. The following is added to **SECTION II - LIABILITY, C. Who Is An Insured**, paragraph 3.b.:

"Product recall expense" arising out of any withdrawal or recall that occurred before you acquired or formed the organization.

- c. The following is added to **SECTION II - LIABILITY, D. Liability and Medical Expenses Limits of Insurance**:

Product Recall Expense Limits of Insurance

- a. The Limits of Insurance shown in the SUMMARY OF COVERAGES of this endorsement and the rules stated below fix the most that we will pay under this Product Recall Expense Coverage regardless of the number of:

- (1) Insureds;
- (2) "Covered Recalls" initiated; or
- (3) Number of "your products" withdrawn.

- b. The Product Recall Expense Aggregate Limit is the most that we will reimburse you for the sum of all "product recall expenses" incurred for all "covered recalls" initiated during the policy period.

- c. The Product Recall Each Occurrence Limit is the most we will pay in connection with any one defect or deficiency.

- d. All "product recall expenses" in connection with substantially the same general harmful condition will be deemed to arise out of the same defect or deficiency and considered one "occurrence".

- e. Any amount reimbursed for "product recall expenses" in connection with any one "occurrence" will reduce the amount of the Product Recall Expense Aggregate Limit available for reimbursement of "product recall expenses" in connection with any other defect or deficiency.

- f. If the Product Recall Expense Aggregate Limit has been reduced by reimbursement of "product recall expenses" to an amount that is less than the Product Recall Expense Each Occurrence Limit, the remaining Aggregate Limit is the most that will be available for reimbursement of "product recall expenses" in connection with any other defect or deficiency.

g. Product Recall Deductible

We will only pay for the amount of "product recall expenses" which are in excess of the \$500 Product Recall Deductible. The Product Recall Deductible applies separately to each "covered recall". The limits of insurance will not be reduced by the amount of this deductible.

We may, or will if required by law, pay all or any part of any deductible amount, if applicable. Upon notice of our payment

of a deductible amount, you shall promptly reimburse us for the part of the deductible amount we paid.

The Product Recall Expense Limits of Insurance apply separately to each consecutive annual period and to any remaining period of less than 12 months, starting with the beginning of the policy period shown in the Declarations, unless the policy period is extended after issuance for an additional period of less than 12 months. In that case, the additional period will be deemed part of the last preceding period for the purposes of determining the Limits of Insurance.

- d. The following is added to **SECTION II - LIABILITY, E. Liability and Medical Expense General Conditions, 2. Duties in the Event of Occurrence, Offense, Claim or Suit**:

You must see to it that the following are done in the event of an actual or anticipated "covered recall" that may result in "product recall expense":

- (1) Give us prompt notice of any discovery or notification that "your product" must be withdrawn or recalled. Include a description of "your product" and the reason for the withdrawal or recall;

- (2) Cease any further release, shipment, consignment or any other method of distribution of like or similar products until it has been determined that all such products are free from defects that could be a cause of loss under this insurance.

- e. For the purpose of this endorsement, the following definitions are added to **SECTION II - LIABILITY, F. Liability and Medical Expenses Definitions**:

1. "Covered recall" means a recall made necessary because you or a government body has determined that a known or suspected defect, deficiency, inadequacy, or dangerous condition in "your product" has resulted or will result in "bodily injury" or "property damage".

2. "Product recall expense(s)" means:

- a. Necessary and reasonable expenses for:

- (1) Communications, including radio or television announcements or printed advertisements including stationary, envelopes and postage;

- (2) Shipping the recalled products from any purchaser, distributor or user to the place or places designated by you;
 - (3) Remuneration paid to your regular "employees" for necessary overtime;
 - (4) Hiring additional persons, other than your regular "employees";
 - (5) Expenses incurred by "employees" including transportation and accommodations;
 - (6) Expenses to rent additional warehouse or storage space;
 - (7) Disposal of "your product", but only to the extent that specific methods of destruction other than those employed for trash discarding or disposal are required to avoid "bodily injury" or "property damage" as a result of such disposal,
you incur exclusively for the purpose of recalling "your product"; and
 - b. Your lost profit resulting from such "covered recall".
- f. This Product Recall Expense Coverage does not apply:
- (1) If the "products - completed operations hazard" is excluded from coverage under this Coverage Part including any endorsement thereto; or
 - (2) To "product recall expense" arising out of any of "your products" that are otherwise excluded from coverage under this Coverage Part including endorsements thereto.
- 8. Unintentional Failure to Disclose Hazards**
The following is added to **SECTION II - LIABILITY, E. Liability and Medical Expenses General Conditions:**
Representations
We will not disclaim coverage under this Coverage Part if you fail to disclose all hazards existing as of the inception date of the policy provided such failure is not intentional.
- 9. Unintentional Failure to Notify**
The following is added to **SECTION II - LIABILITY, E. Liability and Medical Expenses General Conditions, 2. Duties in the Event of Occurrence, Offense, Claim or Suit:**
Your rights afforded under this Coverage Part shall not be prejudiced if you fail to give us notice of an "occurrence", offense, claim or "suit", solely due to your reasonable and documented belief that the "bodily injury", "property damage" or "personal and advertising injury" is not covered under this Policy.

ALL OTHER TERMS, CONDITIONS, AND EXCLUSIONS REMAIN UNCHANGED.

Date of this notice: 02-24-2020

Employer Identification Number:
84-4847350

Form: SS-4

Number of this notice: CP 575 G

WINDY CITY SCOOP SHOP LLC
THOMAS O TOOLE III SOLE MBR
950 LEEWARD LN
PINGREE GROVE, IL 60140

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 84-4847350. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

A limited liability company (LLC) may file Form 8832, *Entity Classification Election*, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, *Election by a Small Business Corporation*. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. **This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.** You may give a copy of this document to anyone asking for proof of your EIN.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

Your name control associated with this EIN is WIND. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.



Ben & Jerrys Naperville <benandjerrysnaperville@gmail.com>

Naperville Citizen Support Center :: W241936-041724

1 message

City of Naperville Citizen Support <napervilleil@mycusthelp.net>

Thu, Apr 18, 2024 at 5:00 PM

To: "benandjerrysnaperville@gmail.com" <benandjerrysnaperville@gmail.com>

--- Please respond above this line ---

Your Question/Concern:

Good evening,

Can I please get a copy of our Naperville business license? If this could be emailed to me at benandjerrysnaperville@gmail.com that would be appreciated. If this is not possible, I can stop by the office as it is a block from our store.

Thank you,

Tom

Our Response:

Hello,

Thank you for contacting the City of Naperville. Naperville doesn't have business licenses. Is there another form of documentation or paperwork that you're looking for or that the City can provide?

Thank you,

Michelle Donfrio
City of Naperville
Communications Specialist

Thank-you for using the City of Naperville Citizen Support Center.

Track this issue online at:

https://napervilleil.mycusthelp.com/WEBAPP/_rs/RequestEdit.aspx?rid=241936&coid=

Confidentiality Notice

This e-mail and any files or documents transmitted with it are confidential and are intended solely for the use of the individual or entity to which they were addressed. This e-mail and any attached materials constitute claims, loss or risk management information, communications and/or advice and are therefore privileged from disclosure. If you are not the intended recipient of this e-mail and the information attached hereto, be advised that you have received this e-mail in error and that any use, dissemination, forwarding, printing or copying of this e-mail or any attached material is strictly prohibited. If you have received this e-mail in error, please contact/reply to the sender of this message immediately.

OUR FLAVORS

Flavor choices may vary. Please check menu board for today's euphoric selections.

ICE CREAM

Cherry Garcia® (GF)

Cherry ice cream with cherries & fudge flakes.

Chocolate (GF)

Chocolate ice cream.

Chocolate Chip Cookie Dough

Vanilla ice cream with gobs of chocolate chip cookie dough.

Chocolate Fudge Brownie

Chocolate ice cream with fudge brownies.

Chocolate PB Chunk (Peanuts) (GF)

Chocolate Peanut Butter ice cream with peanut butter swirls & fudge flakes

Chocolate Therapy®

Chocolate ice cream with chocolate cookies & swirls of chocolate pudding ice cream.

Chunky Monkey®* (Walnuts) (GF)

Banana ice cream with fudge chunks & walnuts.

Churray for Churros!™

Buttery cinnamon ice cream with churro pieces and crunchy cinnamon cookies swirls.

Coconut Seven Layer Bar* (Walnuts, Coconut)

Coconut ice cream with coconut & fudge flakes, walnuts & swirls of graham cracker & butterscotch.

Coffee, Coffee BuzzBuzzBuzz!® (GF)

Coffee ice cream with espresso bean fudge chunks.

Dirt Cake

Vanilla Pudding Ice Cream with Chocolate Sandwich Cookies & Chocolate Cookie Swirls

Half Baked®

Chocolate & Vanilla ice creams mixed with gobs of chocolate chip cookie dough & fudge brownies

Lights! Caramel! Action!™

Vanilla ice cream with Salted Caramel Swirls, Graham Cracker Swirls & Gobs of Chocolate Chip Cookie Dough

NEW! Impretzively Fudged™

Chocolate ice cream with fudge-covered pretzel pieces and pretzel swirls

Marshmallow Sky

Marshmallow ice cream with marshmallow swirls & gobs of chocolate chip cookie dough & chocolate chocolate chip cookie dough.

Milk & Cookies

Vanilla ice cream with a chocolate cookie swirl, chocolate chip & chocolate chocolate chip cookie pieces.

Mint Chocolate Chunk (GF)

Mint ice cream & fudge chunks.

Oatmeal Dream Pie™ (GF)

Oatmeal crème pie ice cream with gluten-free oatmeal cookies & marshmallow swirls

NEW! PB S'more

Toasted marshmallow ice cream with peanut butter cups, graham cracker pieces, and marshmallow swirls

Salted Caramel Blondie

Sweet cream ice cream with blonde brownies & a salted caramel swirl.

Strawberry (GF)

Strawberry ice cream with chunks of strawberries.

Strawberry Cheesecake

Strawberry cheesecake ice cream with strawberries & a thick graham cracker swirl.

Sweet Cream & Cookies

Sweet cream ice cream with chocolate sandwich cookies.

The Tonight Dough® Starring Jimmy Fallon (Peanuts)

Caramel & chocolate ice creams with chocolate cookie swirls & gobs of chocolate chip cookie dough & peanut butter cookie dough.

Vanilla (GF)

Vanilla ice cream.



But wait! There's more!

Flavor choices may vary. Please check menu board for today's euphoric selections.

NON-DAIRY FROZEN DESSERT

New in 2024! All Non-Dairy Frozen Dessert will be transitioning to having an oat base. Any current flavors will be transitioning.

Chocolate Chip Cookie Dough (made with Almond Milk)* (Almonds, Coconut)
Vanilla with gobs of chocolate chip cookie dough & fudge flakes. (V)

Colin Kaepernick's Change The Whirled™ **Caramel Cookie Graham (made with Sunflower Butter)**

Caramel with fudge chips, graham cracker swirls & chocolate cookie swirls. (V)

Strawberry Cheezecake (made with Oat Milk)

Strawberry cheesecake non-dairy frozen dessert with a thick graham cracker swirl. (V)

SORBET

Berry Berry Extraordinary® (GF)
Swirls of blueberry sorbet & raspberry sorbet.

Lemonade (GF)
Lemon sorbet.

FOOD ALLERGY CONCERNS? We care.

Let your scooper know so that we can assist you in your selection & take additional steps that may be necessary to serve you safely.

Ben & Jerry's is committed to sourcing Fairtrade certified ingredients for all of our products.

All ice cream, frozen yogurt & Moo-Phoria™ are manufactured Kosher.

All sorbet & non-dairy is manufactured Kosher on dairy equipment.

(V) = Ben & Jerry's Non-Dairy Frozen Dessert flavors are manufactured vegan and certified by Vegan Action.

* = Manufactured on shared equipment.

(GF) = Manufactured Certified Gluten-Free by GFCO. For more information ask a team member for our Gluten Free Flavor Information sheet.

The fudgy brownies we use in our ice cream come from New York's Greyston Bakery, that provides jobs & training to low-income residents of Yonkers, NY.

The first flavor ever created by Ben and Jerry was Vanilla. Gasp!

We source Non-GMO ingredients, Fairtrade cocoa, sugar & vanilla, eggs from cage-free hens & milk & cream from happy cows.

Ben & Jerry's was originally going to be a bagel company... thank goodness that didn't work out!

Our Chocolate Chip Cookie Dough ice cream is a result of a customer's anonymous suggestion.





Catering Invoice

Quote Date: 8/13/2024

Contract #: 5127
 Contact Name: Mary Andersen Event Date: August 19th, 2024
 Contact Phone: 630-942-2739 Service Time: 11:00am - 1:30pm
 Company Name: COD Event Type: Ice Cream Cup Party
 Address: 425 Fawell Blvd. Event Date: August 20th, 2024
 Billing City: Glen Ellyn Service Time: 11:00am - 1:30pm
 Billing State: IL
 Zip Code: 60137 Zip Code:
 Contact Email: andersenm586@cod.ed Minimum Serv 600 each day

Party Type:

Party Description & Services	Unit Price	Quantity	Cost
8/19 Small Ice Cream Cup (2 scoops each)	\$ 6.50	600	\$ 3,900.00
8/20 Small Ice Cream Cup (2 scoops each)	\$ 6.50	600	\$ 3,900.00
School Discount of \$2.00 / serving			\$ (2,400.00)
510 Serving Credit for unused ice cream	\$ (4.50)	510	\$ (2,295.00)
			\$ -
Ice Cream Truck, Staff, Insurance, Mileage \$100/day			\$ 200.00
Total			
Total Invoice Amount:			\$ 3,305.00
Deposit:			
Total Due:			\$ -

NET30

<p>We accept checks or credit cards. Please make checks payable to: Ben & Jerrys Naperville Please include Contract # on Check.</p>	<p>Please remit payment to the following address:</p> <p>Ben & Jerrys Naperville 120 Water Street Suite 106 Naperville, IL 60540</p>
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Additional fees for quantities served over the contracted amount, time and any additional expenses incurred at the event will be invoiced separately. Service includes 1.50 hours of service 20 minute set up and 20 minute take down. We accept checks or credit card payments. There is a \$35.00 fee for returned checks.

Thank you for your business! We look forward to serving you again in the future.