



ROBERT L. QUINN  
COMMISSIONER

## State of New Hampshire

DEPARTMENT OF SAFETY  
JAMES H. HAYES BLDG. 33 HAZEN DR.  
CONCORD, N.H. 03305  
(603) 271-2791

EDDIE EDWARDS  
ASSISTANT COMMISSIONER

STEVEN R. LAVOIE  
ASSISTANT COMMISSIONER

July 10, 2023

His Excellency, Governor Christopher T. Sununu  
and the Honorable Executive Council  
State House  
Concord, NH 03301

### REQUESTED ACTION

Pursuant to RSA 21-P:12-a(c), authorize the Department of Safety to enter into a three-year agreement with Advanced Language Services (VC#206835-B001) in the amount of \$31,620.00 to provide transcribing services for investigations and hearings. Effective upon Governor and Council approval through June 30, 2026. 61.29% Agency Income (Fees) and 38.71% Revolving Funds.

Funds are available in FY 2024, and anticipated to be available in SFY2025 and SFY2026, contingent upon the availability and continued appropriation of funds in future operating budgets, with the authority to adjust encumbrances in each of the State fiscal years through the Budget Office if needed and justified.

02-23-23-237010-40650000 – Dept. of Safety – FSTEMS – Admin	<u>SFY 2024</u>	<u>SFY 2025</u>	<u>SFY 2026</u>
103-502664 Contracts for OP Services	\$4,080.00	\$4,080.00	\$4,080.00
Activity Code: 2370			
02-23-23-231010-30820000 - Dept. of Safety - Office of Comm - Hearings Transcribe			
103-502664 Contracts for OP Services	<u>\$6,460.00</u>	<u>\$6,460.00</u>	<u>\$6,460.00</u>
Activity Code: 2380			
<b>TOTAL:</b>	<b>\$10,540.00</b>	<b>\$10,540.00</b>	<b>\$10,540.00</b>

### EXPLANATION

The contract provides transcribing services of recordings used in investigations and hearings for the Department of Safety's Division of Fire Standards & Training and Emergency Medical Services and the Bureau of Hearings. The Bureau of Hearings requests original transcripts pursuant to RSA 541-A:31, VII and the Division of Fire Standards & Training and Emergency Medical Services only requires original transcripts. The Division of Fire Standards & Training and Emergency Medical Services posted the bid on the State's Purchase and Property website from March 28, 2023 through April 18, 2023. Three vendors submitted bids, however, Advanced Language Services was the lowest bidder for the certified original transcripts required by The Bureau of Hearings and the Division of Fire Standards & Training and Emergency Medical Services.

Respectfully submitted,

Robert L. Quinn  
Commissioner of Safety



**Notice:** This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

**AGREEMENT**  
The State of New Hampshire and the Contractor hereby mutually agree as follows:  
**GENERAL PROVISIONS**

<b>I. IDENTIFICATION</b>	
1.1 State Agency Name Department of Safety, Division of Fire Standards & Training and Emergency Medical Services and Department of Safety, Bureau of Hearings	1.2 State Agency Address 33 Hazen Drive, Concord, New Hampshire 03305
1.3 Contractor Name Advanced Language Services	1.4 Contractor Address 6543 Rolling Creek Drive, Colorado Springs, CO 80924
1.5 Contractor Phone Number 206-742-6477	1.6 Account Unit and Class See Exhibit C
	1.7 Completion Date June 30, 2026
	1.8 Price Limitation Not to exceed \$31,620.00
1.9 Contracting Officer for State Agency Justia Cutting, Director	1.10 State Agency Telephone Number 603-223-4200
1.11 Contractor Signature  Date: 6/23/23	1.12 Name and Title of Contractor Signatory Daniel S. Sabore, Managing Director
1.13 State Agency Signature  Date: 7/16/23	1.14 Name and Title of State Agency Signatory Edyta J. Domian, Deputy Director of Administration
1.15 Approval by the N.H. Department of Administration, Division of Personnel (if applicable) By: _____ Director, On: _____	
1.16 Approval by the Attorney General (Form, Substance and Execution) (if applicable)  On: 7/14/23	
1.17 Approval by the Governor and Executive Council (if applicable) G&C Item number: _____ G&C Meeting Date: _____	

Contractor Initials: DS  
Date: 6/23/23

**2. SERVICES TO BE PERFORMED.** The State of New Hampshire, acting through the agency identified in block 1.1 ("State"), engages contractor identified in block 1.3 ("Contractor") to perform, and the Contractor shall perform, the work or sale of goods, or both, identified and more particularly described in the attached EXHIBIT B which is incorporated herein by reference ("Services").

**3. EFFECTIVE DATE/COMPLETION OF SERVICES.**

3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, if applicable, this Agreement, and all obligations of the parties hereunder, shall become effective on the date the Governor and Executive Council approve this Agreement, unless no such approval is required, in which case the Agreement shall become effective on the date the Agreement is signed by the State Agency as shown in block 1.13 ("Effective Date").

3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed.

3.3 Contractor must complete all Services by the Completion Date specified in block 1.7.

**4. CONDITIONAL NATURE OF AGREEMENT.**

Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds. In no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds by any state or federal legislative or executive action that reduces, eliminates or otherwise modifies the appropriation or availability of funding for this Agreement and the Scope for Services provided in EXHIBIT B, in whole or in part, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to reduce or terminate the Services under this Agreement immediately upon giving the Contractor notice of such reduction or termination. The State shall not be required to transfer funds from any other account or source to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

**5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.**

5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT C which is incorporated herein by reference.

5.2 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8. The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance

hereof, and shall be the only and the complete compensation to the Contractor for the Services.

5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law.

5.4 The State's liability under this Agreement shall be limited to monetary damages not to exceed the total fees paid. The Contractor agrees that it has an adequate remedy at law for any breach of this Agreement by the State and hereby waives any right to specific performance or other equitable remedies against the State.

**6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/EQUAL EMPLOYMENT OPPORTUNITY.**

6.1 In connection with the performance of the Services, the Contractor shall comply with all applicable statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal employment opportunity laws and the Governor's order on Respect and Civility in the Workplace, Executive order 2020-01. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property laws.

6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of age, sex, sexual orientation, race, color, marital status, physical or mental disability, religious creed, national origin, gender identity, or gender expression, and will take affirmative action to prevent such discrimination, unless exempt by state or federal law. The Contractor shall ensure any subcontractors comply with these nondiscrimination requirements.

6.3 No payments or transfers of value by Contractor or its representatives in connection with this Agreement have or shall be made which have the purpose or effect of public or commercial bribery, or acceptance of or acquiescence in extortion, kickbacks, or other unlawful or improper means of obtaining business.

6.4 The Contractor agrees to permit the State or United States access to any of the Contractor's books, records and accounts for the purpose of ascertaining compliance with this Agreement and all rules, regulations and orders pertaining to the covenants, terms and conditions of this Agreement.

**7. PERSONNEL.**

7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.

7.2 The Contracting Officer specified in block 1.9, or any successor, shall be the State's point of contact pertaining to this Agreement.

Contractor Initials *[Signature]*  
Date *6/23/23*

## 8. EVENT OF DEFAULT/REMEDIES.

8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event of Default"):

- 8.1.1 failure to perform the Services satisfactorily or on schedule;
- 8.1.2 failure to submit any report required hereunder; and/or
- 8.1.3 failure to perform any other covenant, term or condition of this Agreement.

8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:

8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) calendar days from the date of the notice; and if the Event of Default is not timely cured, terminate this Agreement, effective two (2) calendar days after giving the Contractor notice of termination;

8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;

8.2.3 give the Contractor a written notice specifying the Event of Default and set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or

8.2.4 give the Contractor a written notice specifying the Event of Default, treat the Agreement as breached, terminate the Agreement and pursue any of its remedies at law or in equity, or both.

## 9. TERMINATION.

9.1 Notwithstanding paragraph 8, the State may, at its sole discretion, terminate the Agreement for any reason, in whole or in part, by thirty (30) calendar days written notice to the Contractor that the State is exercising its option to terminate the Agreement.

9.2 In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall, at the State's discretion, deliver to the Contracting Officer, not later than fifteen (15) calendar days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. In addition, at the State's discretion, the Contractor shall, within fifteen (15) calendar days of notice of early termination, develop and submit to the State a transition plan for Services under the Agreement.

## 10. PROPERTY OWNERSHIP/DISCLOSURE.

10.1 As used in this Agreement, the word "Property" shall mean all data, information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.

10.2 All data and any Property which has been received from the State, or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.

10.3 Disclosure of data, information and other records shall be governed by N.H. RSA chapter 91-A and/or other applicable law. Disclosure requires prior written approval of the State.

11. CONTRACTOR'S RELATION TO THE STATE. In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.

## 12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.

12.1 Contractor shall provide the State written notice at least fifteen (15) calendar days before any proposed assignment, delegation, or other transfer of any interest in this Agreement. No such assignment, delegation, or other transfer shall be effective without the written consent of the State.

12.2 For purposes of paragraph 12, a Change of Control shall constitute assignment. "Change of Control" means (a) merger, consolidation, or a transaction or series of related transactions in which a third party, together with its affiliates, becomes the direct or indirect owner of fifty percent (50%) or more of the voting shares or similar equity interests, or combined voting power of the Contractor, or (b) the sale of all or substantially all of the assets of the Contractor.

12.3 None of the Services shall be subcontracted by the Contractor without prior written notice and consent of the State.

12.4 The State is entitled to copies of all subcontracts and assignment agreements and shall not be bound by any provisions contained in a subcontract or an assignment agreement to which it is not a party.

13. INDEMNIFICATION. The Contractor shall indemnify, defend, and hold harmless the State, its officers, and employees from and against all actions, claims, damages, demands, judgments, fines, liabilities, losses, and other expenses, including, without limitation, reasonable attorneys' fees, arising out of or relating to this Agreement directly or indirectly arising from death, personal injury, property damage, intellectual property infringement, or other claims asserted against the State, its officers, or employees caused by the acts or omissions of negligence, reckless or willful misconduct, or fraud by the Contractor, its employees, agents, or subcontractors. The State shall not be liable for any costs incurred by the Contractor arising under this paragraph 13. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the State's sovereign immunity, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

#### 14. INSURANCE.

14.1 The Contractor shall, at its sole expense, obtain and continuously maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:

14.1.1 commercial general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate or excess; and

14.1.2 special cause of loss coverage form covering all Property subject to subparagraph 10.2 herein, in an amount not less than 80% of the whole replacement value of the Property.

14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.

14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or any successor, a certificate(s) of insurance for all insurance required under this Agreement. At the request of the Contracting Officer, or any successor, the Contractor shall provide certificate(s) of insurance for all renewal(s) of insurance required under this Agreement. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference.

#### 15. WORKERS' COMPENSATION.

15.1 By signing this agreement, the Contractor agrees, certifies and warrants that the Contractor is in compliance with or exempt from, the requirements of N.H. RSA chapter 281-A (*Workers' Compensation*).

15.2 To the extent the Contractor is subject to the requirements of N.H. RSA chapter 281-A, Contractor shall maintain, and require any subcontractor or assignee to secure and maintain, payment of Workers' Compensation in connection with activities which the person proposes to undertake pursuant to this Agreement. The Contractor shall furnish the Contracting Officer identified in block 1.9, or any successor, proof of Workers' Compensation in the manner described in N.H. RSA chapter 281-A and any applicable renewal(s) thereof, which shall be attached and are incorporated herein by reference. The State shall not be responsible for payment of any Workers' Compensation premiums or for any other claim or benefit for Contractor, or any subcontractor or employee of Contractor, which might arise under applicable State of New Hampshire Workers' Compensation laws in connection with the performance of the Services under this Agreement.

16. **WAIVER OF BREACH.** A State's failure to enforce its rights with respect to any single or continuing breach of this Agreement shall not act as a waiver of the right of the State to later enforce any such rights or to enforce any other or any subsequent breach.

17. **NOTICE.** Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.

18. **AMENDMENT.** This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire unless no such approval is required under the circumstances pursuant to State law, rule or policy.

#### 19. CHOICE OF LAW AND FORUM.

19.1 This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire except where the Federal supremacy clause requires otherwise. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.

19.2 Any actions arising out of this Agreement, including a breach or alleged breach thereof, may not be submitted to binding arbitration, but must, instead, be brought and maintained in the Merrimack County Superior Court of New Hampshire which shall have exclusive jurisdiction thereof.

20. **CONFLICTING TERMS.** In the event of a conflict between the terms of this P-37 form (as modified in EXHIBIT A) and any other portion of this Agreement including any attachments thereto, the terms of the P-37 (as modified in EXHIBIT A) shall control.

21. **THIRD PARTIES.** This Agreement is being entered into for the sole benefit of the parties hereto, and nothing herein, express or implied, is intended to or will confer any legal or equitable right, benefit, or remedy of any nature upon any other person.

22. **HEADINGS.** The headings throughout the Agreement are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this Agreement.

23. **SPECIAL PROVISIONS.** Additional or modifying provisions set forth in the attached EXHIBIT A are incorporated herein by reference.

24. **FURTHER ASSURANCES.** The Contractor, along with its agents and affiliates, shall, at its own cost and expense, execute any additional documents and take such further actions as may be reasonably required to carry out the provisions of this Agreement and give effect to the transactions contemplated hereby.

25. **SEVERABILITY.** In the event any of the provisions of this Agreement are held by a court of competent jurisdiction to be contrary to any state or federal law, the remaining provisions of this Agreement will remain in full force and effect.

26. **ENTIRE AGREEMENT.** This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire agreement and understanding between the parties, and supersedes all prior agreements and understandings with respect to the subject matter hereof.

**EXHIBIT A – SPECIAL PROVISIONS**

There are no modifications, additions, and/or deletions to the Form P-37.

EXHIBIT B

2. EMPLOYMENT OF CONTRACTOR: SERVICES TO BE PERFORMED.

Advanced Language Services will provide professional transcribing services for investigations on behalf of the Department of Safety, Division of Fire Standards & Training and Emergency Medical Services and transcribing services for legal proceedings on behalf of the Department of Safety, Bureau of Hearings. The vendor shall provide the following transcribing services effective upon Governor & Council approval through June 30, 2026. The estimated volume of pages needed to be transcribed is listed below for the two different Divisions:

The Division of Fire Standards & Training and Emergency Medical Services estimated amount is 2,400 pages per fiscal year.

The Bureau of Hearings estimated amount is 3,800 pages per fiscal year.

This figure varies and is not intended to be a guarantee of the amount of work in the future. All services must be provided within the United States.

Requests:

The request for transcribing will be sent from either the Division of Fire Standards & Training and Emergency Medical Services or the Bureau of Hearings by mail to the vendor in a CD format or via email in a digital format from a digital recording electronically uploaded onto the vendors secure website. The transcript is expected to be completed and returned to the Division within three (3) weeks from the date of the vendor receiving the recording. The CD must be returned to the appropriate Division with the transcript. No additional fee is to be charged for the mailing or delivery of the transcript to the Department of Safety.

For the Division of Fire Standards & Training and Emergency Medical Services:

An electronic certified transcript be sent by email to the division contract person.

For the Administrator, Bureau of Hearings:

The vendor shall not accept a request to prepare a transcript in any form from any other party without written approval by the Department of Safety, Bureau of Hearings. Pursuant to RSA 541-A:31, VII, a party may request in writing, a transcript of the hearing, but shall first pay all reasonable costs for such transcription, as specified in administrative rule, Saf-C 203.14(b). Saf-C 203.14(b) (8) requires prepayment to the Department of Safety for a certified typed transcript of hearing, \$3.75 per page and \$1.00 per page for the copy payable to the Department of Safety. The prepared original transcript by the vendor shall be mailed to the person, agency, business at the address provided to the Hearings Bureau and the Hearings Bureau will be sent a copy. No additional fee is to be charged to the Department of Safety for the mailing or delivery of the transcript to another location.

Format of the Transcript:

The transcript must be produced using the following guidelines:

- Size-the paper size is to be 8 1/2 x 11 inches.
- Color-white paper is to be used.
- Ink Color-Black is to be used.

Advanced Language Services

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Contractor Initials

Date

DC  
6/23/23

Advanced Language Services

Page 8 of 8

Contractor Initials

Date

DC  
6/23/23

- **Type Size**-The letter character size is to be 10 to 12 letters per inch, in Font Times New Roman or Arial. This provides for approximately 63 characters to each line. Type should be letter quality.
- **Numbers of Lines per Page**-Each page of transcription is to contain between 23 and 25 lines of text. Each line is to be numbered. The last page may contain fewer lines if it is less than a full page of transcription. Page numbers or notations cannot be considered as part of the count of text lines.
- **Margins**-Typing is to begin on each page at the 1-1/2 inch left margin and continue to the 1/2 inch right margin.
- **Spacing**-Lines of transcript text are to be double-spaced.
- Each page of transcription is to bear numbers indicating line of transcription on the page.
- **Numbering**-The pages of the transcript are to be numbered in a single series of consecutive numbers for each proceeding. The page number should be placed at the top right corner of the page flush with the right margin above the first line of transcription. The page number shall not count as a line of transcript.

Content:

- **Verbal**-The transcript shall contain all words and other verbal expressions uttered during the course of the proceeding.
- **Striking of portions of the proceeding**-No portion of the proceeding shall be omitted from the record by an order to strike. The material ordered stricken, as well as the order to strike, must all appear in the transcript.
- **Punctuation and Spelling**-Punctuation and spelling shall be appropriate standard usage.
- **Interruptions of Speech and Simultaneous Discussions**-Interruptions of speech shall be denoted by the use of a dash at the point of interruption, and again at the point the speaker resumes speaking.
- **Cover**-The transcriptionist is to cover at no extra charge the original transcript with front and back covers of good quality sulphite paper and heavy weight transparent plastic or similar material as the Division approves.

Certification:

The transcriptionist is to authenticate the original transcript with a certificate on the last page. No additional fee is to be charged for the authentication and certification. The certification is to appear on the last page of each transcript.

	Fiscal Year 2024 July 1, 2023-June 30, 2024	Fiscal Year 2025 July 1, 2024-June 30, 2025	Fiscal Year 2026 July 1, 2025-June 30, 2026
Cost per page for Certified Original	\$1.70	\$1.70	\$1.70
Cost per page for Certified Copy	\$1.67	\$1.67	\$1.67

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Contractor Initials DS

Date 6/23/23

Advanced Language Services

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Contractor Initials DC

Date 6/23/23

**EXHIBIT C**

**5. CONTRACT PRICE: LIMITATION ON PRICE: PAYMENT.**

The total contract price shall not exceed \$31,620.00. The appropriate account numbers for the P-37 form, section 1.6 are listed below:

	<u>FY2024</u>	<u>FY2025</u>	<u>FY2026</u>
Division of Fire Standards & Training and Emergency Medical Services 02-23-23-237010-40650000 103-502664	\$4,080.00	\$4,080.00	\$4,080.00
Office of the Commissioner, Bureau of Hearings 02-23-23-231010-30820000 103-502664	\$6,460.00	\$6,460.00	\$6,460.00
<b>TOTAL</b>	<b>\$10,540.00</b>	<b>\$10,540.00</b>	<b>\$10,540.00</b>

Partial payments are accepted. Invoices shall be submitted when services have been completed to:

State of New Hampshire  
Department of Safety  
Division of Fire Standards & Training and Emergency Medical Services  
33 Hazen Drive  
Concord, NH 03305  
Email: AccountsPayable@dos.nh.gov

Or

State of New Hampshire  
Department of Safety  
Bureau of Hearings  
33 Hazen Drive  
Concord, NH 03305  
Email: AccountsPayable@dos.nh.gov

# State of New Hampshire

## Department of State

### CERTIFICATE

I, David M. Scanlan, Secretary of State of the State of New Hampshire, do hereby certify that **ADVANCED LANGUAGE SERVICES** is a New Hampshire Trade Name registered to transact business in New Hampshire on April 09, 2023. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 928689

Certificate Number : 0006220746



IN TESTIMONY WHEREOF,  
I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 9th day of April A.D. 2023.

A handwritten signature in black ink, appearing to read "David M. Scanlan".

David M. Scanlan  
Secretary of State

**CERTIFICATE OF AUTHORITY**  
(Sole Proprietor)

I, Daniel S Sabore, as a Sole Owner of my Business, Advanced Language Services certify that I am authorized to enter into a contract with the State of New Hampshire, Department of Administrative Services on behalf of myself.

IN WITNESS WHEREOF, I have set my hand as the Sole Owner of the Business this 23rd day of

June, 2023



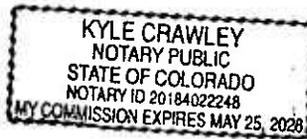
Sole Owner

STATE OF Colorado, COUNTY OF El Paso on this the 23rd day of June, 2023, before me, Kyle Crawley the undersigned Officer, personally appeared Daniel S Sabore, who acknowledge her/himself to the Sole Owner, of Advanced Language Services, a Business, and that she/he, as such Sole Owner being authorized to do so, executed the foregoing instrument for the purpose therein contained, by signing the name of the Business by her/himself as Sole proprietor

IN WITNESS WHEREOF I hereunto set my hand and official seal.

(OFFICIAL SEAL)

  
Notary Public/Justice of the Peace



My Commission Expires: 05/25/2026



DANISAB-01

RGREEN

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
6/22/2023

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).

<b>PRODUCER</b> Alliant Insurance Services, Inc. 4530 Walney Rd Ste 200 Chantilly, VA 20151-2285	<b>CONTACT Renee Green</b> NAME: _____ PHONE (A.C. No. Ex): (703) 547-5771 FAX (A.C. No.): (703) 563-1510 E-MAIL ADDRESS: renee.green@alliant.com	
	<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A: Sentinel Insurance Company Ltd INSURER B: Lloyd's Syndicate 609 (Atrium Underwriters Limited) INSURER C: _____ INSURER D: _____ INSURER E: _____ INSURER F: _____	<b>NAIC #</b> 11000 AA1126609

**INSURED** Languages Translation Services, Advanced Translation Services  
 6543 Rolling Creek Drive  
 Colorado Springs, CO 80924

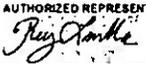
**COVERAGES**      **CERTIFICATE NUMBER:**      **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDITIONAL SUBR INSD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<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"/> PROJECT <input type="checkbox"/> LOC OTHER: _____		42SBME09567	6/1/2023	6/1/2024	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (EA occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000 EMP PRACT LIAB \$ 10,000 COMBINED SINGLE LIMIT (EA accident) \$ 2,000,000 BODILY INJURY (Per person) \$ _____ BODILY INJURY (Per accident) \$ _____ PROPERTY DAMAGE (Per accident) \$ _____
A	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		42SBME09567	6/1/2023	6/1/2024	EACH OCCURRENCE \$ _____ AGGREGATE \$ _____ PER STADIUM \$ _____ OTHER \$ _____ E.L. EACH ACCIDENT \$ _____ E.L. DISEASE - EA EMPLOYEE \$ _____ E.L. DISEASE - POLICY LIMIT \$ _____
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTIONS \$					<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE
	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	N/A			
B	Professional Liab		ATA-001023-1222	12/1/2022	12/1/2023	Each Claim 1,000,000
B	Professional Liab		ATA-001023-1222	12/1/2022	12/1/2023	Aggregate 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 EVIDENCE OF GENERAL LIABILITY AND AUTO LIABILITY COVERAGE.

THIS SERVES AS PROOF OF ERRORS & OMISSIONS COVERAGE.

<b>CERTIFICATE HOLDER</b>  State of New Hampshire Department of Safety Division of Fire Standards & Training and Emergency Medical 33 Hazen Drive Concord, NH 03305	<b>CANCELLATION</b>  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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Languages  
Translation  
Services

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Web site: <https://www.languages-translation.info>

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Certification of no employees

Advanced Language Services is a Sole Proprietorship Business that has no employees and will have no employees during the duration of the contract entered into with the State of New Hampshire.

Daniel Shamebo Sabore, Managing Director

Signature

Date: 6/19/2023