

301 N. Broadway, Moore, OK 73160 | (405) 793-5000 | www.cityofmoore.com

July 17, 2018

Shawn Kilchrist, Managing Director Deloitte & Touche, LLP 100 N. Broadway, Suite 3250 Oklahoma City, OK 74103

RE: City of Moore Internal Audit Services

Dear Mr. Kilchrist,

Enclosed is the 2018-2019 contract extension. Please sign and date and return to me as soon as possible. If you have any questions, please contact me at 405-793-4571 or kgilbert@cityofmoore.com.

Sincerely,

Kahley Gilbert

Project-Grants Manager

This extension is made by City of Moore and Deloitte Advisory (Deloitte & Touche LLP), parties to the agreement for Internal Audit Services for the Community Development Block Grant Disaster Recovery (the "Agreement") dated June 20, 2017.

As stated in Section 1 of Exhibit A of the agreement:

"The term may be extended in increments of one year for up to four years from the initial Contract date upon the written agreement of the City and the Consultant."

This will extend the current contract to June 20, 2019.

The total professional fees for the engagement period of June 20, 2018 – June 20, 2019 to perform three internal audits will be approximately \$66,000 and are based on the following hourly billing rates:

Resource Level	Hourly Rate \$305 \$270					
Partner/Principal/Managing Director						
Senior Manager/Specialist Leader						
Manager/Specialist Master	\$210					
Senior Consultant	\$190					
Consultant	\$160					

We also understand that the City of Moore will reimburse Deloitte for all reasonable expenses incurred in performing our Services on this engagement (including, but not limited to, our reasonable travel, airfare, meals, lodging, and mileage expenses).

All other terms of the original agreement dated June 20, 2017 shall remain binding.

IN WITNESS WHEREOF, each party has caused this extension to be executed on the date indicated below,

The City of Moore:

Glenn Lewis, Mayor

Date: 7/16/2018

Linda Stawart City Clark

Randy Brink, City Attorney

Deloitte & Touche LLP

Shawn Kilchrist, Managing Director

Date: 7-22-2018

SAM Search Results List of records matching your search for :

Record Status: Active
DUNS Number: 001664820
Functional Area: Entity Management, Performance Information

No Search Results	

SAM Search Results List of records matching your search for :

Search Term: ''deloitte & touche llp* Record Status: Active

ENTITY Deloitte & Touche LLP

Status:Active

DUNS: 187107958 +4:

CAGE Code: 3CCJ5 DoDAAC:

Expiration Date: Apr 25, 2019 Has Active Exclusion?: No Debt Subject to Offset?: No

Address: 1919 N Lynn St

City: Arlington State/Province: VIRGINIA ZIP Code: 22209-1742 Country: UNITED STATES

ENTITY DELOITTE & TOUCHE LLP

Status:Active

DUNS: 079722424 +4:

CAGE Code: 7WWA4 DoDAAC:

Expiration Date: Apr 25, 2019 Has Active Exclusion?: No Debt Subject to Offset?: No

Address: 1500 Perimeter Pkwy Ste 275

City: Huntsville State/Province: ALABAMA ZIP Code: 35806-3579 Country: UNITED STATES



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/24/2018

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).

th	this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).										
PRO	DUCER				CONTACT NAME:						
	Marsh USA, Inc. 1166 Avenue of the Americas				PHONE FAX (A/C, No, Ext): (A/C, No):						
New York, NY 10036			E-MAIL ADDRESS:								
										NAIC#	
7099	65-STND-PROF-18-19				INSURER A: North American Capacity Ins Co					25038	
INSU					MOOKER A. Moran Familian Supering The So						
	Deloitte LLP &		l noroo	no oumed controlledby or	INSURER B:						
asso	Deloitte & Touche LLP and all other firms, enti ciated with the foregoing as more fully described in			ns owned, controlledby or	INSURER C:						
	695 East Main Street				INSURER D:						
	Stamford, CT 06901				INSURE						
	VED 4 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				INSURE					1	
				NUMBER:		-009427570-44		REVISION NUMBER: 8		ICV PERIOR	
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											
С	ERTIFICATE MAY BE ISSUED OR MAY	PERT	AIN,	THE INSURANCE AFFORD	ED BY	THE POLICIES	S DESCRIBED				
	EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.										
INSR LTR	TYPE OF INSURANCE	INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	í		
	COMMERCIAL GENERAL LIABILITY								\$		
	CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$		
								MED EXP (Any one person)	\$		
								PERSONAL & ADV INJURY	\$		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$		
	POLICY PRO- JECT LOC								\$		
	OTHER:								\$		
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT	\$		
	ANY AUTO							(Ea accident) BODILY INJURY (Per person)	\$		
	OWNED SCHEDULED							` ' '	\$		
	AUTOS ONLY AUTOS NON-OWNED							PROPERTY DAMAGE	\$ \$		
	AUTOS ONLY AUTOS ONLY							(Per accident)	\$		
-	LIMPRELLALIAR								-		
	UMBRELLA LIAB OCCUR								\$		
	EXCESS LIAB CLAIMS-MADE	4						AGGREGATE	\$		
	DED RETENTION \$								\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N							PER OTH- STATUTE ER			
ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?		N/A						E.L. EACH ACCIDENT	\$		
	(Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE	\$		
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
Α	Professional Liability			FIP0008215-11		06/01/2018	06/01/2019	\$1,000,000 each claim			
								and in the aggregate			
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	CORD	101, Additional Remarks Schedu	le, may be	e attached if more	e space is require	ed)			
ı	his policy is non-cancellable during the period show				and an and d	Data and the second of the					
ı	he issuance of this certificate of insurance does not nanner the contract of insurance between the insured			•	ied an add	iitionai insured, no	or aces it modify in	any			
"	iallier the contract of insurance between the insurer	i aliu ili	e ilisuit	JI.							
Cybe	r, Network and Privacy Liability Coverage is included	I in the	Profess	sional Liability Program							
				, ,							
	RTIFICATE HOLDER				CANC	ELLATION					
	ATH ICATE HOLDER				CANC	, LLLA HUN					
Deloitte & Touche LLP				SHO	ULD ANY OF	THE ABOVE D	ESCRIBED POLICIES BE CA	NCELI	ED BEFORE		
695 East Main Street							REOF, NOTICE WILL BI	E DEI	LIVERED IN		
Stamford, CT 06901					ACCORDANCE WITH THE POLICY PROVISIONS.						
						AUTHODIZED DEDDECENTATIVE					
					AUTHORIZED REPRESENTATIVE of Marsh USA Inc.						
					Mauraan Carman						