



LINCOLNWOOD SCHOOL DISTRICT 74  
BOARD OF EDUCATION  
FINANCE COMMITTEE MEETING AGENDA  
THURSDAY, JANUARY 21, 2021 AT **6:30 PM**

BOARD OF EDUCATION  
**Scott L. Anderson**, President  
**Kevin Daly**, Vice President  
**John P. Vranas**, Secretary  
**Jeffrey S. Evens**  
**Myra A. Foutris**  
**Elaina Geraghty**  
**Rupal Shah Mandal**

ADMINISTRATION  
**Dr. Kimberly A. Nasshan**, Superintendent of Schools  
**Dr. David Russo**, Assistant Superintendent for Curriculum and Instruction  
**Courtney Whited**, Business Manager/CSBO

*Agenda of the Finance Committee Meeting of the Board of Education of Lincolnwood School District 74,  
Cook County, Illinois, to be held in the Lincoln Hall Auditorium  
6855 North Crawford  
Lincolnwood, IL 60712,  
on Thursday, January 21, 2021.*

- The December 10, 2020 Finance Committee meeting was cancelled due to light agenda.

**IN-PERSON PARTICIPATION:** Pursuant to the Governor's disaster proclamation issued on Friday, December 11, 2020, no more than 10 people may gather at this location for the meeting. Per Board Policy 2:230, anyone who wishes to address the Board during "Audience to Visitors" as indicated on the agenda may do so when recognized by the Committee Chairman. Typically each person is allotted three minutes. Members of the public may only participate by joining through ZOOM Conferencing. The Zoom Tech Check will be at 6:15 p.m.

Join the meeting via ZOOM app (video and audio): Meeting ID: # 830 7474 1263  
(Link: <https://sd74-org.zoom.us/j/83074741263>)

or

Join the meeting via phone (audio only): Step #1: Dial 1-312-626-6799; Step #2: Enter Meeting ID: # 830 7474 1263

1. CALL TO ORDER/ROLL CALL

FINANCE COMMITTEE MEMBERS

Kevin Daly (BOE), Chairman

John P. Vranas (BOE)

Mike Bartholomew, Community Member

Reuben George, Community Member

Lidia Kaihara, Community Member

Steven Pawlow, Community Member

Dr. Bharat K. Shah, Community Member

ADMINISTRATORS/STAFF

Dr. Kimberly A. Nasshan, Superintendent of Schools

Dr. David L. Russo, Assistant Superintendent of Curriculum and Instruction

Courtney Whited, Business Manager/CSBO

2. AUDIENCE TO VISITORS

3. APPROVAL OF MINUTES

- a. Finance Committee Meeting Minutes - **November 19, 2020**

4. INFORMATION/DISCUSSION: FUND BALANCE REPORT

- a. Fund Balance Report - **NOVEMBER 2020**

5. OLD BUSINESS

6. NEW BUSINESS

- a. INFORMATION/DISCUSSION/ACTION: Pitney Bowes Postage Meter Lease Renewal

- b. INFORMATION/DISCUSSION/ACTION: Property/Casualty Insurance Alternatives to Collective Liability Insurance Cooperative (CLIC)
- c. INFORMATION/DISCUSSION/ACTION: Additional Cyber Liability Coverage Offering from CLIC
- d. INFORMATION/DISCUSSION/ACTION: Post-Issuance Tax Compliance Reports
- e. INFORMATION/DISCUSSION/ACTION: Proposed 2021-22 School Fees Draft
- f. INFORMATION/DISCUSSION/ACTION: Children’s Care and Development Center (CCDC) Lease Agreement

7. ADJOURNMENT

Motion by Member: \_\_\_\_\_ Seconded by: \_\_\_\_\_

**Dr. Kimberly A. Nasshan, Superintendent of Schools**

*Lincolnwood School District 74 is subject to the requirements of the Americans with Disabilities Act of 1990. Individuals with disabilities who plan to attend this meeting and who require certain accommodations in order to allow them to observe and/or participate in this meeting, or who have questions regarding the accessibility of this meeting or facility, are requested to contact the District Office at 847-675-8234 promptly to allow Lincolnwood School District 74 to make reasonable accommodations for those persons.*



LINCOLNWOOD SCHOOL DISTRICT 74  
BOARD OF EDUCATION  
FINANCE COMMITTEE MEETING MINUTES  
THURSDAY, NOVEMBER 19, 2020 AT **6:30 PM**

BOARD OF EDUCATION  
Scott L. Anderson, *President*  
Kevin Daly, *Vice President*  
John P. Vranas, *Secretary*  
Jeffrey S. Evens  
Myra A. Foutris  
Elaina Geraghty  
Rupal Shah Mandal

ADMINISTRATION  
Dr. Kimberly A. Nasshan, *Superintendent of Schools*  
Dr. David Russo, *Assistant Superintendent for Curriculum and Instruction*  
Courtney Whited, *Business Manager/CSBO*

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*Minutes of the Finance Committee Meeting of the Board of Education of Lincolnwood School District 74,  
Cook County, Illinois, was held in the Lincoln Hall Auditorium  
6855 North Crawford  
Lincolnwood, IL 60712,  
on Thursday, November 19, 2020.*

1. CALL TO ORDER/ROLL CALL

Chairman Daly called the Finance Committee meeting to order at 6:33 p.m.

FINANCE COMMITTEE MEMBERS

Kevin Daly (BOE), Chairman  
John P. Vranas (BOE)  
Mike Bartholomew, Community Member  
Steven Pawlow, Community Member  
Dr. Bharat K. Shah, Community Member  
Zade Tagani, Community Member

ADMINISTRATORS/STAFF

Dr. Kimberly A. Nasshan, Superintendent of Schools  
Dr. David L. Russo, Assistant Superintendent of Curriculum and Instruction  
Courtney Whited, Business Manager/CSBO  
Christopher Edman, Director of Technology

OTHERS PRESENT ZOOM OR IN PERSON:

Tammie Beckwith Schallmo, PMA Securities, LLC

2. AUDIENCE TO VISITORS

None

3. APPROVAL OF MINUTES

a. Finance Committee Meeting Minutes - **OCTOBER 22, 2020**

A motion was made, seconded and passed to approve the minutes from the October 22, 2020 Finance Committee meeting.

4. FUND BALANCE REPORT

a. Fund Balance Report - **SEPTEMBER 2020**

Courtney Whited, Business Manager/CSBO, presented the September 2020 Fund Balance Report. Courtney is continuing to monitor the tax collections.

5. OLD BUSINESS

a. NTDSE Molloy Renovations and Additions Project Funding

Courtney Whited, Business Manager/CSBO, introduced Tammie Beckwith Schallmo, PMA Securities, LLC who presented the bond options related to the NTDSE Molloy Renovations and Additions Project. Courtney Whited explained that she is asking the Committee for guidance on the payment option the District will be using to handle their obligation of \$1,009,787 for the Molloy Renovation project.

A motion was made, seconded and passed that the Finance Committee concurs to recommend to the Board of Education to approve a one-time payment of \$ 1,009,787 for the NTDSE Molloy Renovations and Additions Project.

A motion was made, seconded and passed that the Finance Committee concurs to recommend to the Board of Education to pursue a \$7,000,000 bond issuance for the NTDSE Molloy Renovations and Additions Project and other Lincolnwood School District 74 Capital and Health Life Safety Improvements.

6. NEW BUSINESS

a. Annual Renewal of Building Automated Systems (BAS) Maintenance and Support

A motion was made, seconded and passed that the Finance Committee concurs to recommend to the Board of Education to Renew Annual BAS (Building Automated Systems) Maintenance and Support Contract with Control Engineering Corp. for the 2021 calendar year in the amount of \$9,712.

b. 2021-22 Infinite Connections, Inc. Consulting Services Agreement - Seventh Extension

A motion was made, seconded and passed that the Finance Committee concurs to recommend to the Board of Education to approve this Contract extension from Infinite Connections, Inc. for E-rate consultation services in the amount of \$4,400 from February 1, 2021 to January 31, 2022.

c. 2020 Final Property Tax Levy

A motion was made, seconded and passed that the Finance Committee concurs to recommend to the Board of Education to approve Lincolnwood School District 74's Final 2020 Property Tax Levy and the corresponding Resolutions in the amount of \$24,338,650.

d. CCDC, Child Care and Development Center is interested in a new lease contract.

First Student proposed a partial pay for the District during the Adaptive Pause. The Committee suggested that the Administration recommend to the Board of Education to commit to paying the portion that will allow First Student to pay the drivers that provide the Districts bus routes.

Administration has been receiving requests for refunds for PreK Tuition during the Adaptive Pause. The Committee recommended waiting until the fourth quarter in case there are any future pivots to remote learning.

7. ADJOURNMENT

A motion was made, seconded and passed to adjourn the Finance Committee meeting. The Finance Committee meeting was adjourned at 7:40 p.m.

The next Finance Committee meeting will be Thursday, January 21, 2021 at 6:30 p.m. The public is welcome.

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Kevin Daly, Chairman

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John P. Vranas, Member

Lincolnwood School District 74

Fund Balances

Fiscal Year: 2020-2021

Month: November  
 Year: 2020  
 Fund Type:

Include Cash Balance  
 FY End Report

<u>Fund</u>	<u>Description</u>	<u>Beginning Balance</u>	<u>Revenue</u>	<u>Expense</u>	<u>Transfers</u>	<u>Fund Balance</u>
10	EDUCATIONAL	\$9,669,194.51	\$9,156,723.76	(\$5,642,308.91)	\$0.00	\$13,183,609.36
20	OPERATIONS & MAINTENANCE	\$2,769,201.94	\$951,624.00	(\$870,409.58)	\$0.00	\$2,850,416.36
30	DEBT SERVICE	\$826,111.00	\$774,508.68	\$0.00	\$0.00	\$1,600,619.68
40	TRANSPORTATION	\$931,371.24	\$465,525.51	(\$220,195.40)	\$0.00	\$1,176,701.35
50	MUNICIPAL RETIREMENT	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51	IMRF	\$401,893.97	\$106,638.48	(\$120,886.62)	\$0.00	\$387,645.83
52	SOCIAL SECURITY AND MEDICARE	(\$185,164.17)	\$135,655.64	(\$104,051.02)	\$0.00	(\$153,559.55)
60	CAPITAL PROJECTS	\$1,603,456.55	\$4,882.33	(\$671,800.00)	\$0.00	\$936,538.88
70	WORKING CASH	\$402,694.04	\$1,852.48	\$0.00	\$0.00	\$404,546.52
80	TORT IMMUNITY	\$64,776.15	\$36,747.92	\$5,279.00	\$0.00	\$106,803.07
90	FIRE PREVENTION & SAFETY	\$4,398,542.90	\$275,785.16	(\$830,540.60)	\$0.00	\$3,843,787.46
99	LINCOLNWOOD SCHOOLS ACTIVITY FUN	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Grand Total:		\$20,882,078.13	\$11,909,943.96	(\$8,454,913.13)	\$0.00	\$24,337,108.96

End of Report

Lincolnwood School District 74

Treasurers Report FUND- All Funds As of 11/30/2020

Fiscal Year: 2020-2021

ASSETS

CASH & INVESTMENTS

Cash in Bank (+)	\$24,015,814.51
Imprest Fund (+)	\$15,067.06
Petty Cash (+)	\$100.00

Sub-total : CASH & INVESTMENTS \$24,030,981.57

DUE FROM OTHER GOVERNMENTS

Inter-Governmental Loans (+)	(\$467.03)
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Sub-total : DUE FROM OTHER GOVERNMENTS (\$467.03)

Total : ASSETS \$24,030,514.54

LIABILITIES

ACCOUNTS PAYABLE

Accounts Payable (+)	\$75,839.67
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Sub-total : ACCOUNTS PAYABLE \$75,839.67

OTHER CURRENT LIABILITIES

Other Liabilities (+)	\$30,582.15
Payroll Liabilities (+)	(\$413,016.24)

Sub-total : OTHER CURRENT LIABILITIES (\$382,434.09)

Total : LIABILITIES (\$306,594.42)

FUND BALANCE

Unreserved Fund Balance

Fund Balance (+)	\$20,882,078.13
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Sub-total : Unreserved Fund Balance \$20,882,078.13

NET INCREASE (DECREASE)

NET INCREASE (DECREASE) (+)	\$3,455,030.83
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Sub-total : NET INCREASE (DECREASE) \$3,455,030.83

Total : FUND BALANCE \$24,337,108.96

Total LIABILITIES + FUND BALANCE \$24,030,514.54

End of Report

Lincolnwood School District 74

Treasurers Report FUND- All Funds For the Period 11/01/2020 through 11/30/2020

Fiscal Year: 2020-2021

	11/01/2020 - 11/30/2020	Year To Date	Budget	Budget Balance	
<b>REVENUE</b>					
<b>LOCAL SOURCES</b>					
Property Tax Receipts (+)	\$0.00	\$10,384,204.20	\$21,886,397.89	\$11,502,193.69	47.4%
Payments in Lieu of Taxes (+)	\$0.00	\$234,087.87	\$608,000.00	\$373,912.13	38.5%
Tuition Payments Received (+)	\$5,800.00	\$43,332.00	\$173,400.00	\$130,068.00	25.0%
Interest Revenue Received (+)	\$15,860.48	\$91,019.00	\$526,040.00	\$435,021.00	17.3%
Sales to Pupils & Adults (+)	\$1,137.02	\$7,796.45	\$220,000.00	\$212,203.55	3.5%
Activity Fees Received (+)	\$406.00	\$32,804.25	\$82,800.00	\$49,995.75	39.6%
Rental Revenue (+)	\$312.00	\$35,758.75	\$80,500.00	\$44,741.25	44.4%
Other Local Revenue (+)	\$6,758.37	\$46,391.40	\$124,811.11	\$78,419.71	37.2%
<b>Sub-total : LOCAL SOURCES</b>	<b>\$30,273.87</b>	<b>\$10,875,393.92</b>	<b>\$23,701,949.00</b>	<b>\$12,826,555.08</b>	<b>45.9%</b>
<b>STATE SOURCES</b>					
State Grants & Aid Received (+)	\$105,718.00	\$670,328.25	\$1,550,000.00	\$879,671.75	43.2%
<b>Sub-total : STATE SOURCES</b>	<b>\$105,718.00</b>	<b>\$670,328.25</b>	<b>\$1,550,000.00</b>	<b>\$879,671.75</b>	<b>43.2%</b>
<b>FEDERAL SOURCES</b>					
Federal Grants & Aid Received (+)	\$11,410.55	\$364,221.79	\$784,764.00	\$420,542.21	46.4%
<b>Sub-total : FEDERAL SOURCES</b>	<b>\$11,410.55</b>	<b>\$364,221.79</b>	<b>\$784,764.00</b>	<b>\$420,542.21</b>	<b>46.4%</b>
<b>Total : REVENUE</b>	<b>\$147,402.42</b>	<b>\$11,909,943.96</b>	<b>\$26,036,713.00</b>	<b>\$14,126,769.04</b>	<b>45.7%</b>
<b>EXPENDITURES</b>					
<b>REGULAR K-12 PROGRAMS</b>					
Salaries (-)	\$569,648.60	\$1,972,387.59	\$7,167,047.79	\$5,194,660.20	27.5%
Employee Benefits (-)	\$98,681.27	\$328,553.62	\$1,307,880.64	\$979,327.02	25.1%
Purchased Services (-)	\$4,393.84	\$61,750.29	\$193,700.00	\$131,949.71	31.9%
Termination Benefits (-)	\$29,386.91	\$147,200.54	\$469,295.00	\$322,094.46	31.4%
Supplies & Materials (-)	\$80,313.13	\$198,534.38	\$409,143.00	\$210,608.62	48.5%
Capital Expenditures (-)	\$0.00	\$42,039.00	\$102,884.00	\$60,845.00	40.9%
Non-Capitalized Equipment (-)	\$778.84	\$7,911.05	\$67,000.00	\$59,088.95	11.8%
<b>Sub-total : REGULAR K-12 PROGRAMS</b>	<b>(\$783,202.59)</b>	<b>(\$2,758,376.47)</b>	<b>(\$9,716,950.43)</b>	<b>(\$6,958,573.96)</b>	<b>28.4%</b>
<b>PRE-K PROGRAMS</b>					
Salaries (-)	\$17,784.04	\$62,244.14	\$232,068.08	\$169,823.94	26.8%
Employee Benefits (-)	\$7,424.44	\$22,917.10	\$94,062.42	\$71,145.32	24.4%
Purchased Services (-)	\$0.00	\$0.00	\$200.00	\$200.00	0.0%
Supplies & Materials (-)	\$134.72	\$666.42	\$2,995.00	\$2,328.58	22.3%
Capital Expenditures (-)	\$0.00	\$0.00	\$1,000.00	\$1,000.00	0.0%
Non-Capitalized Equipment (-)	\$0.00	\$0.00	\$500.00	\$500.00	0.0%
<b>Sub-total : PRE-K PROGRAMS</b>	<b>(\$25,343.20)</b>	<b>(\$85,827.66)</b>	<b>(\$330,825.50)</b>	<b>(\$244,997.84)</b>	<b>25.9%</b>
<b>SPECIAL ED PROGRAMS K-12</b>					
Salaries (-)	\$75,341.95	\$266,745.24	\$1,180,669.00	\$913,923.76	22.6%
Employee Benefits (-)	\$30,919.48	\$79,876.53	\$386,780.00	\$306,903.47	20.7%
Purchased Services (-)	\$0.00	\$0.00	\$500.00	\$500.00	0.0%
Supplies & Materials (-)	\$114.75	\$638.60	\$5,000.00	\$4,361.40	12.8%
Capital Expenditures (-)	\$0.00	\$0.00	\$2,000.00	\$2,000.00	0.0%
Other Objects (-)	\$0.00	\$180.00	\$500.00	\$320.00	36.0%

Operating Statement with Budget

Lincolnwood School District 74

Treasurers Report FUND- All Funds For the Period 11/01/2020 through 11/30/2020

Fiscal Year: 2020-2021

	<u>11/01/2020 - 11/30/2020</u>	<u>Year To Date</u>	<u>Budget</u>	<u>Budget Balance</u>	
Non-Capital Equipment (-)	\$25.90	\$261.44	\$1,000.00	\$738.56	26.1%
Sub-total : SPECIAL ED PROGRAMS K-12	(\$106,402.08)	(\$347,701.81)	(\$1,576,449.00)	(\$1,228,747.19)	22.1%
<b>REMEDIAL &amp; SUPPLEMENTAL K-12</b>					
Salaries (-)	\$36,576.14	\$128,016.49	\$480,490.00	\$352,473.51	26.6%
Employee Benefits (-)	\$6,218.12	\$19,222.73	\$78,348.80	\$59,126.07	24.5%
Purchased Services (-)	\$1,620.00	\$34,583.50	\$35,000.00	\$416.50	98.8%
Supplies & Materials (-)	\$0.00	\$4,740.42	\$6,542.00	\$1,801.58	72.5%
Sub-total : REMEDIAL & SUPPLEMENTAL K-12	(\$44,414.26)	(\$186,563.14)	(\$600,380.80)	(\$413,817.66)	31.1%
<b>INTERSCHOLASTIC PROGRAMS</b>					
Salaries (-)	\$0.00	\$0.00	\$25,060.00	\$25,060.00	0.0%
Employee Benefits (-)	\$0.00	\$0.00	\$8,225.00	\$8,225.00	0.0%
Supplies & Materials (-)	\$0.00	\$0.00	\$1,500.00	\$1,500.00	0.0%
Capital Expenditures (-)	\$0.00	\$0.00	\$1,000.00	\$1,000.00	0.0%
Other Objects (-)	\$0.00	\$3,500.00	\$0.00	(\$3,500.00)	0.0%
Sub-total : INTERSCHOLASTIC PROGRAMS	\$0.00	(\$3,500.00)	(\$35,785.00)	(\$32,285.00)	9.8%
<b>GIFTED PROGRAMS</b>					
Salaries (-)	\$18,929.14	\$66,251.99	\$380,816.13	\$314,564.14	17.4%
Employee Benefits (-)	\$1,246.80	\$2,859.64	\$82,761.14	\$79,901.50	3.5%
Supplies & Materials (-)	\$0.00	\$554.00	\$3,000.00	\$2,446.00	18.5%
Sub-total : GIFTED PROGRAMS	(\$20,175.94)	(\$69,665.63)	(\$466,577.27)	(\$396,911.64)	14.9%
<b>BILINGUAL PROGRAMS</b>					
Salaries (-)	\$49,812.46	\$174,343.61	\$657,562.00	\$483,218.39	26.5%
Employee Benefits (-)	\$8,368.65	\$25,841.46	\$103,605.00	\$77,763.54	24.9%
Purchased Services (-)	\$0.00	\$0.00	\$2,150.00	\$2,150.00	0.0%
Supplies & Materials (-)	\$0.00	\$2,146.31	\$6,500.00	\$4,353.69	33.0%
Sub-total : BILINGUAL PROGRAMS	(\$58,181.11)	(\$202,331.38)	(\$769,817.00)	(\$567,485.62)	26.3%
<b>ATTENDANCE &amp; SOCIAL WORK</b>					
Salaries (-)	\$29,342.46	\$102,698.61	\$360,288.00	\$257,589.39	28.5%
Employee Benefits (-)	\$3,258.36	\$10,207.91	\$22,297.00	\$12,089.09	45.8%
Purchased Services (-)	\$0.00	\$0.00	\$500.00	\$500.00	0.0%
Supplies & Materials (-)	\$0.00	\$43.26	\$1,000.00	\$956.74	4.3%
Sub-total : ATTENDANCE & SOCIAL WORK	(\$32,600.82)	(\$112,949.78)	(\$384,085.00)	(\$271,135.22)	29.4%
<b>HEALTH SERVICES</b>					
Salaries (-)	\$7,283.21	\$35,377.43	\$164,250.00	\$128,872.57	21.5%
Employee Benefits (-)	\$2,316.99	\$12,511.42	\$80,623.00	\$68,111.58	15.5%
Purchased Services (-)	\$28,336.46	\$45,138.96	\$1,500.00	(\$43,638.96)	3009.3%
Supplies & Materials (-)	\$600.00	\$53,354.74	\$33,600.00	(\$19,754.74)	158.8%
Capital Expenditures (-)	\$0.00	\$0.00	\$1,500.00	\$1,500.00	0.0%
Other Objects (-)	\$95.00	\$382.70	\$600.00	\$217.30	63.8%
Non-Capital Equipment (-)	\$0.00	\$0.00	\$1,500.00	\$1,500.00	0.0%

Operating Statement with Budget

Lincolnwood School District 74

Treasurers Report FUND- All Funds For the Period 11/01/2020 through 11/30/2020

Fiscal Year: 2020-2021

	11/01/2020 - 11/30/2020	Year To Date	Budget	Budget Balance	
Sub-total : HEALTH SERVICES	(\$38,631.66)	(\$146,765.25)	(\$283,573.00)	(\$136,807.75)	51.8%
PSYCHOLOGICAL SERVICES					
Salaries (-)	\$13,261.32	\$46,414.62	\$173,997.00	\$127,582.38	26.7%
Employee Benefits (-)	\$2,730.93	\$8,388.61	\$33,644.00	\$25,255.39	24.9%
Purchased Services (-)	\$79.62	\$739.62	\$1,000.00	\$260.38	74.0%
Supplies & Materials (-)	\$0.00	\$0.00	\$1,050.00	\$1,050.00	0.0%
Sub-total : PSYCHOLOGICAL SERVICES	(\$16,071.87)	(\$55,542.85)	(\$209,691.00)	(\$154,148.15)	26.5%
SPEECH PATHOLOGY & AUDIOLOGY					
Salaries (-)	\$20,875.76	\$73,065.16	\$277,900.00	\$204,834.84	26.3%
Employee Benefits (-)	\$3,000.37	\$9,307.11	\$37,262.00	\$27,954.89	25.0%
Supplies & Materials (-)	\$0.00	\$0.00	\$1,250.00	\$1,250.00	0.0%
Sub-total : SPEECH PATHOLOGY & AUDIOLOGY	(\$23,876.13)	(\$82,372.27)	(\$316,412.00)	(\$234,039.73)	26.0%
OTHER SUPPORT SERVICES - PUPILS					
Salaries (-)	\$6,952.28	\$16,435.10	\$59,000.00	\$42,564.90	27.9%
Employee Benefits (-)	\$379.09	\$1,028.29	\$4,250.00	\$3,221.71	24.2%
Sub-total : OTHER SUPPORT SERVICES - PUPILS	(\$7,331.37)	(\$17,463.39)	(\$63,250.00)	(\$45,786.61)	27.6%
IMPROVEMENT OF INSTRUCTION					
Salaries (-)	\$26,736.84	\$155,522.45	\$351,694.00	\$196,171.55	44.2%
Employee Benefits (-)	\$4,587.17	\$24,576.66	\$55,227.00	\$30,650.34	44.5%
Purchased Services (-)	\$329.00	\$10,171.02	\$90,500.00	\$80,328.98	11.2%
Supplies & Materials (-)	\$0.00	\$70.94	\$2,600.00	\$2,529.06	2.7%
Other Objects (-)	\$0.00	\$1,489.38	\$1,500.00	\$10.62	99.3%
Sub-total : IMPROVEMENT OF INSTRUCTION	(\$31,653.01)	(\$191,830.45)	(\$501,521.00)	(\$309,690.55)	38.2%
EDUCATIONAL MEDIA					
Salaries (-)	\$17,365.52	\$60,162.43	\$254,622.00	\$194,459.57	23.6%
Employee Benefits (-)	\$2,425.61	\$7,512.09	\$30,859.00	\$23,346.91	24.3%
Supplies & Materials (-)	\$0.00	\$4,196.75	\$6,850.00	\$2,653.25	61.3%
Sub-total : EDUCATIONAL MEDIA	(\$19,791.13)	(\$71,871.27)	(\$292,331.00)	(\$220,459.73)	24.6%
ASSESSMENT & TESTING					
Purchased Services (-)	\$0.00	\$14,525.00	\$14,525.00	\$0.00	100.0%
Sub-total : ASSESSMENT & TESTING	\$0.00	(\$14,525.00)	(\$14,525.00)	\$0.00	100.0%
ADMIN SERVICES - BOARD OF ED					
Employee Benefits (-)	\$4,758.90	\$23,902.50	\$58,000.00	\$34,097.50	41.2%
Purchased Services (-)	\$21,258.51	\$106,838.94	\$236,900.00	\$130,061.06	45.1%
Supplies & Materials (-)	\$0.00	\$41.72	\$2,500.00	\$2,458.28	1.7%
Other Objects (-)	\$0.00	\$0.00	\$20,000.00	\$20,000.00	0.0%
Non-Capitalized Equipment (-)	\$0.00	\$0.00	\$1,000.00	\$1,000.00	0.0%
Sub-total : ADMIN SERVICES - BOARD OF ED	(\$26,017.41)	(\$130,783.16)	(\$318,400.00)	(\$187,616.84)	41.1%
SUPERINTENDENT					

Operating Statement with Budget

Lincolnwood School District 74

Treasurers Report FUND- All Funds For the Period 11/01/2020 through 11/30/2020

Fiscal Year: 2020-2021

	<u>11/01/2020 - 11/30/2020</u>	<u>Year To Date</u>	<u>Budget</u>	<u>Budget Balance</u>	
Salaries (-)	\$20,158.14	\$110,869.77	\$262,056.00	\$151,186.23	42.3%
Employee Benefits (-)	\$2,944.82	\$15,146.42	\$36,369.00	\$21,222.58	41.6%
Purchased Services (-)	\$95.00	\$301.00	\$3,400.00	\$3,099.00	8.9%
Supplies & Materials (-)	\$0.00	\$101.99	\$2,000.00	\$1,898.01	5.1%
Capital Expenditures (-)	\$0.00	\$0.00	\$500.00	\$500.00	0.0%
Other Objects (-)	\$250.00	\$2,191.81	\$2,500.00	\$308.19	87.7%
Non-Capitalized Equipment (-)	\$0.00	\$0.00	\$1,000.00	\$1,000.00	0.0%
<b>Sub-total : SUPERINTENDENT</b>	<b>(\$23,447.96)</b>	<b>(\$128,610.99)</b>	<b>(\$307,825.00)</b>	<b>(\$179,214.01)</b>	<b>41.8%</b>
<b>ADMIN SERVICES - SPECIAL ED</b>					
Salaries (-)	\$10,584.38	\$57,579.23	\$137,451.00	\$79,871.77	41.9%
Employee Benefits (-)	\$3,563.70	\$18,417.15	\$50,944.00	\$32,526.85	36.2%
<b>Sub-total : ADMIN SERVICES - SPECIAL ED</b>	<b>(\$14,148.08)</b>	<b>(\$75,996.38)</b>	<b>(\$188,395.00)</b>	<b>(\$112,398.62)</b>	<b>40.3%</b>
<b>WORKERS COMPENSATION INSURANCE</b>					
Purchased Services (-)	(\$807.00)	(\$5,279.00)	\$90,000.00	\$95,279.00	-5.9%
<b>Sub-total : WORKERS COMPENSATION INSURANCE</b>	<b>\$807.00</b>	<b>\$5,279.00</b>	<b>(\$90,000.00)</b>	<b>(\$95,279.00)</b>	<b>5.9%</b>
<b>LOSS PREVENTION REDUCTION</b>					
Other Objects (-)	\$0.00	\$0.00	\$5,000.00	\$5,000.00	0.0%
<b>Sub-total : LOSS PREVENTION REDUCTION</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>(\$5,000.00)</b>	<b>(\$5,000.00)</b>	<b>0.0%</b>
<b>PROPERTY INSURANCE</b>					
Purchased Services (-)	\$0.00	\$0.00	\$75,000.00	\$75,000.00	0.0%
<b>Sub-total : PROPERTY INSURANCE</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>(\$75,000.00)</b>	<b>(\$75,000.00)</b>	<b>0.0%</b>
<b>PRINCIPAL</b>					
Salaries (-)	\$54,056.35	\$297,572.58	\$704,565.00	\$406,992.42	42.2%
Employee Benefits (-)	\$28,096.37	\$105,224.67	\$226,430.00	\$121,205.33	46.5%
Purchased Services (-)	\$107.25	\$553.95	\$6,500.00	\$5,946.05	8.5%
Supplies & Materials (-)	\$0.00	\$109.28	\$5,200.00	\$5,090.72	2.1%
Capital Expenditures (-)	\$0.00	\$0.00	\$1,500.00	\$1,500.00	0.0%
Other Objects (-)	\$0.00	\$537.00	\$2,000.00	\$1,463.00	26.9%
<b>Sub-total : PRINCIPAL</b>	<b>(\$82,259.97)</b>	<b>(\$403,997.48)</b>	<b>(\$946,195.00)</b>	<b>(\$542,197.52)</b>	<b>42.7%</b>
<b>OPERATION OF BUSINESS SERVICES</b>					
Salaries (-)	\$13,524.94	\$74,387.17	\$175,825.00	\$101,437.83	42.3%
Employee Benefits (-)	\$2,589.45	\$13,230.60	\$31,613.00	\$18,382.40	41.9%
Other Objects (-)	\$0.00	\$1,209.00	\$1,500.00	\$291.00	80.6%
Non-Capitalizer Equipment (-)	\$0.00	\$0.00	\$1,000.00	\$1,000.00	0.0%
<b>Sub-total : OPERATION OF BUSINESS SERVICES</b>	<b>(\$16,114.39)</b>	<b>(\$88,826.77)</b>	<b>(\$209,938.00)</b>	<b>(\$121,111.23)</b>	<b>42.3%</b>
<b>FISCAL SERVICES</b>					
Salaries (-)	\$16,336.74	\$89,972.56	\$214,500.00	\$124,527.44	41.9%
Employee Benefits (-)	\$7,151.75	\$37,320.35	\$89,989.00	\$52,668.65	41.5%
Purchased Services (-)	\$558.45	\$1,989.96	\$118,675.00	\$116,685.04	1.7%
Supplies & Materials (-)	\$243.24	\$1,659.81	\$5,000.00	\$3,340.19	33.2%

Operating Statement with Budget

Lincolnwood School District 74

Treasurers Report FUND- All Funds For the Period 11/01/2020 through 11/30/2020

Fiscal Year: 2020-2021

	<u>11/01/2020 - 11/30/2020</u>	<u>Year To Date</u>	<u>Budget</u>	<u>Budget Balance</u>	
Other Objects (-)	\$1,127.10	\$5,992.07	\$20,000.00	\$14,007.93	30.0%
Non-Capitalized Equipment (-)	\$0.00	\$0.00	\$2,500.00	\$2,500.00	0.0%
<b>Sub-total : FISCAL SERVICES</b>	<b>(\$25,417.28)</b>	<b>(\$136,934.75)</b>	<b>(\$450,664.00)</b>	<b>(\$313,729.25)</b>	<b>30.4%</b>
<b>FACILITY ACQUISITION &amp; CONSTRUCTION</b>					
Purchased Services (-)	\$12,672.49	\$97,144.63	\$125,221.00	\$28,076.37	77.6%
Capital Expenditures (-)	\$38,211.00	\$603,205.97	\$708,500.00	\$105,294.03	85.1%
<b>Sub-total : FACILITY ACQUISITION &amp; CONSTRUCTION</b>	<b>(\$50,883.49)</b>	<b>(\$700,350.60)</b>	<b>(\$833,721.00)</b>	<b>(\$133,370.40)</b>	<b>84.0%</b>
<b>OPERATION &amp; MAINTENANCE OF PLANT</b>					
Salaries (-)	\$36,598.70	\$200,461.55	\$506,000.00	\$305,538.45	39.6%
Employee Benefits (-)	\$13,836.82	\$72,895.32	\$182,193.00	\$109,297.68	40.0%
Purchased Services (-)	\$77,258.93	\$431,945.56	\$916,000.00	\$484,054.44	47.2%
Supplies & Materials (-)	\$33,824.99	\$169,617.27	\$482,616.00	\$312,998.73	35.1%
Capital Expenditures (-)	\$0.00	\$833,097.07	\$1,140,500.00	\$307,402.93	73.0%
Other Objects (-)	\$0.00	\$855.00	\$300.00	(\$555.00)	285.0%
Non-Capitalized Equipment (-)	\$0.00	\$5,559.11	\$21,000.00	\$15,440.89	26.5%
<b>Sub-total : OPERATION &amp; MAINTENANCE OF PLANT</b>	<b>(\$161,519.44)</b>	<b>(\$1,714,430.88)</b>	<b>(\$3,248,609.00)</b>	<b>(\$1,534,178.12)</b>	<b>52.8%</b>
<b>PUPIL TRANSPORTATION</b>					
Purchased Services (-)	\$111,579.00	\$220,195.40	\$1,208,000.00	\$987,804.60	18.2%
<b>Sub-total : PUPIL TRANSPORTATION</b>	<b>(\$111,579.00)</b>	<b>(\$220,195.40)</b>	<b>(\$1,208,000.00)</b>	<b>(\$987,804.60)</b>	<b>18.2%</b>
<b>FOOD SERVICES</b>					
Salaries (-)	\$18,206.73	\$70,924.36	\$232,100.00	\$161,175.64	30.6%
Employee Benefits (-)	\$8,577.11	\$29,270.89	\$99,297.00	\$70,026.11	29.5%
Purchased Services (-)	\$89.90	\$510.38	\$3,000.00	\$2,489.62	17.0%
Supplies & Materials (-)	\$6,379.63	\$28,211.97	\$259,200.00	\$230,988.03	10.9%
Capital Expenditures (-)	\$0.00	\$0.00	\$5,000.00	\$5,000.00	0.0%
Other Objects (-)	\$0.00	\$752.50	\$1,500.00	\$747.50	50.2%
Non-Capitalized Equipment (-)	\$0.00	\$0.00	\$4,500.00	\$4,500.00	0.0%
<b>Sub-total : FOOD SERVICES</b>	<b>(\$33,253.37)</b>	<b>(\$129,670.10)</b>	<b>(\$604,597.00)</b>	<b>(\$474,926.90)</b>	<b>21.4%</b>
<b>INTERNAL SERVICES</b>					
Purchased Services (-)	\$57.15	\$13,517.15	\$20,500.00	\$6,982.85	65.9%
Supplies & Materials (-)	\$0.00	\$0.00	\$1,500.00	\$1,500.00	0.0%
<b>Sub-total : INTERNAL SERVICES</b>	<b>(\$57.15)</b>	<b>(\$13,517.15)</b>	<b>(\$22,000.00)</b>	<b>(\$8,482.85)</b>	<b>61.4%</b>
<b>INFORMATION SERVICES</b>					
Salaries (-)	\$6,153.84	\$33,846.12	\$80,000.00	\$46,153.88	42.3%
Employee Benefits (-)	\$1,815.94	\$9,736.63	\$22,896.00	\$13,159.37	42.5%
Purchased Services (-)	\$2,205.67	\$9,912.16	\$37,000.00	\$27,087.84	26.8%
Supplies & Materials (-)	\$0.00	(\$650.00)	\$6,000.00	\$6,650.00	-10.8%
Other Objects (-)	\$0.00	\$777.52	\$1,500.00	\$722.48	51.8%
<b>Sub-total : INFORMATION SERVICES</b>	<b>(\$10,175.45)</b>	<b>(\$53,622.43)</b>	<b>(\$147,396.00)</b>	<b>(\$93,773.57)</b>	<b>36.4%</b>
<b>OTHER SUPPORT SERVICES - ADMIN</b>					

Operating Statement with Budget

Lincolnwood School District 74

Treasurers Report FUND- All Funds For the Period 11/01/2020 through 11/30/2020

Fiscal Year: 2020-2021

	<u>11/01/2020 - 11/30/2020</u>	<u>Year To Date</u>	<u>Budget</u>	<u>Budget Balance</u>	
Salaries (-)	\$34,328.72	\$177,597.43	\$439,390.00	\$261,792.57	40.4%
Employee Benefits (-)	\$11,895.94	\$60,425.66	\$150,822.00	\$90,396.34	40.1%
Purchased Services (-)	\$0.00	\$22.46	\$1,000.00	\$977.54	2.2%
Other Objects (-)	\$0.00	\$0.00	\$300.00	\$300.00	0.0%
Sub-total : OTHER SUPPORT SERVICES - ADMIN	<u>(\$46,224.66)</u>	<u>(\$238,045.55)</u>	<u>(\$591,512.00)</u>	<u>(\$353,466.45)</u>	40.2%
COMMUNITY SERVICES					
Purchased Services (-)	\$0.00	\$0.00	\$1,000.00	\$1,000.00	0.0%
Supplies & Materials (-)	\$0.00	\$0.00	\$1,000.00	\$1,000.00	0.0%
Sub-total : COMMUNITY SERVICES	<u>\$0.00</u>	<u>\$0.00</u>	<u>(\$2,000.00)</u>	<u>(\$2,000.00)</u>	0.0%
PAYMENTS TO OTHER LEAs					
Purchased Services (-)	\$0.00	\$0.00	\$34,900.00	\$34,900.00	0.0%
Other Objects (-)	\$27,461.41	\$77,924.14	\$1,903,084.00	\$1,825,159.86	4.1%
Sub-total : PAYMENTS TO OTHER LEAs	<u>(\$27,461.41)</u>	<u>(\$77,924.14)</u>	<u>(\$1,937,984.00)</u>	<u>(\$1,860,059.86)</u>	4.0%
DEBT SERVICE - INTEREST					
Interest on Bonds Outstanding (-)	\$0.00	\$0.00	\$534,400.00	\$534,400.00	0.0%
Sub-total : DEBT SERVICE - INTEREST	<u>\$0.00</u>	<u>\$0.00</u>	<u>(\$534,400.00)</u>	<u>(\$534,400.00)</u>	0.0%
DEBT SERVICE - PRINCIPAL					
Principal Payments on Bonds Outstanding (-)	\$0.00	\$0.00	\$1,085,000.00	\$1,085,000.00	0.0%
Sub-total : DEBT SERVICE - PRINCIPAL	<u>\$0.00</u>	<u>\$0.00</u>	<u>(\$1,085,000.00)</u>	<u>(\$1,085,000.00)</u>	0.0%
DEBT SERVICE - OTHER					
Debt Service Fees (-)	\$0.00	\$0.00	\$2,500.00	\$2,500.00	0.0%
Sub-total : DEBT SERVICE - OTHER	<u>\$0.00</u>	<u>\$0.00</u>	<u>(\$2,500.00)</u>	<u>(\$2,500.00)</u>	0.0%
Total : EXPENDITURES	<u>(\$1,835,427.23)</u>	<u>(\$8,454,913.13)</u>	<u>(\$28,371,309.00)</u>	<u>(\$19,916,395.87)</u>	29.8%
NET INCREASE (DECREASE)	<u>(\$1,688,024.81)</u>	<u>\$3,455,030.83</u>	<u>(\$2,334,596.00)</u>	<u>(\$5,789,626.83)</u>	148.0%

End of Report

**Lincolnwood School District 74**

**General Ledger - OBJECT REPORT**

Fiscal Year: 2020-2021 From Date:11/1/2020 To Date:11/30/2020

Account Mask: ??????????????????

Account Type: EXPENDITURE

Print accounts with zero balance       Include Inactive Accounts       Include PreEncumbrance

FUND / TYPE / FUNCTION / OBJECT	Preliminary 2021	Range To Date	Year To Date	Encumbrance	Budget Balance
<b>10 - EDUCATIONAL</b>					
0 - EXPENDITURES					
1100 - REGULAR K-12 PROGRAMS					
100 - SALARIES	\$7,167,047.79	\$569,648.60	\$1,972,387.59	\$5,129,764.10	\$64,896.10
200 - EMPLOYEE BENEFITS	\$1,200,015.64	\$89,833.59	\$298,281.81	\$795,434.84	\$106,298.99
300 - PURCHASED SERVICES	\$193,700.00	\$4,393.84	\$61,750.29	\$3,263.00	\$128,686.71
400 - SUPPLIES & MATERIALS	\$409,143.00	\$80,313.13	\$198,534.38	\$3,933.62	\$206,675.00
500 - CAPITAL OUTLAY	\$102,884.00	\$0.00	\$42,039.00	\$0.00	\$60,845.00
700 - NON-CAPITAL EQUIPMENT	\$67,000.00	\$778.84	\$7,911.05	\$866.16	\$58,222.79
800 - TERMINATION/VACATION PAYMENTS	\$469,295.00	\$29,386.91	\$147,200.54	\$70,646.05	\$251,448.41
1125 - PRE-K PROGRAMS					
100 - SALARIES	\$232,068.08	\$17,784.04	\$62,244.14	\$168,948.31	\$875.63
200 - EMPLOYEE BENEFITS	\$83,399.42	\$6,596.42	\$19,953.06	\$59,541.98	\$3,904.38
300 - PURCHASED SERVICES	\$200.00	\$0.00	\$0.00	\$0.00	\$200.00
400 - SUPPLIES & MATERIALS	\$2,995.00	\$134.72	\$666.42	\$149.11	\$2,179.47
500 - CAPITAL OUTLAY	\$1,000.00	\$0.00	\$0.00	\$0.00	\$1,000.00
700 - NON-CAPITAL EQUIPMENT	\$500.00	\$0.00	\$0.00	\$0.00	\$500.00
1200 - SPECIAL ED PROGRAMS K-12					
100 - SALARIES	\$1,180,669.00	\$75,341.95	\$266,745.24	\$737,644.32	\$176,279.44
200 - EMPLOYEE BENEFITS	\$301,185.00	\$17,236.37	\$56,053.77	\$174,804.75	\$70,326.48
300 - PURCHASED SERVICES	\$500.00	\$0.00	\$0.00	\$0.00	\$500.00
400 - SUPPLIES & MATERIALS	\$5,000.00	\$114.75	\$638.60	\$107.06	\$4,254.34
500 - CAPITAL OUTLAY	\$2,000.00	\$0.00	\$0.00	\$0.00	\$2,000.00
600 - OTHER OBJECTS	\$500.00	\$0.00	\$180.00	\$0.00	\$320.00
700 - NON-CAPITAL EQUIPMENT	\$1,000.00	\$25.90	\$261.44	\$808.50	(\$69.94)
1250 - REMEDIAL & SUPPLEMENTAL K-12					
100 - SALARIES	\$480,490.00	\$36,576.14	\$128,016.49	\$347,473.51	\$5,000.00
200 - EMPLOYEE BENEFITS	\$71,623.80	\$5,717.48	\$17,455.75	\$51,794.39	\$2,373.66
300 - PURCHASED SERVICES	\$35,000.00	\$1,620.00	\$34,583.50	\$0.00	\$416.50
400 - SUPPLIES & MATERIALS	\$6,542.00	\$0.00	\$4,740.42	\$0.00	\$1,801.58
1500 - INTERSCHOLASTIC PROGRAMS					
100 - SALARIES	\$25,060.00	\$0.00	\$0.00	\$0.00	\$25,060.00
200 - EMPLOYEE BENEFITS	\$1,400.00	\$0.00	\$0.00	\$0.00	\$1,400.00
400 - SUPPLIES & MATERIALS	\$1,500.00	\$0.00	\$0.00	\$0.00	\$1,500.00

# Lincolnwood School District 74

## General Ledger - OBJECT REPORT

Fiscal Year: 2020-2021 From Date:11/1/2020 To Date:11/30/2020

Account Mask: ????????????????????

Account Type: EXPENDITURE

Print accounts with zero balance     
  Include Inactive Accounts     
  Include PreEncumbrance

FUND / TYPE / FUNCTION / OBJECT	Preliminary 2021	Range To Date	Year To Date	Encumbrance	Budget Balance
500 - CAPITAL OUTLAY	\$1,000.00	\$0.00	\$0.00	\$0.00	\$1,000.00
600 - OTHER OBJECTS	\$0.00	\$0.00	\$3,500.00	\$0.00	(\$3,500.00)
1650 - GIFTED PROGRAMS					
100 - SALARIES	\$380,816.13	\$18,929.14	\$66,251.99	\$179,827.01	\$134,737.13
200 - EMPLOYEE BENEFITS	\$77,486.14	\$991.46	\$1,956.38	\$34,158.12	\$41,371.64
400 - SUPPLIES & MATERIALS	\$3,000.00	\$0.00	\$554.00	\$108.90	\$2,337.10
1800 - BILINGUAL PROGRAMS					
100 - SALARIES	\$657,562.00	\$49,812.46	\$174,343.61	\$473,218.39	\$10,000.00
200 - EMPLOYEE BENEFITS	\$94,300.00	\$7,687.05	\$23,434.73	\$69,605.36	\$1,259.91
300 - PURCHASED SERVICES	\$2,150.00	\$0.00	\$0.00	\$0.00	\$2,150.00
400 - SUPPLIES & MATERIALS	\$6,500.00	\$0.00	\$2,146.31	\$52.49	\$4,301.20
2110 - ATTENDANCE & SOCIAL WORK					
100 - SALARIES	\$360,288.00	\$29,342.46	\$102,698.61	\$278,753.39	(\$21,164.00)
200 - EMPLOYEE BENEFITS	\$18,072.00	\$2,846.69	\$8,760.14	\$25,875.18	(\$16,563.32)
300 - PURCHASED SERVICES	\$500.00	\$0.00	\$0.00	\$0.00	\$500.00
400 - SUPPLIES & MATERIALS	\$1,000.00	\$0.00	\$43.26	\$0.00	\$956.74
2130 - HEALTH SERVICES					
100 - SALARIES	\$164,250.00	\$7,283.21	\$35,377.43	\$66,335.97	\$62,536.60
200 - EMPLOYEE BENEFITS	\$48,488.00	\$796.12	\$5,147.25	\$13,060.72	\$30,280.03
300 - PURCHASED SERVICES	\$1,500.00	\$28,336.46	\$45,138.96	\$160.60	(\$43,799.56)
400 - SUPPLIES & MATERIALS	\$33,600.00	\$600.00	\$53,354.74	\$3,458.25	(\$23,212.99)
500 - CAPITAL OUTLAY	\$1,500.00	\$0.00	\$0.00	\$0.00	\$1,500.00
600 - OTHER OBJECTS	\$600.00	\$95.00	\$382.70	\$0.00	\$217.30
700 - NON-CAPITAL EQUIPMENT	\$1,500.00	\$0.00	\$0.00	\$0.00	\$1,500.00
2140 - PSYCHOLOGICAL SERVICES					
100 - SALARIES	\$173,997.00	\$13,261.32	\$46,414.62	\$125,982.38	\$1,600.00
200 - EMPLOYEE BENEFITS	\$31,144.00	\$2,552.02	\$7,755.52	\$23,078.98	\$309.50
300 - PURCHASED SERVICES	\$1,000.00	\$79.62	\$739.62	\$699.63	(\$439.25)
400 - SUPPLIES & MATERIALS	\$1,050.00	\$0.00	\$0.00	\$0.00	\$1,050.00
2150 - SPEECH PATHOLOGY & AUDIOLOGY					
100 - SALARIES	\$277,900.00	\$20,875.76	\$73,065.16	\$198,319.64	\$6,515.20
200 - EMPLOYEE BENEFITS	\$33,437.00	\$2,721.55	\$8,321.22	\$24,666.38	\$449.40
400 - SUPPLIES & MATERIALS	\$1,250.00	\$0.00	\$0.00	\$86.00	\$1,164.00
2190 - OTHER SUPPORT SERVICES - PUPILS					
100 - SALARIES	\$59,000.00	\$6,952.28	\$16,435.10	\$7,689.73	\$34,875.17

**Lincolnwood School District 74**

**General Ledger - OBJECT REPORT**

Fiscal Year: 2020-2021 From Date:11/1/2020 To Date:11/30/2020

Account Mask: ????????????????????

Account Type: EXPENDITURE

Print accounts with zero balance     
  Include Inactive Accounts     
  Include PreEncumbrance

FUND / TYPE / FUNCTION / OBJECT	Preliminary 2021	Range To Date	Year To Date	Encumbrance	Budget Balance
200 - EMPLOYEE BENEFITS	\$285.00	\$48.04	\$72.00	\$59.74	\$153.26
2210 - IMPROVEMENT OF INSTRUCTION					
100 - SALARIES	\$351,694.00	\$26,736.84	\$155,522.45	\$195,412.06	\$759.49
200 - EMPLOYEE BENEFITS	\$39,392.00	\$3,334.10	\$17,566.46	\$22,894.68	(\$1,069.14)
300 - PURCHASED SERVICES	\$90,500.00	\$329.00	\$10,171.02	\$0.00	\$80,328.98
400 - SUPPLIES & MATERIALS	\$2,600.00	\$0.00	\$70.94	\$0.00	\$2,529.06
600 - OTHER OBJECTS	\$1,500.00	\$0.00	\$1,489.38	\$0.00	\$10.62
2220 - EDUCATIONAL MEDIA					
100 - SALARIES	\$254,622.00	\$17,365.52	\$60,162.43	\$181,480.38	\$12,979.19
200 - EMPLOYEE BENEFITS	\$27,259.00	\$2,187.23	\$6,678.88	\$20,126.53	\$453.59
400 - SUPPLIES & MATERIALS	\$6,850.00	\$0.00	\$4,196.75	\$579.53	\$2,073.72
2230 - ASSESSMENT & TESTING					
300 - PURCHASED SERVICES	\$14,525.00	\$0.00	\$14,525.00	\$0.00	\$0.00
2310 - BOARD OF EDUCATION					
200 - EMPLOYEE BENEFITS	\$58,000.00	\$4,758.90	\$23,902.50	\$0.00	\$34,097.50
300 - PURCHASED SERVICES	\$236,900.00	\$21,258.51	\$106,838.94	\$0.00	\$130,061.06
400 - SUPPLIES & MATERIALS	\$2,500.00	\$0.00	\$41.72	\$0.00	\$2,458.28
600 - OTHER OBJECTS	\$20,000.00	\$0.00	\$0.00	\$0.00	\$20,000.00
700 - NON-CAPITAL EQUIPMENT	\$1,000.00	\$0.00	\$0.00	\$0.00	\$1,000.00
2320 - SUPERINTENDENT					
100 - SALARIES	\$262,056.00	\$20,158.14	\$110,869.77	\$151,185.98	\$0.25
200 - EMPLOYEE BENEFITS	\$32,369.00	\$2,648.50	\$13,518.67	\$18,843.19	\$7.14
300 - PURCHASED SERVICES	\$3,400.00	\$95.00	\$301.00	\$0.00	\$3,099.00
400 - SUPPLIES & MATERIALS	\$2,000.00	\$0.00	\$101.99	\$0.00	\$1,898.01
500 - CAPITAL OUTLAY	\$500.00	\$0.00	\$0.00	\$0.00	\$500.00
600 - OTHER OBJECTS	\$2,500.00	\$250.00	\$2,191.81	\$0.00	\$308.19
700 - NON-CAPITAL EQUIPMENT	\$1,000.00	\$0.00	\$0.00	\$0.00	\$1,000.00
2330 - ADMINISTRATIVE SERVICES SPECIAL ED					
100 - SALARIES	\$137,451.00	\$10,584.38	\$57,579.23	\$79,382.69	\$489.08
200 - EMPLOYEE BENEFITS	\$46,064.00	\$3,153.52	\$16,306.07	\$22,157.09	\$7,600.84
2410 - PRINCIPAL					
100 - SALARIES	\$704,565.00	\$54,056.35	\$297,572.58	\$405,048.68	\$1,943.74
200 - EMPLOYEE BENEFITS	\$181,780.00	\$15,535.50	\$77,247.38	\$109,365.69	(\$4,833.07)
300 - PURCHASED SERVICES	\$6,500.00	\$107.25	\$553.95	\$0.00	\$5,946.05
400 - SUPPLIES & MATERIALS	\$5,200.00	\$0.00	\$109.28	\$0.00	\$5,090.72

# Lincolnwood School District 74

## General Ledger - OBJECT REPORT

Fiscal Year: 2020-2021 From Date:11/1/2020 To Date:11/30/2020

Account Mask: ????????????????????

Account Type: EXPENDITURE

Print accounts with zero balance     
  Include Inactive Accounts     
  Include PreEncumbrance

FUND / TYPE / FUNCTION / OBJECT	Preliminary 2021	Range To Date	Year To Date	Encumbrance	Budget Balance
500 - CAPITAL OUTLAY	\$1,500.00	\$0.00	\$0.00	\$0.00	\$1,500.00
600 - OTHER OBJECTS	\$2,000.00	\$0.00	\$537.00	\$0.00	\$1,463.00
2510 - DIRECTION OF BUSINESS SUPPORT SERVICES					
100 - SALARIES	\$175,825.00	\$13,524.94	\$74,387.17	\$101,436.99	\$0.84
200 - EMPLOYEE BENEFITS	\$29,088.00	\$2,393.55	\$12,153.04	\$16,950.48	(\$15.52)
600 - OTHER OBJECTS	\$1,500.00	\$0.00	\$1,209.00	\$0.00	\$291.00
700 - NON-CAPITAL EQUIPMENT	\$1,000.00	\$0.00	\$0.00	\$0.00	\$1,000.00
2520 - FISCAL SERVICES					
100 - SALARIES	\$214,500.00	\$16,336.74	\$89,972.56	\$122,525.43	\$2,002.01
200 - EMPLOYEE BENEFITS	\$45,739.00	\$3,809.69	\$18,833.69	\$26,686.33	\$218.98
300 - PURCHASED SERVICES	\$118,675.00	\$558.45	\$1,989.96	\$0.00	\$116,685.04
400 - SUPPLIES & MATERIALS	\$5,000.00	\$243.24	\$1,659.81	\$265.00	\$3,075.19
600 - OTHER OBJECTS	\$20,000.00	\$1,127.10	\$5,992.07	\$0.00	\$14,007.93
700 - NON-CAPITAL EQUIPMENT	\$2,500.00	\$0.00	\$0.00	\$0.00	\$2,500.00
2560 - FOOD SERVICES					
100 - SALARIES	\$232,100.00	\$18,206.73	\$70,924.36	\$130,025.29	\$31,150.35
200 - EMPLOYEE BENEFITS	\$53,628.00	\$4,920.74	\$14,799.46	\$39,797.67	(\$969.13)
300 - PURCHASED SERVICES	\$3,000.00	\$89.90	\$510.38	\$0.00	\$2,489.62
400 - SUPPLIES & MATERIALS	\$259,200.00	\$6,379.63	\$28,211.97	\$0.00	\$230,988.03
500 - CAPITAL OUTLAY	\$5,000.00	\$0.00	\$0.00	\$0.00	\$5,000.00
600 - OTHER OBJECTS	\$1,500.00	\$0.00	\$752.50	\$0.00	\$747.50
700 - NON-CAPITAL EQUIPMENT	\$4,500.00	\$0.00	\$0.00	\$0.00	\$4,500.00
2570 - INTERNAL SERVICES					
300 - PURCHASED SERVICES	\$20,500.00	\$57.15	\$13,517.15	\$0.00	\$6,982.85
400 - SUPPLIES & MATERIALS	\$1,500.00	\$0.00	\$0.00	\$0.00	\$1,500.00
2630 - INFORMATION SERVICES					
100 - SALARIES	\$80,000.00	\$6,153.84	\$33,846.12	\$46,153.88	\$0.00
200 - EMPLOYEE BENEFITS	\$6,221.00	\$517.74	\$2,588.70	\$3,630.41	\$1.89
300 - PURCHASED SERVICES	\$37,000.00	\$2,205.67	\$9,912.16	\$0.00	\$27,087.84
400 - SUPPLIES & MATERIALS	\$6,000.00	\$0.00	(\$650.00)	\$0.00	\$6,650.00
600 - OTHER OBJECTS	\$1,500.00	\$0.00	\$777.52	\$0.00	\$722.48
2660 - OTHER SUPPORT SERVICES - PUPILS					
100 - SALARIES	\$439,390.00	\$34,328.72	\$177,597.43	\$261,129.56	\$663.01
200 - EMPLOYEE BENEFITS	\$82,701.00	\$6,263.84	\$31,785.22	\$44,050.06	\$6,865.72
300 - PURCHASED SERVICES	\$1,000.00	\$0.00	\$22.46	\$0.00	\$977.54

**Lincolnwood School District 74**

**General Ledger - OBJECT REPORT**

Fiscal Year: 2020-2021 From Date:11/1/2020 To Date:11/30/2020

Account Mask: ???????????????????

Account Type: EXPENDITURE

Print accounts with zero balance     
  Include Inactive Accounts     
  Include PreEncumbrance

FUND / TYPE / FUNCTION / OBJECT	Preliminary 2021	Range To Date	Year To Date	Encumbrance	Budget Balance
600 - OTHER OBJECTS	\$300.00	\$0.00	\$0.00	\$0.00	\$300.00
3000 - COMMUNITY SERVICES					
300 - PURCHASED SERVICES	\$1,000.00	\$0.00	\$0.00	\$0.00	\$1,000.00
400 - SUPPLIES & MATERIALS	\$1,000.00	\$0.00	\$0.00	\$0.00	\$1,000.00
4120 - PAYMENTS FOR SPECIAL ED PROGRAMS					
300 - PURCHASED SERVICES	\$34,900.00	\$0.00	\$0.00	\$0.00	\$34,900.00
600 - OTHER OBJECTS	\$1,903,084.00	\$27,461.41	\$77,924.14	\$0.00	\$1,825,159.86
0 - EXPENDITURES Total:	\$20,759,971.00	\$1,455,851.14	\$5,642,308.91	\$11,069,504.16	\$4,048,157.93
10 - EDUCATIONAL Total:	\$20,759,971.00	\$1,455,851.14	\$5,642,308.91	\$11,069,504.16	\$4,048,157.93

**Lincolnwood School District 74**

**General Ledger - OBJECT REPORT**

Fiscal Year: 2020-2021 From Date:11/1/2020 To Date:11/30/2020

Account Mask: ????????????????????

Account Type: EXPENDITURE

Print accounts with zero balance     
  Include Inactive Accounts     
  Include PreEncumbrance

FUND / TYPE / FUNCTION / OBJECT	Preliminary 2021	Range To Date	Year To Date	Encumbrance	Budget Balance
20 - OPERATIONS & MAINTENANCE					
0 - EXPENDITURES					
2540 - OPERATIONS & MAINTENANCE OF PLANTS					
100 - SALARIES	\$506,000.00	\$36,598.70	\$200,461.55	\$253,242.15	\$52,296.30
200 - EMPLOYEE BENEFITS	\$74,085.00	\$6,175.96	\$30,864.02	\$43,240.16	(\$19.18)
300 - PURCHASED SERVICES	\$916,000.00	\$77,258.93	\$431,945.56	\$12,967.00	\$471,087.44
400 - SUPPLIES & MATERIALS	\$482,616.00	\$33,824.99	\$169,617.27	\$11,020.30	\$301,978.43
500 - CAPITAL OUTLAY	\$173,500.00	\$0.00	\$31,107.07	\$4,998.24	\$137,394.69
600 - OTHER OBJECTS	\$300.00	\$0.00	\$855.00	\$0.00	(\$555.00)
700 - NON-CAPITAL EQUIPMENT	\$21,000.00	\$0.00	\$5,559.11	\$0.00	\$15,440.89
0 - EXPENDITURES Total:	\$2,173,501.00	\$153,858.58	\$870,409.58	\$325,467.85	\$977,623.57
20 - OPERATIONS & MAINTENANCE Total:	\$2,173,501.00	\$153,858.58	\$870,409.58	\$325,467.85	\$977,623.57

**Lincolnwood School District 74**

**General Ledger - OBJECT REPORT**

Fiscal Year: 2020-2021 From Date:11/1/2020 To Date:11/30/2020

Account Mask: ????????????????????

Account Type: EXPENDITURE

Print accounts with zero balance       Include Inactive Accounts       Include PreEncumbrance

FUND / TYPE / FUNCTION / OBJECT	Preliminary 2021	Range To Date	Year To Date	Encumbrance	Budget Balance
30 - DEBT SERVICE					
0 - EXPENDITURES					
5140 - DEBT SERVICE - INTEREST PAYMENTS					
600 - OTHER OBJECTS	\$534,400.00	\$0.00	\$0.00	\$0.00	\$534,400.00
5200 - INTEREST ON BONDS OUTSTANDING					
600 - OTHER OBJECTS	\$1,085,000.00	\$0.00	\$0.00	\$0.00	\$1,085,000.00
5400 - DEBT SERVICE LEASES					
600 - OTHER OBJECTS	\$2,500.00	\$0.00	\$0.00	\$0.00	\$2,500.00
0 - EXPENDITURES Total:	\$1,621,900.00	\$0.00	\$0.00	\$0.00	\$1,621,900.00
30 - DEBT SERVICE Total:	\$1,621,900.00	\$0.00	\$0.00	\$0.00	\$1,621,900.00

Lincolnwood School District 74

General Ledger - OBJECT REPORT

Fiscal Year: 2020-2021 From Date:11/1/2020 To Date:11/30/2020

Account Mask: ??????????????????

Account Type: EXPENDITURE

Print accounts with zero balance  Include Inactive Accounts  Include PreEncumbrance

FUND / TYPE / FUNCTION / OBJECT

Preliminary 2021 Range To Date Year To Date Encumbrance Budget Balance

40 - TRANSPORTATION

0 - EXPENDITURES

2550 - PUPIL TRANSPORTATION

300 - PURCHASED SERVICES

\$1,208,000.00	\$111,579.00	\$220,195.40	\$0.00	\$987,804.60
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0 - EXPENDITURES Total:	\$1,208,000.00	\$111,579.00	\$220,195.40	\$0.00	\$987,804.60
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40 - TRANSPORTATION Total:	\$1,208,000.00	\$111,579.00	\$220,195.40	\$0.00	\$987,804.60
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# Lincolnwood School District 74

## General Ledger - OBJECT REPORT

Fiscal Year: 2020-2021 From Date:11/1/2020 To Date:11/30/2020

Account Mask: ????????????????????

Account Type: EXPENDITURE

Print accounts with zero balance     
  Include Inactive Accounts     
  Include PreEncumbrance

FUND / TYPE / FUNCTION / OBJECT	Preliminary 2021	Range To Date	Year To Date	Encumbrance	Budget Balance
51 - IMRF					
0 - EXPENDITURES					
1100 - REGULAR K-12 PROGRAMS					
200 - EMPLOYEE BENEFITS	\$750.00	\$203.77	\$574.60	\$164.16	\$11.24
1125 - PRE-K PROGRAMS					
200 - EMPLOYEE BENEFITS	\$6,213.00	\$503.72	\$1,763.02	\$4,785.34	(\$335.36)
1200 - SPECIAL ED PROGRAMS K-12					
200 - EMPLOYEE BENEFITS	\$48,425.00	\$11,877.38	\$17,399.88	\$23,827.56	\$7,197.56
1500 - INTERSCHOLASTIC PROGRAMS					
200 - EMPLOYEE BENEFITS	\$3,000.00	\$0.00	\$0.00	\$0.00	\$3,000.00
2130 - HEALTH SERVICES					
200 - EMPLOYEE BENEFITS	\$20,685.00	\$997.80	\$4,846.69	\$9,088.14	\$6,750.17
2190 - OTHER SUPPORT SERVICES - PUPILS					
200 - EMPLOYEE BENEFITS	\$400.00	\$0.00	\$0.00	\$0.00	\$400.00
2210 - IMPROVEMENT OF INSTRUCTION					
200 - EMPLOYEE BENEFITS	\$7,410.00	\$600.70	\$3,303.85	\$4,505.24	(\$399.09)
2330 - ADMINISTRATIVE SERVICES SPECIAL ED					
200 - EMPLOYEE BENEFITS	\$2,100.00	\$181.96	\$913.82	\$1,364.70	(\$178.52)
2410 - PRINCIPAL					
200 - EMPLOYEE BENEFITS	\$23,300.00	\$11,090.98	\$19,751.01	\$14,322.20	(\$10,773.21)
2520 - FISCAL SERVICES					
200 - EMPLOYEE BENEFITS	\$28,000.00	\$2,238.14	\$12,326.28	\$16,786.02	(\$1,112.30)
2540 - OPERATIONS & MAINTENANCE OF PLANTS					
200 - EMPLOYEE BENEFITS	\$66,408.00	\$5,008.76	\$27,434.28	\$34,654.66	\$4,319.06
2560 - FOOD SERVICES					
200 - EMPLOYEE BENEFITS	\$29,659.00	\$2,413.95	\$9,496.90	\$17,765.56	\$2,396.54
2630 - INFORMATION SERVICES					
200 - EMPLOYEE BENEFITS	\$10,500.00	\$843.08	\$4,636.94	\$6,323.11	(\$460.05)
2660 - OTHER SUPPORT SERVICES - PUPILS					
200 - EMPLOYEE BENEFITS	\$41,921.00	\$3,631.86	\$18,439.35	\$27,740.94	(\$4,259.29)
0 - EXPENDITURES Total:	\$288,771.00	\$39,592.10	\$120,886.62	\$161,327.63	\$6,556.75
51 - IMRF Total:	\$288,771.00	\$39,592.10	\$120,886.62	\$161,327.63	\$6,556.75

# Lincolnwood School District 74

## General Ledger - OBJECT REPORT

Fiscal Year: 2020-2021 From Date:11/1/2020 To Date:11/30/2020

Account Mask: ????????????????????

Account Type: EXPENDITURE

Print accounts with zero balance     
  Include Inactive Accounts     
  Include PreEncumbrance

FUND / TYPE / FUNCTION / OBJECT	Preliminary 2021	Range To Date	Year To Date	Encumbrance	Budget Balance
52 - SOCIAL SECURITY AND MEDICARE					
0 - EXPENDITURES					
1100 - REGULAR K-12 PROGRAMS					
200 - EMPLOYEE BENEFITS	\$107,115.00	\$8,643.91	\$29,697.21	\$70,193.25	\$7,224.54
1125 - PRE-K PROGRAMS					
200 - EMPLOYEE BENEFITS	\$4,450.00	\$324.30	\$1,201.02	\$3,146.69	\$102.29
1200 - SPECIAL ED PROGRAMS K-12					
200 - EMPLOYEE BENEFITS	\$37,170.00	\$1,805.73	\$6,422.88	\$18,289.29	\$12,457.83
1250 - REMEDIAL & SUPPLEMENTAL K-12					
200 - EMPLOYEE BENEFITS	\$6,725.00	\$500.64	\$1,766.98	\$4,770.50	\$187.52
1500 - INTERSCHOLASTIC PROGRAMS					
200 - EMPLOYEE BENEFITS	\$3,825.00	\$0.00	\$0.00	\$0.00	\$3,825.00
1650 - GIFTED PROGRAMS					
200 - EMPLOYEE BENEFITS	\$5,275.00	\$255.34	\$903.26	\$2,435.30	\$1,936.44
1800 - BILINGUAL PROGRAMS					
200 - EMPLOYEE BENEFITS	\$9,305.00	\$681.60	\$2,406.73	\$6,493.85	\$404.42
2110 - ATTENDANCE & SOCIAL WORK					
200 - EMPLOYEE BENEFITS	\$4,225.00	\$411.67	\$1,447.77	\$3,913.09	(\$1,135.86)
2130 - HEALTH SERVICES					
200 - EMPLOYEE BENEFITS	\$11,450.00	\$523.07	\$2,517.48	\$4,574.51	\$4,358.01
2140 - PSYCHOLOGICAL SERVICES					
200 - EMPLOYEE BENEFITS	\$2,500.00	\$178.91	\$633.09	\$1,704.20	\$162.71
2150 - SPEECH PATHOLOGY & AUDIOLOGY					
200 - EMPLOYEE BENEFITS	\$3,825.00	\$278.82	\$985.89	\$2,658.79	\$180.32
2190 - OTHER SUPPORT SERVICES - PUPILS					
200 - EMPLOYEE BENEFITS	\$3,565.00	\$331.05	\$956.29	\$337.73	\$2,270.98
2210 - IMPROVEMENT OF INSTRUCTION					
200 - EMPLOYEE BENEFITS	\$8,425.00	\$652.37	\$3,706.35	\$4,808.72	(\$90.07)
2220 - EDUCATIONAL MEDIA					
200 - EMPLOYEE BENEFITS	\$3,600.00	\$238.38	\$833.21	\$2,509.03	\$257.76
2320 - SUPERINTENDENT					
200 - EMPLOYEE BENEFITS	\$4,000.00	\$296.32	\$1,627.75	\$2,220.39	\$151.86
2330 - ADMINISTRATIVE SERVICES SPECIAL ED					
200 - EMPLOYEE BENEFITS	\$2,780.00	\$228.22	\$1,197.26	\$1,717.05	(\$134.31)
2410 - PRINCIPAL					

Lincolnwood School District 74

General Ledger - OBJECT REPORT

Fiscal Year: 2020-2021 From Date:11/1/2020 To Date:11/30/2020

Account Mask: ??????????????????

Account Type: EXPENDITURE

Print accounts with zero balance  Include Inactive Accounts  Include PreEncumbrance

FUND / TYPE / FUNCTION / OBJECT	Preliminary 2021	Range To Date	Year To Date	Encumbrance	Budget Balance
200 - EMPLOYEE BENEFITS	\$21,350.00	\$1,469.89	\$8,226.28	\$11,082.16	\$2,041.56
2510 - DIRECTION OF BUSINESS SUPPORT SERVICES					
200 - EMPLOYEE BENEFITS	\$2,525.00	\$195.90	\$1,077.56	\$1,469.36	(\$21.92)
2520 - FISCAL SERVICES					
200 - EMPLOYEE BENEFITS	\$16,250.00	\$1,103.92	\$6,160.38	\$8,351.03	\$1,738.59
2540 - OPERATIONS & MAINTENANCE OF PLANTS					
200 - EMPLOYEE BENEFITS	\$41,700.00	\$2,652.10	\$14,597.02	\$18,337.60	\$8,765.38
2560 - FOOD SERVICES					
200 - EMPLOYEE BENEFITS	\$16,010.00	\$1,242.42	\$4,974.53	\$8,734.30	\$2,301.17
2630 - INFORMATION SERVICES					
200 - EMPLOYEE BENEFITS	\$6,175.00	\$455.12	\$2,510.99	\$3,421.24	\$242.77
2660 - OTHER SUPPORT SERVICES - PUPILS					
200 - EMPLOYEE BENEFITS	\$26,200.00	\$2,000.24	\$10,201.09	\$15,351.08	\$647.83
0 - EXPENDITURES Total:	\$348,445.00	\$24,469.92	\$104,051.02	\$196,519.16	\$47,874.82
52 - SOCIAL SECURITY AND MEDICARE Total:	\$348,445.00	\$24,469.92	\$104,051.02	\$196,519.16	\$47,874.82

Lincolnwood School District 74

General Ledger - OBJECT REPORT

Fiscal Year: 2020-2021 From Date:11/1/2020 To Date:11/30/2020

Account Mask: ??????????????????

Account Type: EXPENDITURE

Print accounts with zero balance  Include Inactive Accounts  Include PreEncumbrance

FUND / TYPE / FUNCTION / OBJECT

Preliminary 2021 Range To Date Year To Date Encumbrance Budget Balance

60 - CAPITAL PROJECTS

0 - EXPENDITURES

2530 - FACILITY ACQUISITION & CONSTRUCTION

300 - PURCHASED SERVICES

\$66,471.00 \$4,966.87 \$68,594.03 \$0.00 (\$2,123.03)

500 - CAPITAL OUTLAY

\$708,500.00 \$38,211.00 \$603,205.97 \$17,065.00 \$88,229.03

2540 - OPERATIONS & MAINTENANCE OF PLANTS

500 - CAPITAL OUTLAY

\$10,000.00 \$0.00 \$0.00 \$2,418.90 \$7,581.10

0 - EXPENDITURES Total: \$784,971.00 \$43,177.87 \$671,800.00 \$19,483.90 \$93,687.10

60 - CAPITAL PROJECTS Total: \$784,971.00 \$43,177.87 \$671,800.00 \$19,483.90 \$93,687.10

Lincolnwood School District 74

General Ledger - OBJECT REPORT

Fiscal Year: 2020-2021 From Date:11/1/2020 To Date:11/30/2020

Account Mask: ??????????????????

Account Type: EXPENDITURE

Print accounts with zero balance  Include Inactive Accounts  Include PreEncumbrance

FUND / TYPE / FUNCTION / OBJECT	Preliminary 2021	Range To Date	Year To Date	Encumbrance	Budget Balance
80 - TORT IMMUNITY					
0 - EXPENDITURES					
2362 - WORKERS COMPENSATION INSURANCE					
300 - PURCHASED SERVICES	\$90,000.00	(\$807.00)	(\$5,279.00)	\$0.00	\$95,279.00
2366 - JUDGMENTS/SETTLEMENTS					
600 - OTHER OBJECTS	\$5,000.00	\$0.00	\$0.00	\$0.00	\$5,000.00
2371 - PROPERTY INSURANCE					
300 - PURCHASED SERVICES	\$75,000.00	\$0.00	\$0.00	\$0.00	\$75,000.00
0 - EXPENDITURES Total:	\$170,000.00	(\$807.00)	(\$5,279.00)	\$0.00	\$175,279.00
80 - TORT IMMUNITY Total:	\$170,000.00	(\$807.00)	(\$5,279.00)	\$0.00	\$175,279.00

Lincolnwood School District 74

General Ledger - OBJECT REPORT

Fiscal Year: 2020-2021 From Date:11/1/2020 To Date:11/30/2020

Account Mask: ??????????????????

Account Type: EXPENDITURE

Print accounts with zero balance  Include Inactive Accounts  Include PreEncumbrance

FUND / TYPE / FUNCTION / OBJECT	Preliminary 2021	Range To Date	Year To Date	Encumbrance	Budget Balance
90 - FIRE PREVENTION & SAFETY					
0 - EXPENDITURES					
2530 - FACILITY ACQUISITION & CONSTRUCTION					
300 - PURCHASED SERVICES	\$58,750.00	\$7,705.62	\$28,550.60	\$0.00	\$30,199.40
2540 - OPERATIONS & MAINTENANCE OF PLANTS					
500 - CAPITAL OUTLAY	\$957,000.00	\$0.00	\$801,990.00	\$0.00	\$155,010.00
0 - EXPENDITURES Total:	\$1,015,750.00	\$7,705.62	\$830,540.60	\$0.00	\$185,209.40
90 - FIRE PREVENTION & SAFETY Total:	\$1,015,750.00	\$7,705.62	\$830,540.60	\$0.00	\$185,209.40

Lincolnwood School District 74

General Ledger - OBJECT REPORT

Fiscal Year: 2020-2021 From Date:11/1/2020 To Date:11/30/2020

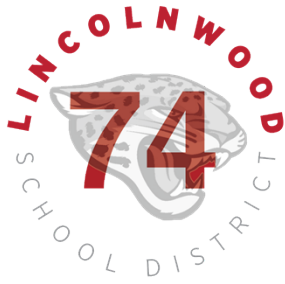
Account Mask: ??????????????????

Account Type: EXPENDITURE

- Print accounts with zero balance
  Include Inactive Accounts
  Include PreEncumbrance

FUND / TYPE / FUNCTION / OBJECT	Preliminary 2021	Range To Date	Year To Date	Encumbrance	Budget Balance
Grand Total:	\$28,371,309.00	\$1,835,427.23	\$8,454,913.13	\$11,772,302.70	\$8,144,093.17

End of Report



## Executive Summary Finance Committee Meeting

DATE: January 21, 2021

TOPIC: Pitney Bowes Postage Meter Lease Renewal

PREPARED BY: Courtney Whited

### **Recommended for:**

- Action
- Discussion
- Information

### **Purpose/Background:**

District Legal Counsel has reviewed this agreement. It was noted the beginning and end dates are not on the contract so the Business Office was advised to watch incoming invoices and save a copy of the first one with the new amount billed and staple it to the contract. As for the rest of the terms, which are just incorporated from the multi-state master agreement and the Illinois-specific renewal, the key points are:

- PB will not be liable for any damages (p. 8 of Illinois)
- The agreement is subject to the laws of the state of Delaware (p. 20 of master)
- There is a mandatory arbitration clause (p. 20 of master)
- PB is entitled to attorney's fees in the event they have to file an action against a client and are successful. (p. 20 of master)

Legal counsel did not expect Pitney Bowes to be willing to negotiate or modify these. Pitney Bowes did not make any requested modifications. Given the nature of the contract (small monthly fee, rental of postage equipment and supplies), it is fairly low risk and these terms should not be a problem. There is an extensive multi-state master agreement as well as a renewal that was negotiated by the State of Illinois, which are located here:

Master agreement (multi-state, with AZ as lead) including 6 amendments:

[https://www.pitneybowes.com/content/dam/pitneybowes/us/en/states/arizona/unofficial\\_compilation\\_of\\_naspovp\\_master\\_agreement\\_adspo16-169897\\_terms\\_with\\_amendments1\\_thru\\_6\\_-\\_final.pdf](https://www.pitneybowes.com/content/dam/pitneybowes/us/en/states/arizona/unofficial_compilation_of_naspovp_master_agreement_adspo16-169897_terms_with_amendments1_thru_6_-_final.pdf)

Illinois contract renewal:

[https://www.pitneybowes.com/content/dam/pitneybowes/us/en/states/illinois/JPMC-NVP\\_Mailroom\\_Equipment\\_Contractehd.pdf](https://www.pitneybowes.com/content/dam/pitneybowes/us/en/states/illinois/JPMC-NVP_Mailroom_Equipment_Contractehd.pdf)

**Fiscal Impact:**

\$9,821.40 total billed quarterly at \$491.07 over a 60-month term.

There would be a \$1,518.60 savings over the course of this 60-month lease period versus the prior 60-month period.

	<b>Monthly</b>	<b>Billed Quarterly</b>	<b>5-Year Total</b>
<b>2021-2025 Term</b>	\$163.69	\$491.07	\$9,821.40
<b>2016-2020 Term</b>	\$189.00	\$567.00	\$11,340.00

**Recommendation:**

It is the Administrative recommendation that the Finance Committee concurs to recommend to the Board of Education to approve the 60-month agreement with Pitney Bowes in the amount of \$9,821.40 for postage meter leasing.



# NASPO ValuePoint FMV Lease Agreement (Option C)

--	--	--	--	--	--	--	--	--	--	--	--	--	--

Agreement Number

## Your Business Information

**Full Legal Name of Lessee / DBA Name of Lessee** **Tax ID # (FEIN/TIN)**

SCHOOL DISTRICT 74 OF LINCOLNWOOD

### Sold-To: Address

6950 N East Prairie Rd, Lincolnwood, IL, 60712-2520, US

<b>Sold-To: Contact Name</b>	<b>Sold-To: Contact Phone #</b>	<b>Sold-To: Account #</b>
Courtney Whited	8477453705	0011029107

### Bill-To: Address

6950 N East Prairie Rd, Lincolnwood, IL, 60712-2520, US

<b>Bill-To: Contact Name</b>	<b>Bill-To: Contact Phone #</b>	<b>Bill-To: Account #</b>	<b>Bill-To: Email</b>
Courtney Whited	8477453705	0011029107	cwhited@sd74.org

### Ship-To: Address

6950 N East Prairie Rd, Lincolnwood, IL, 60712-2520, US

<b>Ship-To: Contact Name</b>	<b>Ship-To: Contact Phone #</b>	<b>Ship-To: Account #</b>
Courtney Whited	8477453705	0011029107

**PO #**

## Your Business Needs

Qty	Item	Business Solution Description
1	SENDPROCAUTO	SendPro C Auto
1	1E40	4" White Label Printer
1	1FXA	Interface to InView Dashboard
1	7H00	C Series IMI Meter
1	993-4B	DM400C Return Kit - Upgrade to 9H00
1	APAC	Connect+ Accounting Weight Break Reports
1	APAX	Cost Acctg Accounts Level (100)
1	APB2	Cost Accounting Devices (10)
1	APKN	Account List Import/Export
1	C5CC	Sendpro C Auto 95
1	CAAB	Basic Cost Accounting
1	ME1A	Meter Equipment - C Series
1	MP81	C Series Integrated Scale
1	PAB1	C Series Premium App Bundle

1	PTJ1	SendPro Online
1	PTJ4	Multicarrier Sending App w/HW or Meter
1	PTJ8	SendPro Mailing Included W/ HW
1	PTJC	SendPro Individual
1	PTJN	Single User Access
1	PTK1	Web Browser Integration
1	PTK2	SendPro C Series Shipping Integration
1	STDSLA	Standard SLA-Equipment Service Agreement (for SendPro C Auto)
1	ZH24	Manual Weight Entry
1	ZH29	HZ03 95 LPM Speed
1	ZHC5	SendPro C500 Base System Identifier
1	ZHD5	USPS Rates with Metered Letter
1	ZHD7	E Conf Services for Metered LTR. BDL
1	ZHWL	5lb/3kg Weighing Option for MP81

### Your Payment Plan

<b>Initial Term: 60 months</b>	<b>Initial Payment Amount:</b>	
<b>Number of Months</b>	<b>Monthly Amount</b>	<b>Billed Quarterly at*</b>
<b>60</b>	<b>\$ 163.69</b>	<b>\$ 491.07</b>

\*Does not include any applicable sales, use, or property taxes which will be billed separately.

- Tax Exempt Certificate Attached
- Tax Exempt Certificate Not Required
- Purchase Power® transaction fees included
- Purchase Power® transaction fees extra

**Your Signature Below**

By signing below, you agree to be bound by your State's/Entity's/Cooperative's contract, which is available at <http://www.pb.com/states> and is incorporated by reference. The terms and conditions of this contract will govern this transaction and be binding on us after we have completed our credit and documentation approval process and have signed below.

NASPO VALUPOINT ADSPO16-169897; 18-510CPOGS-CPOGS-P-1799  
State/Entity's Contract#

\_\_\_\_\_  
Lessee Signature  
\_\_\_\_\_  
Print Name  
\_\_\_\_\_  
Title  
\_\_\_\_\_  
Date  
\_\_\_\_\_  
Email Address

*Roger Donohue*

\_\_\_\_\_  
Pitney Bowes Signature  
Roger Donohue  
\_\_\_\_\_  
Print Name  
Operations Manager  
\_\_\_\_\_  
Title  
December 11, 2020  
\_\_\_\_\_  
Date

**Sales Information**

Davinder Heslin	davinder.heslin@pb.com	
Account Rep Name	Email Address	PBGFS Acceptance

**2881696-403**  
 Agreement Number

**PITNEY BOWES LEASE AGREEMENT  
 STATE & LOCAL FAIR MARKET VALUE LEASE**

**Your Business Information**

SCHOOL DISTRICT 74 OF LINCOLNWOOD

Full Legal Name of Lessee: SCHOOL DISTRICT 74 OF LINCOLNWOOD  
 DBA Name of Lessee: LINCOLNWOOD  
 Tax ID # (FEIN/TIN): IL 60712-2520  
 Billing Address: Street: 6950 NE PRAIRIE RD  
 City: City State Zip+4: IL 60712-2520

Billing Contact Name: \_\_\_\_\_ Billing Contact Phone #: 17378790202 Billing CAN #: \_\_\_\_\_

Installation Address (if different from billing address): Street: 6950 NE PRAIRIE RD  
 City: LINCOLNWOOD  
 State: IL Zip+4: 60712-2520

Installation Contact Name: Robert Ciserella  
 Installation Contact Phone #: 847-745-3705  
 Installation CAN #: 17378790202

Fiscal Period (from - to): July 1, 2016 - June 30, 2017

**Your Business Needs**

Qty	Business Solution Description
1	Mall Stream Solution - 1
1	DM400C Digital Meter System
1	IntelliLink Interface / PSD for DM300C/ DM400C/DM450C w/P
1	Basic Accounting (50 Accounts)
1	85 LPM Feature
1	5 lb Integrated Weighing
1	Integrated Weighing Platform
1	pbSmartPostage Free
1	IntelliLink Subscription
1	Digital Access Connection Accepted

Check additional items to be included in client's payment

- Service Level Agreement  
Tier 1 - Provides repair and maintenance service for equipment (Standard SLA)
- Software Maintenance (additional terms apply) - Provides revision updates & technical assistance
- Meter Rental  
( ) Value Based Services (not including USPS fees which will be charged separately)
- Purchase Power® - A line of credit providing a convenient way to mail now and pay later.  
Consolidate meter postage, permit postage and supplies under one account - see terms & conditions
- Equipment Replacement Program - Protection in case of loss or damage to leased equipment.  
( ) Yes I want to enroll in the ValueMAX® equipment replacement program  
 ( ) No Enrollment (I will provide proof of insurance within the next 30 days as noted in Section 10)

**Your Payment Plan**

Initial Term: 60 months

Number Of Months	Monthly Amount	Billed Quarterly At*
First 60	\$189	\$567

- ( ) Required advance check of \$( ) received
- ( ) Tax Exempt Certificate Attached
- ( ) Tax Exempt Certificate Not Required

\*Does not include any applicable sales, use, or property taxes which will be billed separately; payment plans begin after any applicable Interm Usage Period.

**Your Signature Below**

Non-Appropriation: You warrant that you have funds available to pay all payments until the end of your current fiscal period, and shall use your best efforts to obtain funds to pay all payments in each subsequent fiscal period through the end of your Lease Term. If your appropriation request to your legislative body, or funding authority ("Governing Body") for funds to pay the payments is denied, you may terminate this Lease on the 1st day of the fiscal period for which funds have been appropriated, upon the submission of documentation reasonably satisfactory to us evidencing the Governing Body's denial of an appropriation sufficient to continue this Lease for the next succeeding fiscal period, and the satisfaction of all charges and obligations under this Lease incurred through the end of the fiscal period for which funds have been appropriated, including the return of the equipment at your expense.

By signing below, you agree to be bound by all the terms of this Agreement, including those contained on page 2 and those located in the Pitney Bowes Terms (Version 1/11), which are available at [www.pb.com/terms](http://www.pb.com/terms) and are incorporated by reference. You acknowledge that you may not cancel the lease for any reason and that all payments due to Pitney Bowes are unconditional. This lease will be binding on us after we have completed our credit and documentation approval process and have signed below. The lease requires you either to provide proof of insurance or participate in the ValueMAX® equipment replacement program (see Section 10 page 2) for an additional fee.

Lessee Signature: *Robert J. Ciserella*

Print Name: Robert J. Ciserella

Title: Business Manager

Date: 3/17/16

Email Address: rciserella@SD74.org

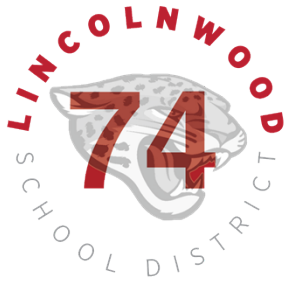
Sales Information: Carrie Coletta, District Office, 473

Pitney Bowes Signature: *Salvatore Polletta*

Print Name: Salvatore Polletta

Title: Director, Credit & New Business Operations

Date: Thursday, March 31, 2016



## Executive Summary Finance Committee Meeting

DATE: January 21, 2021

TOPIC: Property/Casualty Insurance Alternatives to Collective Liability Insurance Cooperative (CLIC)

PREPARED BY: Courtney Whited

### Recommended for:

- Action
- Discussion
- Information

### Purpose/Background:

As requested by the Finance Committee in FY20, Administration explored property/casualty insurance alternatives to its current provider, CLIC. The District's Legal Counsel has not reviewed either insurance company's quote. These findings are presented in time to draft a reservation of rights letter to CLIC, if the Committee deems it necessary.

### Historical Fiscal Impact:

CLIC	Annual Cost for Property/Casualty	Cost Change Over Prior Year	Percentage Change Over Prior Year
2020-21	\$75,171	+ \$10,637	+ 16.5 %
2019-20	\$64,534	+ \$4,443	+ 7.4 %
2018-19	\$60,091		

The 16.5% increase that took place in 2020-21 was attributed to market conditions. An exploration of alternative insurance plans indicates the market is currently offering coverage in a higher price range (~\$15,000 - \$19,000) than what SD74 currently pays.

Liberty Mutual quoted an annual coverage plan with an estimated cost of \$90,652.

Selective quoted an annual coverage plan with an estimated cost of \$94,059.

**Recommendation:**

This summary and the attachments are for informational purposes. The Administration requests direction from the Finance Committee on any next steps.

# LINCOLNWOOD SCHOOL DISTRICT 74 PROPOSAL

EFFECTIVE: 01/01/2021 - 01/01/2022

PREPARED FOR:  
LINCOLNWOOD SCHOOL DISTRICT 74  
6950 N EAST PRAIRIE RD.  
LINCOLNWOOD, IL 60712



PROVIDED BY:

**Liberty Mutual**<sup>®</sup>  
**INSURANCE**

PROVIDED ON: 11/18/2020

PROPOSAL EXPIRATION DATE: 1/1/2021

*Liberty Mutual Insurance is the marketing name for the property and casualty insurance operations of Liberty Mutual Insurance Company and its' affiliates, 175 Berkeley Street, Boston, MA 02116. Not all insurance coverages are available in all states and policy terms may vary based on individual state requirements. This proposal may include a policy from a Liberty Mutual nonadmitted surplus lines affiliate that is not licensed in your state. Surplus lines insurers generally do not participate in state guaranty funds and coverage may only be obtained through a duly licensed surplus lines brokers.*

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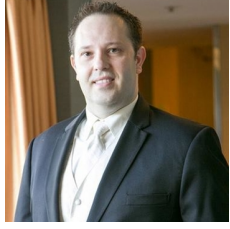
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Please refer to the attached documents for details about other lines of business.

# Account Team



**Daniel Corsiuk**  
Underwriter

312-761-7423  
[Email me](#)

*Responsible for account underwriting and a liaison for the Broker/Customer*

- Account Pricing
- Business Coordination
- Policy Coverage
- Risk Evaluation/Loss and Hazard Analysis

# Summary

Line of Coverage	Effective Date	Rating Plan	Underwriting Company	Pay Plan	Estimated Annual Premium*
Commercial Auto	01/01/2021	Guaranteed Cost	LM Insurance Corporation	Monthly 15%/11	\$3,119
General Liability	01/01/2021	Guaranteed Cost	Lm Insurance Corporation	Monthly 15%/11	\$11,040
School Leaders Errors Omissions	01/01/2021	Guaranteed Cost	Liberty Mutual Fire Insurance Company	Monthly 15%/11	\$3,188
Property	01/01/2021	N/A	Liberty Mutual Fire Insurance Company	Monthly 15%/11	\$56,723
Crime	01/01/2021	Guaranteed Cost	Employers Insurance Company of Wausau	Monthly 15%/11	\$3,739
Umbrella	01/01/2021	Guaranteed Cost	Liberty Insurance Corporation	Monthly 15%/11	\$12,843
<b>Total Estimated Premium</b>					<b>\$90,652</b>

\*Estimated annual premium includes Terrorism Risk Insurance Act (TRIA) premium, taxes, assessments and surcharges.

## Payment Terms:

- Commissions will be paid in accordance with the payment plans established for the customer.
- Mid-Term premium endorsements will be: **Bill Now - Outside Payment Plan**
- **Customer** will be billed for premium, taxes, assessments, and surcharges.
- Pay Terms Offered: **Non-ACH**

# Invoice

**Remit payment to:**

Liberty Mutual Insurance

P.O. Box 1449

New York, NY 10116-1449

Questions Call: 1-800-320-7582

LINCOLNWOOD SCHOOL DISTRICT 74

**Pay Terms Offered\***

Effective: 01/01/2021 to 01/01/2022

Line of Coverage	Pay Plan	Deposit Amount	Installment Amount	Grand Total
Commercial Auto	Monthly 15%/11	\$467.85	\$241.01	\$3,119.00
General Liability	Monthly 15%/11	\$1,656.00	\$853.09	\$11,040.00
School Leaders Errors Omissions	Monthly 15%/11	\$478.20	\$246.35	\$3,188.00
Property	Monthly 15%/11	\$8,508.45	\$4,383.14	\$56,723.00
Crime	Monthly 15%/11	\$560.85	\$288.92	\$3,739.00
Umbrella	Monthly 15%/11	\$1,926.45	\$992.41	\$12,843.00
<b>Total Amount Due</b>		<b>\$13,597.80</b>	<b>\$7,004.93</b>	<b>\$90,652.00</b>
<b>Deposit Due Date</b>		<b>01/01/2021</b>		

\*Billing will also be set up in your online portal. Please contact your Client Service Representative for access.

This is not your actual invoice. It is an estimate based on proposed exposures, coverages, and is subject to change when the actual invoice is mailed by Customer Accounting Services under separate cover. We are offering this estimate for your information and planning. We are also providing you an ability to make payment now if your effective date is fast approaching as payment is required within 10 days of your effective date.

**Customer** will be billed for premium, taxes, assessments, and surcharges.

Mid-Term premium endorsements will be: **Bill Now - Outside Payment Plan**

# Commercial Auto

## Premium Details

Underwriting Company: **LM Insurance Corporation**  
 Rating Plan: **Guaranteed Cost**  
 Named Insured: **Lincolnwood School District 74**

Premium	
Estimated Premium	\$3,119
Taxes, Assessments & Surcharges	\$0
Michigan Catastrophic Claims Association (MCCA)	\$0
<b>Total Estimated Premium with Taxes, Assessments &amp; Surcharges</b>	<b>\$3,119</b>

May be subject to audit.

Coverages	Symbols	Limits	Deductibles	Premium
Liability	08, 09	\$1,000,000	N/A	\$365
Personal Injury Protection	N/A	N/A	N/A	N/A
Added Personal Injury Protection	N/A	N/A	N/A	N/A
Auto Medical Payments	N/A	N/A	N/A	N/A
Uninsured Motorist	06, 08, 09	N/A	N/A	Included
Underinsured Motorist	06, 08, 09	N/A	N/A	Included
Physical Damage				
Comprehensive	N/A	N/A	N/A	N/A
Collision	N/A	N/A	N/A	N/A
Towing and Labor	N/A	N/A	N/A	N/A
Hired Liability	N/A	\$1,000,000	N/A	\$1,898
Hired Physical Damage				
Comprehensive	N/A	N/A	N/A	N/A
Collision	N/A	N/A	N/A	N/A
Endorsements	N/A	Various	N/A	\$500

# Commercial Auto

## Forms & Endorsements

Form Name	Form Number	Fill-Ins
2016 Commercial Auto Miscellaneous Form Revisions Advisory Notice To Policyholders	CNA 90 15 11 16	
Alaska Exclusion of Terrorism Involving Nuclear, Biological or Chemical Terrorism Above Minimum Statutory Limits	CA 23 89 10 13	
Assault, Battery, Abuse or Molestation Exclusion	AC 20 01 11 16	
Business Auto Coverage Form	CA 00 01 10 13	
Business Auto Declarations	AC 00 03 02 13	
Business Auto Declarations Extension Schedule - Hired or Borrowed Autos and Nonowned Autos	ACS 00 03 11 11	
Changes In Your Policy	AC 00 30 10 13	
Common Policy Conditions	IL 00 17 11 98	
Exclusion of Terrorism Involving Nuclear, Biological or Chemical Terrorism	CA 23 85 01 06	
Exclusion of Terrorism Involving Nuclear, Biological or Chemical Terrorism	CA 23 85 10 13	
Exclusion of Terrorism Involving Nuclear, Biological or Chemical Terrorism Above Minimum Statutory Limits	CA 23 87 10 13	
Exclusion of Terrorism Involving Nuclear, Biological or Chemical Terrorism Above Minimum Statutory Limits	CA 23 87 01 06	
Forms Inventory	ACS 00 26 04 13	
Illinois Changes	CA 01 20 01 15	

Continued on next page...

**Note:** Endorsement numbers listed above may be replaced with/or used in conjunction with State Specific endorsements. The forms listed on this proposal are not all inclusive of the forms that will be included in the published policy.

# Commercial Auto

## Forms & Endorsements

Form Name	Form Number	Fill-Ins
Illinois Changes - Cancellation And Nonrenewal	CA 02 70 01 18	
Illinois Changes - Civil Union	IL 01 47 09 11	
Illinois Changes-Defense Costs	IL 01 62 10 13	
Illinois Notice To Policyholders Regarding The Religious Freedom Protection And Civil Union Act	IL N 175 11 11	
Illinois Notice to Policyholders	SNI12010718	
Illinois Underinsured Motorists Coverage	CA 21 38 10 13	
Illinois Uninsured Motorists Coverage	CA 21 30 01 15	
Insured Mailer Page	CNI 90 04 01 12	
Item 3 - Schedule of Covered Autos You Own	ACS 00 24 04 13	
Liberty Mutual Group California Privacy Notice	SNI 04 01 01 20	
Named Insured Endorsement	AC 84 13 01 11	<b>Named Insured:</b> Lincolnwood School District 74
Nuclear Energy Liability Exclusion Endorsement (Broad)	IL 00 21 09 08	
Participating Provision	LIL 90 05 06 13	
Producer Mailer Page	CNI 90 05 01 12	
Public or Livery Passenger Conveyance and On-Demand Delivery Services Exclusion	CA 23 45 11 16	
State Application of Terrorism Exclusion Endorsements Involving Nuclear, Biological Or Chemical Terrorism	AC 84 26 08 15	

Continued on next page...

**Note:** Endorsement numbers listed above may be replaced with/or used in conjunction with State Specific endorsements. The forms listed on this proposal are not all inclusive of the forms that will be included in the published policy.

# Commercial Auto

## Forms & Endorsements

Form Name	Form Number	Fill-Ins
Uninsured/Underinsured Motorists Insurance (UM/UIM) Schedule	ACS 21 02 04 13	
Washington Exclusion of Terrorism Involving Nuclear, Biological or Chemical Terrorism	CA 23 93 10 13	

**Note:** Endorsement numbers listed above may be replaced with/or used in conjunction with State Specific endorsements. The forms listed on this proposal are not all inclusive of the forms that will be included in the published policy.

# General Liability

## Premium Details

Underwriting Company: **LM Insurance Corporation**  
 Rating Plan: **Guaranteed Cost**  
 Named Insured: **Lincolnwood School District 74**

Premium	
Estimated Coverage Premium	\$3,350
Estimated Endorsement Premium	\$7,585
Total Estimated Premium	\$10,935
Terrorism Risk Insurance Act (TRIA) Premium	\$105
Taxes, Assessments & Surcharges	\$0
<b>Total Estimated Premium with TRIA, Taxes, Assessments &amp; Surcharges*</b>	<b>\$11,040</b>

\*TRIA Premium, Taxes, Surcharges & Assessments are estimates and are subject to change based upon coverage changes, exposure changes, and/or written premium. May be subject to audit.

Coverages	Limits of Liability
General Aggregate Limit	\$2,000,000
Products/ Completed Operations Limit	\$2,000,000
Personal and Advertising Injury Limit	\$1,000,000
Each Occurrence Limit	\$1,000,000
Damage to Premises Rented to You (or any premises)	\$100,000
Medical Expense Limit (any one person)	\$5,000
Employee Benefits Liability*	\$1,000,000
Employee Benefits Aggregate*	\$3,000,000

\* Employee Benefits Liability Retroactive Date: 1/1/2021

# General Liability

## Common Policy Form

Form Name	Form Number	Fill-Ins
Common Policy Conditions	IL 00 17 11 98	
Illinois Notice To Policyholders Regarding The Religious Freedom Protection And Civil Union Act	IL N 175 11 11	
Inventory Coverage Forms/Parts, Endorsements, Enclosures	IC 00 42 07 09	

## Coverage

Form Name	Form Number	Fill-Ins
Amendment Of Insured Contract Definition	CG 24 26 04 13	
Commercial General Liability Coverage Form	CG 00 01 04 13	
Corporal Punishment	CG 22 67 10 93	
Employee Benefits Liability Coverage	CG 04 35 12 07	<b>Retroactive Date:</b> 01/01/2021 <b>Deductible:</b> 1000 <b>Aggregate Limit:</b> \$3,000,000 <b>Limit:</b> \$1,000,000
Non-Cumulation Of Liability (Same Occurrence)	LC 25 13 08 08	
Personal And Advertising Injury - Occurrence Redefined	LC 29 06 08 08	
Personal And Advertising Injury Redefined - Definition Of Publication	LC 29 04 08 08	
Premium Responsibility	LC 99 36 02 13	
Public Entity Immunity And Tort Cap Preservation Endorsement	LIL 90 09 05 17	
SEXUAL MISCONDUCT LIABILITY COVERAGE	LC 04 91 02 20	<b>Fill-In: Limits Of Insurance:</b> \$1,000,000 Each Sexual Misconduct \$1,000,000 Aggregate Sexual Misconduct

Continued on next page...

**Note:** Endorsement numbers listed above may be replaced with/or used in conjunction with State Specific endorsements. The forms listed on this proposal are not all inclusive of the forms that will be included in the published policy.

# General Liability

Form Name	Form Number	Fill-Ins
		Sexual Misconduct Liability Deductible: \$5,000
School Amendatory Endorsement	LC 99 44 07 18	

## Declaration

Form Name	Form Number	Fill-Ins
Commercial General Liability Declarations	LC 00 04 08 12	
Declarations Extension Schedule	LCS 00 02 05 12	
Declarations Extension Schedule - Classification Descriptions	LCS 00 01 05 12	
Declarations Extension Schedule - Miscellaneous Charges	LCS 00 03 05 12	

## Notice to Policyholder

Form Name	Form Number	Fill-Ins
Liberty Mutual Group California Privacy Notice	SNI 04 01 01 20	
Policyholder Disclosure Terrorism Risk Insurance Act	SNI 90 02 01 20	

## Other Exclusion

Form Name	Form Number	Fill-Ins
Access Or Disclosure Of Confidential Or Personal Information With Limited Bodily Injury Exception	CG 21 06 05 14	
Asbestos Exclusion	LC 21 01 06 05	
Discrimination Exclusion	LC 21 04 06 05	

Continued on next page...

**Note:** Endorsement numbers listed above may be replaced with/or used in conjunction with State Specific endorsements. The forms listed on this proposal are not all inclusive of the forms that will be included in the published policy.

# General Liability

Form Name	Form Number	Fill-Ins
EXCLUSION - LAW ENFORCEMENT PROFESSIONAL LIABILITY	LC 21 110 08 18	
Employment - Related Practices Exclusion	CG 21 47 12 07	
Exclusion - Silica (Schools)	LC 21 111 02 14	
Exclusion - Trampolines	LC 21 112 02 14	
Fungi or Bacteria Exclusion (Legionella Bacterium Excluded)	LC 21 91 09 12	
Lead Exclusion	LC 21 06 06 07	
Nuclear Energy Liability Exclusion Endorsement (Broad)	IL 00 21 09 08	

## Policy Cover

Form Name	Form Number	Fill-Ins
Participating Provision	LIL 90 05 06 13	

## State Mandatory

Form Name	Form Number	Fill-Ins
Illinois Changes - Cancellation And Nonrenewal	CG 02 00 01 18	
Illinois Changes - Civil Union	IL 01 47 09 11	
Illinois Changes-Defense Costs	IL 01 62 10 13	

## TRIA Exclusions

Form Name	Form Number	Fill-Ins
Alaska Exclusion Of Punitive Damages Related To A Certified Act Of Terrorism	CG 26 93 01 15	
Arkansas Exclusion Of Punitive Damages Related To A Certified Act Of Terrorism	CG 26 86 01 15	

Continued on next page...

**Note:** Endorsement numbers listed above may be replaced with/or used in conjunction with State Specific endorsements. The forms listed on this proposal are not all inclusive of the forms that will be included in the published policy.

# General Liability

Form Name	Form Number	Fill-Ins
Cap On Losses From Certified Acts Of Terrorism	CG 21 70 01 15	
Cap On Losses From Certified Acts Of Terrorism	CG 21 70 01 15	
Exclusion Of Punitive Damages Related To A Certified Act Of Terrorism	CG 21 76 01 15	

**Note:** Endorsement numbers listed above may be replaced with/or used in conjunction with State Specific endorsements. The forms listed on this proposal are not all inclusive of the forms that will be included in the published policy.

# School Leaders Errors & Omissions

## Premium Details

Underwriting Company: Liberty Mutual Fire Insurance Company  
 Rating Plan: Guaranteed Cost  
 Named Insured: LINCOLNWOOD SCHOOL DISTRICT 74

Coverages	Premium
School Leaders Errors & Omissions (SLEO) Premium	\$3,156
Non-Monetary Relief Defense Coverage	Included
Terrorism Risk Insurance Act (TRIA) Premium	\$32
<b>Total Estimated Premium with TRIA Premium*</b>	<b>\$3,188</b>

\*TRIA Premium, Taxes, Surcharges & Assessments are estimates and are subject to change based upon coverage changes, exposure changes and/or final written premium. May be subject to audit.

Coverages	Limits of Liability	Deductibles
Each Wrongful Act	\$1,000,000	\$10,000
Aggregate	\$1,000,000	-
Non-Monetary Relief Defense Coverage	\$1,000,000	\$10,000

This insurance does not apply to "wrongful acts" committed prior to the **Retroactive Date: 01/01/2021. Claims-made Inception Date: 01/01/2021.**

# School Leaders Errors Omissions

Form Name	Form Number
Cap On Losses From Certified Acts Of Terrorism	LC 21 128 05 17
Declarations Extension Schedule	LCS 00 02 05 12
Declarations Extension Schedule - Classification Descriptions	LCS 00 01 05 12
Illinois Changes	LC 32 710 02 20
Illinois Changes - Cancellation And Nonrenewal	LC 32 649 02 20
Illinois Changes - Civil Union	LC 32 648 02 20
Public Entity Immunity And Tort Cap Preservation Endorsement	LIL 90 09 05 17
School Leaders Errors and Omissions Liability Coverage Form	LC 00 12 02 20
School Leaders Errors and Omissions Liability Declarations	LC 00 18 07 20

**Note:** Endorsement numbers listed above may be replaced with/or used in conjunction with State Specific endorsements. The forms listed on this proposal are not all inclusive of the forms that will be included in the published policy.

# Property

## Premium Details

Underwriting Company: **Liberty Mutual Fire Insurance Company**  
 Rating Plan: **Not Applicable**  
 Named Insured: **Lincolnwood School District 74**

Premium	
Policy Premium	
Excluding premium for "certified act(s) of terrorism" (TRIA)*	\$45,430
"Certified act(s) of terrorism" (TRIA)*	\$11,293
State or Municipal Taxes, Surcharges & Other	\$0
<b>Total Policy Premium</b>	<b>\$56,723</b>

The premiums shown for Surcharges, Assessments and Taxes are estimates only and are subject to adjustment. Final numbers will be reflected on the actual policy.

\*Terrorism Risk Insurance Act

Total Insurable Values	
Real Property	\$78,809,679
Personal Property	\$7,065,880
Loss of Business Income/Rents	\$1,000,000
<b>Total Insurable Values</b>	<b>\$86,875,559</b>

A properly executed Loss of Income Worksheet must be received within 30 days of binding. Additional premium may be required at that time.

# Property

## Limits of Liability

Coverages	Limits of Liability*
All covered locations as per Statement of Values on file with us. Insurance does not apply at locations and/or coverages at locations unless a specific value is provided by you.	
Blanket Loss of Business Income	\$1,000,000
Blanket Extra Expense	\$1,000,000

\*Limits of Liability are in any one occurrence, unless otherwise stated

# Property

## Standard Extensions

### Standard Extensions of Coverage

Form Name	Form #	Limit of Liability and/or Fill-in(s)*
Accounts Receivable	RM1002	\$100,000
Arson Reward	RM1002	\$25,000
Computer Virus and Denial of Access	RM1002	\$25,000
Debris Removal Expense	RM1002	\$250,000
Except for windblown debris	RM1002	\$25,000
Deferred Payments	RM1002	\$25,000
Duty to Defend	RM1002	Included
Extended Period of Restoration	RM1002	Sixty (60) consecutive days
Fire Department Charges	RM1002	Included
Fine Arts	RM1002	\$100,000
Fungus Cleanup Expense	RM1002	Applicable limit of liability
Except if fungus results from a covered loss due to a peril insured against other than fire or lightning	RM1002	\$250,000
Installation of Personal Property or Personal Property of Others	RM1002	\$250,000
Lock and Key Replacement	RM1002	\$25,000
Personal Property of Employees	RM1002	Included
Plants, Trees or Shrubs	RM1002	\$100,000
Pollution Cleanup Expense from a specified peril	RM1002	Applicable Limit of Liability
Except, from a peril insured against other than a specified peril	RM1119	\$50,000 Annual Aggregate
Except, from land, soil, surface or ground water; or for testing performed in the course of extracting the pollutants from covered locations	RM1119	\$50,000 Annual Aggregate
Professional Fees	RM1119	\$50,000
Removal	RM1002	Ninety (90) days

\*Limits of Liability are per occurrence, unless otherwise stated

# Property

## Optional Extensions

### Optional Extensions of Coverage

Form Name	Form #	Limits of Liability and/or Fill-in(s)*
Course of Construction	RM1002	\$2,500,000
Demolition Cost, Increased Construction Cost and Operation of Building Laws	RM1002	
Demolition Cost	RM1002	\$500,000
Increased Construction Cost	RM1002	\$500,000
Operation of Building Laws	RM1002	\$500,000
Exhibitions, Expositions, Fairs or Trade Shows	RM1002	\$50,000
Miscellaneous Locations	RM1002	\$50,000 at each miscellaneous location
New Location(s)	RM1002	\$1,000,000
	RM1002	One hundred eighty (180) consecutive days
Transit	RM1002	\$50,000

\*Limits of Liability are per occurrence, unless otherwise stated

# Property

## Equipment Breakdown

### Equipment Breakdown Extensions of Coverage

Form Name	Form #	Limits of Liability and/or Fill-in(s)*
Equipment Breakdown Extensions of Coverage		
Expediting Expenses Coverage	RM1250	\$100,000
Hazardous Substances Coverage	RM1250	\$100,000
Perishable Goods Coverage	RM1250	\$100,000
Data Restoration	RM1250	\$100,000
Water Damage Coverage	RM1250	Included
CFC Refrigerants	RM1250	Included

\*Limits of Liability are per occurrence, unless otherwise stated

# Property

## CAT Coverages

Form Name	Form #	Limits of Liability and/or Fill-in(s)*
<b>Earth Movement Coverage</b>	RM1106	\$5,000,000 (Annual Aggregate)
Any covered property situated in or at any other location(s) not specified below:		\$5,000,000 (Per Occurrence) \$5,000,000 (Annual Aggregate)
At any location situated in or at the area(s) defined in this policy as:		
New Madrid		Excluded
Puget Sound		Excluded
At any location in the State(s) or Countries or at a location(s) specified below:		
Alaska		Excluded
California		Excluded
Hawaii		Excluded
Nevada		Excluded
Puerto Rico		Excluded
Earth Movement Excluded at:		
Form RM1002, Course of Construction		Excluded
Form RM1002, Exhibitions, Expositions, Fairs or Trade Shows		Excluded
Form RM1002, Miscellaneous Locations	Excluded	
Form RM1110, Interruption of Services Coverage Extension	Excluded	
Form RM1002, New Locations	Excluded	
<b>Flood Coverage</b>	RM1108	\$5,000,000 (Annual Aggregate)
Group 1:		\$5,000,000 (Per Occurrence) \$5,000,000 (Annual Aggregate)
1.1 6950 N E PRAIRIE RD LINCOLNWOOD IL 60712		
1.2 6950 N E PRAIRIE RD LINCOLNWOOD IL 60712		
2.1 3925 W LUNT AVE LINCOLNWOOD IL 60712		
2.2 3925 W LUNT AVE LINCOLNWOOD IL 60712		

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# Property

## CAT Coverages

Form Name	Form #	Limits of Liability and/or Fill-in(s)*
2.3 3925 W LUNT AVE LINCOLNWOOD IL 60712		
3.1 6850 N E PRAIRIE RD LINCOLNWOOD IL 60712		
3.2 6850 N E PRAIRIE RD LINCOLNWOOD IL 60712		
4.1 6855 N CRAWFORD AVE LINCOLNWOOD IL 60712		
4.2 6855 N CRAWFORD AVE LINCOLNWOOD IL 60712		
4.3 6855 N CRAWFORD AVE LINCOLNWOOD IL 60712		
Flood Excluded at:		
Form RM1002, Course of Construction		Excluded
Form RM1002, Exhibitions, Expositions, Fairs or Trade Shows		Excluded
Form RM1002, Miscellaneous Locations		Excluded
Form RM1110, Interruption of Services Coverage Extension		Excluded
Form RM1002, New Locations		Excluded

\*Limits of Liability are per occurrence, unless otherwise stated

# Property

## Endorsements

Form Name	Form #	Fill-in(s)*
<b>Interruption of Service Coverage Extension</b>	RM1110	\$50,000
Overhead Transmission and Distribution Lines		Excluded
<b>Payroll Expense Limitation or Exclusion</b>	RM1113	Limited
Number of Business Days		365 Business Days
<b>Additional First Tier Wind Counties and Independent Cities (The states of Virginia through and Including Maine)</b>	RM1158	

\*Limits of Liability are per occurrence, unless otherwise stated

**Refer to Draft Policy for additional endorsements not shown**

# Property

## Deductibles & Waiting Period

### Policy

Coverages	Form #	Deductible Amount*
Policy Deductible**	RM1000	\$5,000
Educational Institutions Endorsement		\$500†
Mobile Equipment or Tools	RM1104	See below
Miscellaneous Articles		\$500
Musical Instruments		\$500
Interruption of Service	RM1110	
Equipment Breakdown		Refer To Draft Policy
All Coverages Except Equipment Breakdown		Refer to Draft Policy

\*Deductibles are per occurrence unless otherwise stated

\*\*We will not pay unless a covered loss from any one occurrence exceeds the deductible amount shown. We will then pay for the excess, up to any other applicable limit of liability. Unless otherwise specified, if a covered loss involves two or more deductibles, we will use only the largest of the applicable deductibles.

†A separate deductible amount will apply to any covered property, loss of business income, extra expense, or any other coverage or peril listed on the Schedule below if indicated by † after the deductible amount.

### CAT Coverages

Coverages	Form #	Deductible Amount*
<b>Earth Movement Coverage</b>	RM1106	\$50,000
<b>Flood Coverage</b>	RM1108	
Except:		
Group 1:		\$50,000
1.1 6950 N E PRAIRIE RD LINCOLNWOOD IL 60712		
1.2 6950 N E PRAIRIE RD LINCOLNWOOD IL 60712		
2.1 3925 W LUNT AVE LINCOLNWOOD IL 60712		

Continued on next page...

# Property

## Deductibles & Waiting Period

Coverages	Form #	Deductible Amount*
2.2 3925 W LUNT AVE LINCOLNWOOD IL 60712		
2.3 3925 W LUNT AVE LINCOLNWOOD IL 60712		
3.1 6850 N E PRAIRIE RD LINCOLNWOOD IL 60712		
3.2 6850 N E PRAIRIE RD LINCOLNWOOD IL 60712		
4.1 6855 N CRAWFORD AVE LINCOLNWOOD IL 60712		
4.2 6855 N CRAWFORD AVE LINCOLNWOOD IL 60712		
4.3 6855 N CRAWFORD AVE LINCOLNWOOD IL 60712		
<b>Wind Associated with a Named Storm</b>	RM1115	
Additional First Tier Wind Counties and Independent Cities (Tier 1 - VA-ME) and Second tier wind Counties and Parishes (Tier 2 - NC-TX)		\$50,000
First tier wind Counties and Parishes (Tier 1 - NC-TX) and Harris County, TX		2.00% subject to \$100,000 minimum
Florida, Hawaiian Islands and Puerto Rico		5.00% subject to \$250,000 minimum
New York counties of Suffolk and Nassau		\$50,000

\*Deductibles are per occurrence unless otherwise stated

### Standard Extensions

Coverages	Form #	Deductible Amount*
Duty to Defend	RM1002	Included
Fire Department Charges	RM1002	Included
Fungus Cleanup Expense	RM1002	Applicable Deductible
Personal Property of Employees	RM1002	Included
Pollution Cleanup Expense from a specified peril	RM1002	Applicable Deductible

# Property

## Deductibles & Waiting Period

\*Deductibles are per occurrence unless otherwise stated

### Optional Extensions

Coverages	Form #	Deductible Amount*
Course of Construction	RM1002	\$5,000

\*Deductibles are per occurrence unless otherwise stated

### Waiting Period

Coverages	Form #	Waiting Period(s)
Interruption of Service	RM1110	
All Coverages Except Equipment Breakdown		24 hours
Equipment Breakdown		24 hours
<b>Other Waiting Periods</b>		Refer to Draft Policy

# Terrorism Coverage Election Form

Named Insured: Lincolnwood School District 74  
Policy Number: P00-000-000397-774  
Effective: 01/01/2021

## How the act affects your policy and what you must do

### SELECTION OR REJECTION OF OPTIONAL TERRORISM INSURANCE COVERAGE

You have the option of purchasing coverage for losses resulting from "certified acts of terrorism." The premium for terrorism coverage is shown below. Coverage for losses from "certified acts of terrorism" is still subject to, and may be limited by, all other terms, conditions and exclusions contained in your policy.

If you reject this offer, you will not be covered for losses resulting from "certified acts of terrorism."

Please indicate on the Terrorism coverage election form shown below, whether you accept or reject this offer. If we do not receive a completed Terrorism Coverage Election Form from you, coverage for "certified acts of terrorism" will be excluded from your policy.

Please return the completed Terrorism Coverage Election Form to the Liberty Mutual Account Analyst listed in the insurance proposal.

## Please indicate your election to accept or reject this offer below:

I hereby elect to purchase coverage for "certified acts of terrorism" for the policy period for \$11,293.

I hereby reject this offer of coverage for the policy period. I understand that by rejecting this offer, I will have no coverage for losses arising from "certified acts of terrorism." Even if I decline coverage for "certified acts of terrorism," I acknowledge that some states require this policy to provide certain coverage for fire losses that result from an act of terrorism and the premium attributable to that required coverage cannot be rejected. As a result, if this policy provides coverage in any of those states, a rejection of this offer will not result in a reduction in premium by the full amount disclosed above.

## Policyholder Acknowledgement

I hereby acknowledge that I have received notice of TRIA, the federal share of compensation for "certified acts of terrorism," the premium charge for losses covered by TRIA, and the Company's limit of liability should losses covered by TRIA exceed \$100 billion

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Policyholder/Applicant Signature

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Date

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Print Name

The summary of the Act and the coverage under your policy contained in this notice is necessarily general in nature. Your policy contains specific terms, definitions, exclusions and conditions. In case of any conflict, your policy language will control the resolution of all coverage questions. Please read your policy carefully.

If you have any questions regarding this notice, please contact your sales representative or agent.

# Crime

## Premium Details

Underwriting Company: **Employers Insurance Company of Wausau**  
 Rating Plan: **Guaranteed Cost**  
 Named Insured: **LINCOLNWOOD SCHOOL DISTRICT 74**

Premium	
Estimated Premium	\$3,739
Taxes, Assessments & Surcharges	\$0
<b>Total Estimated Premium</b>	<b>\$3,739</b>

Coverages	Limits of Insurance	Deductibles
Inside the Premises - Theft of Money and Securities	\$1,000,000	\$1,000
Outside the Premises	\$1,000,000	\$1,000
Employee Theft - Blanket	\$1,000,000	\$1,000

Any other requested coverages not included will require further discussion prior to providing.

# Crime

## Forms & Endorsements

Form Name	Form Number
Annual Meeting Notice	LIL 90 04 06 13
Calculation Of Premium	CR 20 20 10 10
Commercial Crime Policy (Loss Sustained Form)	CR 00 23 08 13
CommonPolicyDeclarations	IC0002 03 05
Crime Declarations	EY DS 01 03 13
Crime/General Liability/Inland Marine Schedule	LIS 00 01 05 12
Exclusion Of Certain Computer-Related Losses	CR 20 21 10 10
Exclusion of Terrorism	EY 07 01 04 19
Illinois Changes	CR 02 02 01 18
Illinois Notice To Policyholders	SNI 12 01 07 18
Insured Mailer Page	CNI 90 04 01 12
Liberty Mutual Group California Privacy Notice	SNI 04 01 01 20
Notice To Policyholders-Restriction Of Coverage	CNC 90 02 04 19
Policy Inventory	IC 00 01 10 91
Producer Mailer Page	CNI 90 05 01 12

**Note:** Endorsement numbers listed above may be replaced with/or used in conjunction with State Specific endorsements. The forms listed on this proposal are not all inclusive of the forms that will be included in the published policy.

# The Liberty Mutual Advantage

## Experience the Liberty Mutual Difference.

Industries evolve. Market conditions shift. Risks change. That's why you need the stable partnership of a global leader with strength in every corner. When you work with Liberty Mutual you can expect industry-leading coverages delivered by a team that is empowered to provide a superior experience. With experts in underwriting, risk control, claims, and more, we harness innovation to address your concerns at each touch point. Look to Liberty if you value long-term partnership and want a carrier with the expertise and stability to adapt as your business changes.

## The Liberty Mutual Advantage

### **Financial Strength**

Working with a Fortune 100 company, you get the advantage of more: more industry-leading resources and deeper expertise in more areas, including outstanding access to quality care and powerful return-to-work strategies and risk control strategies.

### **Industry Expertise**

With 100+ years in business, we have deeply earned experience in your industry. At every touch point – from how we underwrite to how we manage claims – we have the experience you need. It's our business to know your business. Our experts understand the challenges you face and are ready to help mitigate risk at every level.

### **A Superior Customer Service Experience**

Work with engaged, responsive professionals, from onboarding to claims management. We collaborate constantly to ensure your program is designed and operating for optimal results. We back this with technologies that maximize agility and efficiency – plus the steadfastness of an established partner. Count on us to stay focused on you.

### **Industry-leading Claims Handling**

Our specialized approach leads to better outcomes and a better overall experience. Superior claims experience enabled by unparalleled focus on exceptional people, innovation and harnessing data to put your business ahead.

### **Advanced Risk Control and Engineering\***

We can help lower your total cost of risk by providing access to resources that can help you identify exposures and practical ways to mitigate them. You benefit from relevant insights and practical programs that address your areas of greatest loss, such as workplace injuries, product recalls, and property damage.

\*Our risk control services are advisory only. We assume no responsibility for management or control of customer safety activities nor implementation of recommended corrective measures.

# Services

Providing you with a great experience is important to us. Here are some of the services that you'll receive when you join us:

Services are based on the Lines of Business sold.

## Account Management Services

- Designated Account Management Team
- Seamless onboarding to Liberty Mutual
  - Policy number assignment and signature documents
  - Claim intake procedures
  - Policy issuance
  - Quick action on state reporting and posting notices
  - Set up and training for Liberty Mutual's online portal and Risk Management Information System
- Facilitation/Navigation of a smooth claims experience by quickly addressing questions and resolving issues

## Claims Services

- 24 Hour Emergency Claims Service Center
- 24 Hour Claim Reporting – Internet & Telephonic
- Claimant and Customer contact on Liability Bodily Injury claims in 1 day
- Injured Worker, Employer, and Medical Provider contact on WC Indemnity claims in 1 day
- Claims Acknowledgements
- Comprehensive Liability and/or Compensability Investigations
- Customer Specific Location Coding for WC
- Designated National Claims Service Teams
- Fraud Investigations and Handling
- Index Bureau Reporting
- On-line Medical Provider Referral Service
- Second Injury Fund Recovery for WC
- Notification of reserve changes equal to or exceeding \$20,000
- Notification of settlements equal to or exceeding \$20,000

## Litigation Management Services

Liberty Mutual reserves the right to retain and direct legal counsel:

Liberty Mutual Staff Counsel or Managed Panel Counsel will be used unless otherwise directed by Liberty Mutual or agreed upon.

# Services



## Risk Control Services

On-demand Risk Control resources including:

- Risk Control Consulting Center
- Access to comprehensive safety and health resources through Liberty Mutual SafetyNet (an online destination for safety tools, training, and resources)

## Technology Services

- Access to Liberty Mutual's online portal to include:
  - o Account and billing information
  - o Risk control services and medical providers
  - o Reporting and tracking claim activity through Risktrac
- Access to Risktrac, Liberty Mutual's Risk Management Information System
  - o View adjuster claim notes and monitor activity
  - o Create watch lists to keep track of important claims
  - o Set alerts to be notified of reserve and payment activity

Please speak with your Underwriter if additional services are needed.

# Terms & Conditions

This proposal is valid for 60 days from the Date of Proposal or until the Effective Date (whichever is earlier) and is solely an estimate of premium, based on the information provided, and all amounts are subject to change. This proposal does not bind or provide actual coverage and is not an offer of insurance. Specific terms of coverage, exclusions, and limitations are contained solely in a completed insurance policy for which a premium has been paid.

This proposal may vary from your original request for coverage. Please review the proposal carefully for any variances. The terms, conditions and premiums included in this proposal contemplate the sale or renewal of all the quoted insurance lines. Electing to buy or renew only some of the lines of coverage may result in changes to the terms, conditions and premiums of the remaining insurance lines.

We are willing to provide only the coverage described by this document. This document is a proposal to provide coverage based solely on these specifications. We will not be bound or obligated by proposals, specifications, or requests prepared by any other party. Further, this coverage is not bound until expressly accepted, in writing, by a Liberty Mutual Insurance employee who is authorized to bind these coverages. Finally, this document is not a policy of insurance. Coverage will be determined by the terms and conditions of the policy or policies issued by us. This document was created and distributed to you solely for information purposes only. You must look to and rely upon the full terms and conditions of the policy to determine the nature and extent of coverage.

To learn more about Liberty Mutual's privacy policy, go to [libertymutual.com/privacy](https://libertymutual.com/privacy)

This proposal and any policy or contract that may be issued pursuant to this proposal, is based on the information you or your authorized representative provided regarding named and additional insureds. In the event that individuals, entities, vessels or countries that have a direct or indirect interest in the quoted insurance coverage are subject to U.S. or foreign financial sanctions laws, or appear on any domestic or foreign list of persons with whom we are prohibited from doing business or conferring financial benefit, Liberty Mutual Insurance reserves the right to amend this proposal or to withdraw it in its entirety; and, in the event a policy of insurance or a contract for other benefits is issued by us prior to or after learning that any subject persons or entities appear on the prohibited list, or otherwise are identified in connection with an economic sanctions program, Liberty Mutual Insurance reserves the right to declare any such issued policy or contract null, void and without legal or binding effect, such voiding to be effective from the otherwise effective date of such issued policy or contract and regardless of whether any circumstance has arisen, or there has been an occurrence since such issuance that would be material to the duties and responsibilities set forth in such policy or contract.

# Terms & Conditions

## Property: Offer of Coverage for Certified Acts of Terrorism

This proposal includes an offering for Terrorism Coverage for both Certified Acts of Terrorism (as defined by the Terrorism Risk Insurance Act) and Non-Certified Acts of Terrorism.

You can elect to:

- Accept coverage at the indicated premium as stated in this Proposal, or
- Elect to reject the offerings of Terrorism coverage as described.

If you elect to reject this coverage, then the exclusions for both Certified Acts of Terrorism (as defined by the Terrorism Risk Insurance Act) and Non-Certified Acts of Terrorism exclusion will apply, with the form specified below replaced by Form RM1143R1

Please refer to the Policyholder Disclosure Notice - NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE FOR POLICY PERIOD at the end of this proposal and return the completed Terrorism Coverage Election Form to the Liberty Mutual Account Analyst listed in the insurance proposal.

RM1144R1 CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM

## Quote Stipulations

We reserve the right, but are not required, to inspect any location insured hereunder. This proposal is subject to favorable inspections and compliance with any recommendations made as a result of such inspections. We stress that inspections are not made for life safety, but for the sole purpose of our property underwriting. Not all hazards and conditions are evaluated. It is not to be inferred from our visits that all hazards are under control nor that the properties and operations are safe or healthful or are in compliance with laws, rules, or regulations.

We have provided a draft property policy to help you make an informed decision regarding your insurance needs, but it is for informational purposes only and is not a final policy of insurance. Your coverage will be determined only by the terms and conditions of a final policy and not by the linked draft policy.

A properly executed SOV and, if applicable, Loss of Income Worksheet must be received within 30 days of binding. Additional premium may be required at that time.

All policy coverages, terms, and conditions are subject to applicable State Amendatory Endorsements.

If the Named Insured's signature is required for any of the policies or coverages included in this proposal, they must be signed by the proposed Named Insured and returned to us by the effective date of the policy, or within 30 days of receipt, whichever is later. Failure to execute and return any required signature documents within the specified time frame may result in withdrawal of the proposed payment plan, or cancellation or rescission where allowed by law, and/or coverage changes and corresponding premium increase(s) required by law as a result of not having signed forms.

# Terms & Conditions

## Services

These services are provided during the effective period, unless otherwise specified. Services will convert to our standard claims and other services, except as otherwise agreed in writing or stated below, if:

- 1) all of the policies described, including any renewals and rewrites of those policies, are cancelled or non-renewed by you or by us,
- 2) losses are projected to exceed a rating plan maximum, or
- 3) you become insolvent or file for bankruptcy.

We may modify our standard services at any time without notice.

## Claim Service Definitions

Notification: the formal act of alerting the customer/broker when a specific claim action is taking place. Specific actions can include but are not limited to Nurse Case Manager, Field Investigation, Surveillance, Third Party, Reserves and Settlement. No response from customer is required in order for Claims to proceed with their action plan.

## Risk Control Services

Our risk control service is advisory only and does not include:

- Providing for the health and safety of your employees or the public
- Managing or controlling your safety activities or implementing recommended corrective measures
- Identifying all hazards
- Warranting that requirements of any federal, state, or local law, regulation, or ordinance have or have not been met.

## Regulatory Service Requirements

After the effective date of this policy, we may be required to provide certain services (e.g., managed care) or to re-classify/re-code certain services - under the policy in accordance with filed rating and statistical plans. If this happens, we will align the charges with the filed rating and statistical plans (e.g., medical loss, indemnity loss, allocated loss adjustment expense, or unallocated loss adjustment expense).

# Terms & Conditions

## Risk Management Information Systems (RMIS)

You will have access to certain claims information ("DATA") from the electronic data processing files of the member companies of the Liberty Mutual Insurance. This DATA pertains to claims made against some of the insurance policies or claims service agreements issued to you by our member companies through the risk management information systems (collectively "RMIS").

Access to DATA or media is based on your ongoing acceptance of the terms and conditions listed on the portal used to access RMIS, as well as the following:

- We do not warrant that operation of the RMIS or the DATA provided will be error-free. We make no warranties, express or implied, and further, we DISCLAIM THE IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE.
- You understand and agree that the limit of our liability for any cause of action arising from, or related in any way to RMIS and/or DATA, is for direct damages only. We are not liable to you for any indirect, consequential, punitive, or special damages of any kind or nature.

To the extent that we provide DATA to you through RMIS and/or through any other means or media otherwise, the following terms shall apply:

a. We and you (the "Parties") shall comply with all laws and regulations governing the confidentiality, security, transmission, retransmission, copying, disclosure, and use of information pertaining to individuals, including but not limited to any medical information or non-public information as individually identifiable medical information and non-public, protected personal information of persons as defined in applicable law or regulation.

b. Access to RMIS is restricted to employees for whom the applicable subscription fees have been paid. You shall restrict access to RMIS and DATA to those employees who may lawfully access and use such information unless they agree otherwise in writing.

c. You shall instruct all employees accessing RMIS and DATA with regard to the obligations imposed under paragraphs a. and b. and ensure that your employees fully comply.

Each party agrees to defend, indemnify, and hold harmless the other party and its officers, directors, subsidiaries, affiliates, and employees from and against any third-party claims\* that the party seeking indemnification may suffer or incur that arises out of:

- Any allegation that the other party's possession of or access to DATA violates any statute or regulation
- Any allegation that the other party's treatment or use of any DATA including, by way of example and not limitation, the transmission, retransmission, communication, or other publication of such DATA, was negligent, grossly negligent or intentionally improper
- The other party's breach of any representation or other obligation arising under this agreement with regard to DATA or RMIS

# Terms & Conditions

\*Claims collectively refers to losses, damages, suits, fees, judgments, costs, and expenses, including reasonable attorneys' fees, made by the directors, officers, and employees of the party responsible for indemnification.

The party seeking indemnification will:

- Promptly let the other party know in writing of any claim for which it is seeking indemnification
- Forward to the other party all documents in its possession related to the matter

Failure to provide prompt notice of a claim for indemnification will not prevent the party's claim for indemnification unless the other party is negatively impacted.

With regard to DATA and RMIS provided according to this section, your obligations and ours will survive indefinitely regardless of the termination of our partnership, any insurance policy, this or any other agreement between the parties.

## Broker/Third-Party Access

If you want to extend access to RMIS and/or DATA to your broker/consultant or any third party, they must enter into a separate agreement with us that includes the terms and conditions of such access

# Terrorism Insurance Premium Disclosure

This notice contains important information about the Terrorism Risk Insurance Act and its effect on your policy. Please read it carefully.

The premium charge for coverage for "Certified Acts of Terrorism" will appear in this Proposal as a separate line item charge. If you choose to accept this proposal, you will have the opportunity to reject this coverage and premium charge. This offer applies to all lines except Workers Compensation, Crime, Professional Liability and Commercial Automobile.

## The Terrorism Risk Insurance Act

The Terrorism Risk Insurance Act, including all amendments ("TRIA" or the "Act"), establishes a program to spread the risk of catastrophic losses from certain acts of terrorism between insurers and the federal government. If an individual insurer's losses from "certified acts of terrorism" exceed a specified deductible amount, the government will generally reimburse the insurer for a percentage of losses (the "Federal Share") paid in excess of the deductible, but only if aggregate industry losses from such acts exceed the "Program Trigger". An insurer that has met its insurer deductible is not liable for any portion of losses in excess of \$100 billion per calendar year. Similarly, the federal government is not liable for any losses covered by the Act that exceed this amount. If aggregate insured losses exceed \$100 billion, losses up to that amount may be pro-rated, as determined by the Secretary of the Treasury.

**Beginning in calendar year 2020, the Federal Share is 80% and the Program Trigger is \$200,000,000.**

## Mandatory Availability of Coverage For "Certified Acts of Terrorism"

TRIA requires insurers to make coverage available for any loss that occurs within the United States (or outside of the U.S. in the case of U.S. missions and certain air carriers and vessels), results from a "certified act of terrorism" AND that is otherwise covered under your policy.

A "certified act of terrorism" means:

[A]ny act that is certified by the Secretary [of the Treasury], in consultation with the Secretary of Homeland Security, and the Attorney General of the United States

- i. to be an act of terrorism;
- ii. to be a violent act or an act that is dangerous to –
  - I. human life;
  - II. property; or
  - III. infrastructure;
- iii. to have resulted in damage within the United States, or outside of the United States in the case of –
  - I. an air carrier (as defined in section 40102 of title 49, United States Code) or United States flag vessel (or a vessel based principally in the United States, on which United States income tax is paid and whose insurance coverage is subject to regulation in the United States); or
  - II. the premises of a United States mission; and
- iv. to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

**RM SELECT™ POLICY**
**POLICY REFERENCE INDEX**

This INDEX is to help **you** read **your** Policy. It is not a part of the Policy and is in no way a substitute for reading **your** entire Policy.

**Your** Policy may or may not include all of the forms, endorsements, coverages and provisions listed in this INDEX. Refer to the POLICY INDEX, Form RM0003, for a list of forms and endorsements that are included on **your** policy.

PLEASE READ **YOUR** POLICY CAREFULLY!

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<b>Policy Period</b>		1
Policy Premium		1
<b>A. Insuring Agreement</b>		2
<b>B. Coverages</b>		2
<b>C. Limits of Liability</b>		2
<b>D. Standard Extensions of Coverage</b>		2
<b>E. Optional Extensions of Coverage – Sublimits of Liability</b>		2
<b>F. Equipment Breakdown Coverage</b>		3
<b>G. Deductible and waiting periods</b>		4
Schedule		5
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5. Deferred Payments		3
6. Duty to Defend		3
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8. Fire Department Charges		4
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	Form Number	Beginning on Page
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**ENDORSEMENTS**

See POLICY INDEX

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**RM SELECT™ POLICY**

**POLICY INDEX**

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Policy number P00-000-000397-774

**Important Notice**

**PRODUCER OF RECORD INFORMATION**

This policy has been issued by **us** to **you** through the following producer of record:

Name and Address of Producer of Record

LAMB LITTLE & COMPANY  
1101 PERIMETER DR STE 500  
  
SCHAUMBURG, IL 60173-5060

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## LIBERTY MUTUAL GROUP CALIFORNIA PRIVACY NOTICE

Commercial Lines (excluding Workers' Compensation)

(Effective January 1, 2020)

Liberty Mutual Group and its affiliates, subsidiaries, and partners (collectively "Liberty Mutual" or "we", "us" and "our") provide insurance to companies and other insurers. This Privacy Notice explains how we gather, use, and share your data. This Privacy Notice applies to you if you are a **Liberty Mutual commercial line insured or are a commercial line claimant residing in California**. It does not apply to covered employees or claimants under Workers' Compensation policies. If this notice does not apply to you, go to [libertymutual.com/privacy](http://libertymutual.com/privacy) to review the applicable Liberty Mutual privacy notice.

### What Data Does Liberty Mutual Gather?

We may collect the following categories of data:

- **Identifiers**, including a real name, alias, postal address, unique personal identifier, online identifier, Internet Protocol address, email address, account name, Social Security Number, driver's license number, or other similar identifiers;
- **Personal information described in California Civil Code § 1798.80(e)**, such as your name, signature, Social Security Number, physical characteristics or description, address, telephone number, driver's license or state identification card number, insurance policy number, education, employment, employment history, bank account number, financial information, medical information, or health insurance information;
- **Protected classification characteristics**, including age, race, color, national origin, citizenship, religion or creed, marital status, medical condition, physical or mental disability, sex (including gender, gender identity, gender expression, pregnancy or childbirth and related medical conditions), sexual orientation, or veteran or military status;
- **Commercial information**, including records of personal property, products or services purchased, obtained, or considered, or other purchasing or consuming histories and tendencies;
- **Internet or other similar network activity**, including browsing history, search history, information on a consumer's interaction with a website, application, or advertisement;
- **Professional or employment related information**, including current or past job history or performance evaluations;
- **Inferences drawn from other personal information**, such as a profile reflecting a person's preferences, characteristics, psychological trends, predispositions, behavior, attitudes, intelligence, abilities, and aptitudes;
- **Risk data**, including data about your driving and/or accident history; this may include data from consumer reporting agencies, such as your motor vehicle records and loss history information, health data, or criminal convictions; and
- **Claims data**, including data about your previous and current claims, which may include data regarding your health, criminal convictions, third party reports, or other personal data.

For information about the types of personal data we have collected about California consumers in the past twelve (12) months, please go to [libertymutual.com/privacy](http://libertymutual.com/privacy) and click on the link for the California Supplemental Privacy Policy.

### How We Get the Personal Data:

We gather your personal data <b>directly from you</b> . For example, you provide us with data when you:	We also gather your personal data <b>from other people</b> . For example:
<ul style="list-style-type: none"><li>● ask about, buy insurance or file a claim</li></ul>	<ul style="list-style-type: none"><li>● your insurance agent or broker</li></ul>
<ul style="list-style-type: none"><li>● pay your policy</li></ul>	<ul style="list-style-type: none"><li>● your employer, association or business (if you are insured through them)</li></ul>
<ul style="list-style-type: none"><li>● visit our websites, call us, or visit our office</li></ul>	<ul style="list-style-type: none"><li>● our affiliates or other insurance companies about your transactions with them</li></ul>

	<ul style="list-style-type: none"> <li>consumer reporting agencies, Motor Vehicle Departments, and inspection services, to gather your credit history, driving record, claims history, or value and condition of your property</li> </ul>
	<ul style="list-style-type: none"> <li>other public directories and sources</li> </ul>
	<ul style="list-style-type: none"> <li>third parties, including other insurers, brokers and insurance support organizations who you have communicated with about your policy or claim, anti-fraud databases, sanctions lists, court judgments and other databases, government agencies, open electoral register or in the event of a claim, third parties including other parties to the claim witnesses, expert loss adjustors and claim handlers</li> </ul>
	<ul style="list-style-type: none"> <li>other third parties who take out a policy with us and are required to provide your data such as when you are named as a beneficiary or where a family member has taken out a policy which requires your personal data</li> </ul>

For information about how we have collected personal data in the past twelve (12) months, please go to [libertymutual.com/privacy](http://libertymutual.com/privacy) and click on the link for the California Supplemental Privacy Policy.

**How Does Liberty Mutual Use My Data?**

Liberty Mutual uses your data to provide you with our products and services, and as otherwise provided in this Privacy Notice. Your data may be used to:

<b><u>Business Purpose</u></b>	<b><u>Data Categories</u></b>
<p><b>Market, sell and provide insurance.</b> This includes, for example:</p> <ul style="list-style-type: none"> <li>calculating your premium;</li> <li>determining your eligibility for a quote;</li> <li>confirming your identity and service your policy;</li> </ul>	<ul style="list-style-type: none"> <li>Identifiers</li> <li>Personal Information</li> <li>Protected Classification Characteristics</li> <li>Commercial Information</li> <li>Internet or other similar network activity</li> <li>Professional or employment related information</li> <li>Inferences drawn from other personal information</li> <li>Risk data</li> <li>Claims data</li> </ul>
<p><b>Manage your claim.</b> This includes, for example:</p> <ul style="list-style-type: none"> <li>managing your claim, if any;</li> <li>conducting claims investigations;</li> <li>conducting medical examinations;</li> <li>conducting inspections, appraisals;</li> <li>providing roadside assistance;</li> <li>providing rental car replacement, or repairs;</li> </ul>	<ul style="list-style-type: none"> <li>Identifiers</li> <li>Personal Information</li> <li>Protected Classification Characteristics</li> <li>Commercial Information</li> <li>Internet or other similar network activity</li> <li>Professional or employment related information</li> <li>Inferences drawn from other personal information</li> <li>Risk data</li> <li>Claims data</li> </ul>
<p><b>Day to Day Business and Insurance Operations.</b> This includes, for example:</p> <ul style="list-style-type: none"> <li>creating, maintaining, customizing and securing accounts;</li> <li>supporting day-to-day business and insurance related functions;</li> <li>doing internal research for technology development;</li> <li>marketing and creating products and services;</li> <li>conducting audits related to a current contact with a consumer and other transactions;</li> </ul>	<ul style="list-style-type: none"> <li>Identifiers</li> <li>Personal Information</li> <li>Protected Classification Characteristics</li> <li>Commercial Information</li> <li>Internet or other similar network activity</li> <li>Professional or employment related information</li> <li>Inferences drawn from other personal information</li> <li>Risk data</li> <li>Claims data</li> </ul>

<ul style="list-style-type: none"> <li>as described at or before the point of gathering personal data or with your authorization;</li> </ul>	
<p><b>Security and Fraud Detection.</b> This includes for example:</p> <ul style="list-style-type: none"> <li>detecting security issues;</li> <li>protecting against fraud or illegal activity, and to comply with regulatory and law enforcement authorities;</li> <li>managing risk and securing our systems, assets, infrastructure and premises; roadside assistance, rental car replacement, or repairs</li> <li>help to ensure the safety and security of Liberty staff, assets and resources, which may include physical and virtual access controls and access rights management;</li> <li>supervisory controls and other monitoring and reviews, as permitted by law; and emergency and business continuity management;</li> </ul>	<ul style="list-style-type: none"> <li>Identifiers</li> <li>Personal Information</li> <li>Protected Classification Characteristics</li> <li>Commercial Information</li> <li>Internet or other similar network activity</li> <li>Professional or employment related information</li> <li>Inferences drawn from other personal information</li> <li>Risk data</li> <li>Claims data</li> </ul>
<p><b>Regulatory and Legal Requirements.</b> This includes for example:</p> <ul style="list-style-type: none"> <li>controls and access rights management;</li> <li>to evaluate or conduct a merger, divestiture, restructuring, reorganization, dissolution, or other sale or transfer of some or all of Liberty's assets, whether as a going concern or as part of bankruptcy, liquidation, or similar proceeding, in which personal data held by Liberty is among the assets transferred;</li> <li>exercising and defending our legal rights and positions;</li> <li>to meet Liberty contract obligations;</li> <li>to respond to law enforcement requests and as required by applicable law, court order, or governmental regulations;</li> <li>as otherwise permitted by law.</li> </ul>	<ul style="list-style-type: none"> <li>Identifiers</li> <li>Personal Information</li> <li>Protected Classification Characteristics</li> <li>Commercial Information</li> <li>Internet or other similar network activity</li> <li>Professional or employment related information</li> <li>Inferences drawn from other personal information</li> <li>Risk data</li> <li>Claims data</li> </ul>
<p><b>Improve Your Customer Experience and Our Products.</b> This includes for example:</p> <ul style="list-style-type: none"> <li>improve your customer experience, our products and service;</li> <li>to provide, support, personalize and develop our website, products and services;</li> <li>create and offer new products and services;</li> </ul>	<ul style="list-style-type: none"> <li>Identifiers</li> <li>Personal Information</li> <li>Commercial Information</li> <li>Internet or other similar network activity</li> <li>Professional or employment related information</li> <li>Inferences drawn from other personal information</li> <li>Risk data</li> <li>Claims data</li> </ul>
<p><b>Analytics to identify, understand and manage our risks and products.</b> This includes for example:</p> <ul style="list-style-type: none"> <li>conducting analytics to better identify, understand and manage risk and our products;</li> </ul>	<ul style="list-style-type: none"> <li>Identifiers</li> <li>Personal Information</li> <li>Protected Classification Characteristics</li> <li>Commercial Information</li> <li>Internet or other similar network activity</li> <li>Professional or employment related information</li> <li>Inferences drawn from other personal information</li> <li>Risk data</li> <li>Claims data</li> </ul>

<p><b>Customer service and technical support.</b> This includes for example:</p> <ul style="list-style-type: none"> <li>● answer questions and provide notifications;</li> <li>● provide customer and technical support;</li> </ul>	<ul style="list-style-type: none"> <li>● Identifiers</li> <li>● Personal Information</li> <li>● Commercial Information</li> <li>● Internet or other similar network activity</li> <li>● Professional or employment related information</li> <li>● Inferences drawn from other personal information</li> <li>● Risk data</li> <li>● Claims data</li> </ul>
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**How Does Liberty Mutual Share My Data?**

Liberty Mutual does not sell your personal data as defined by the California Consumer Privacy Act.

Liberty Mutual shares personal data of California consumers with the following categories of third parties:

- Liberty Mutual affiliates;
- Service Providers;
- Public entities and institutions (e.g. regulatory, quasi-regulatory, tax or other authorities, law enforcement agencies, courts, arbitrational bodies, and fraud prevention agencies);
- Professional advisors including law firms, accountants, auditors, and tax advisors;
- Insurers, re-insurers, policy holders, and claimants; and
- As permitted by law.

Liberty Mutual shares the following categories of personal data regarding California consumers to service providers for business purposes:

- Identifiers
- Protected Classification Characteristics;
- Internet or other similar network activity;
- Inferences drawn from other personal information;
- Professional, employment, and education information;
- Personal Data;
- Commercial Information;
- Claims Data;
- Risk Data;

For information about how we have shared personal information in the past twelve (12) months, please go to [libertymutual.com/privacy](http://libertymutual.com/privacy) and click on the link for the California Supplemental Privacy Policy.

**What Privacy Rights Do I Have?**

The California Consumer Privacy Act provides California residents with specific rights regarding personal information. These rights are subject to certain exceptions. Our response may be limited as permitted under law.

**Access or Deletion**

You may have the right to request that Liberty Mutual disclose certain information to you about our collection and use of your personal data in the twelve (12) months preceding such request, including a copy of the personal data we have collected. You also may have the right to request that Liberty Mutual delete personal data that Liberty Mutual collected from you, subject to certain exceptions.

Specifically, you have the right to request that we disclose the following to you, in each case for the twelve (12) month period preceding your request:

- the categories of personal data we have collected about you;
- the categories of sources from which the personal data was/is collected;
- our business or commercial purpose for collecting personal data;
- the categories of third parties with whom we share personal data;
- the specific pieces of data we have collected about you;
- the categories of personal data about you, if any, that we have disclosed for monetary or other valuable consideration, including the categories of third parties to which we have disclosed the data, by category or categories of personal data for each third party to which we disclosed the personal data; and
- the categories of personal data about you that we disclosed for a business purpose.

## You can make a request by either:

Calling: 800-344-0197

Online: [libertymutualgroup.com/privacy-policy/data-request](https://libertymutualgroup.com/privacy-policy/data-request)

Mail: Attn: Privacy Office  
Liberty Mutual Insurance Company  
175 Berkeley St., 6th Floor  
Boston, MA 02116

You may also make a verifiable consumer request on behalf of your minor child.

You or your authorized agent may only make a verifiable consumer request for access or data deletion twice within a twelve (12) month period. The verifiable consumer request must provide sufficient information that allows Liberty Mutual to reasonably verify that you are the person about whom Liberty Mutual collected personal data or an authorized representative of such person; and describe your request with sufficient detail that allows Liberty Mutual to properly understand, evaluate, and respond to it. For more information about how Liberty Mutual will verify your identity and how an authorized agent may make a request on your behalf, go to [libertymutual.com/privacy](https://libertymutual.com/privacy) and click on the California Supplemental Privacy Policy.

### Response Timing

Liberty Mutual will respond to a verifiable consumer request within forty-five (45) days of its receipt. If more time is needed, Liberty Mutual will inform you of the reason and extension period in writing.

Any disclosures that will be provided will only cover the twelve (12) month period preceding our receipt of the verifiable consumer request. If Liberty Mutual is unable to fulfill your request, you will be provided with the reason that the request cannot be completed. For more information about how we will respond to requests, go to [libertymutual.com/privacy](https://libertymutual.com/privacy) and click on the California Supplemental Privacy Policy.

### Rights to opt in and out of data selling

California consumers have the right to direct businesses not to sell your personal data (opt-out rights), and personal data of minors under 16 years of age will not be sold, as is their right, without theirs or their parents' opt-in consent. Liberty Mutual does not sell the personal data of consumers. For more information, go to [libertymutual.com/privacy](https://libertymutual.com/privacy) and click on the California Supplemental Privacy Policy.

### No account needed

You do not need to create an account with Liberty Mutual to exercise your rights. Liberty Mutual will only use personal data provided in a request to review and comply with the request.

### No discrimination

You have the right not to be discriminated against for exercising any of your CCPA rights. Unless permitted by the CCPA, exercising your rights will not cause Liberty Mutual to:

- Deny you goods or services;
- Charge you different prices or rates for goods or services, including through granting discounts or other benefits, or imposing penalties;
- Provide you a different level or quality of goods or services; or
- Suggest that you may receive a different price or rate for goods or services, or a different level or quality of goods or services.

**Will Liberty Mutual Update This Privacy Notice?**

We reserve the right to make changes to this notice at any time and for any reason. The updated version of this policy will be effective once it is accessible. You are responsible for reviewing this policy to stay informed of any changes or updates.

**Who Do I Contact Regarding Privacy?**

If you have any questions or comments about this Notice or the Supplemental CCPA Notice, your rights, or are requesting the Notice in an alternative format, please do not hesitate to contact Liberty Mutual at:

**Phone:** 800-344-0197

**Email:** [privacy@libertymutual.com](mailto:privacy@libertymutual.com)

**Postal Address:** Attn: Privacy Office  
Liberty Mutual Insurance Company  
175 Berkeley St., 6th Floor  
Boston, MA 02116

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## RM SELECT™ POLICY

### DECLARATIONS

Policy number P00-000-000397-774

Named Insured and Mailing Address

Lincolnwood School District 74

6950 N EAST PRAIRIE RD.  
Lincolnwood IL 60712

Form of Business Corporation

Premium Will Be Billed Monthly

**Policy Period:** 01/01/2021 to 01/01/2022 at 12:01 A.M. standard time at above mailing address.

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.

Premium (Excluding premium for "certified act(s) of terrorism" under the Terrorism Risk Insurance Act (TRIA), as amended):	\$45,430
Premium for "certified act(s) of terrorism" under the Terrorism Risk Insurance Act (TRIA), as amended:	\$11,293
State or Municipal Taxes, Surcharges and Other Miscellaneous Charges: (See State or Municipal Taxes, Surcharges and Other Miscellaneous Charges Summary, Form RM0005, for breakdown)	\$0
<b>Total Premium/Other Charges for Above Policy Period:</b>	<b>\$56,723</b>
The Deposit Premium/Other Charges is:	\$8,508

Issued By: Liberty Mutual Fire Insurance Company

By: 

Authorized Company Representative OR Countersignature (as required)

## DECLARATIONS (Continued)

### A. Insuring Agreement

Subject to all the terms and conditions of this policy, **we** will pay for risks of direct physical loss or damage to **covered property** as a result of an **occurrence**, unless excluded.

If this policy provides Equipment Breakdown coverage then subject to all the terms and conditions of this policy **we** will pay for direct physical loss or damage to **covered property** as a result of an **accident to an object**, unless excluded.

This policy consists of the forms and endorsements shown on the POLICY INDEX, Form RM0003, and any endorsements attached to the policy. Insurance is provided at those locations and for those coverages and **limits of liability** shown on the Schedule of this form. Extensions of coverage, sublimits of liability and deductibles are listed on this form. Endorsements may contain separate terms, conditions, deductibles and limits or sublimits of liability.

Words in **bold faced type** have special meanings in this policy. They are defined in DEFINITIONS, Form RM1007. These definitions apply to this entire policy, and to any endorsements to it. Definitions that apply to individual forms or endorsements will be italicized and noted in those forms or endorsements. The names of forms are capitalized (for example, DECLARATIONS).

### B. Coverages

**We** provide the following coverages if they are marked with an "X". Coverages are provided in accordance with the terms of this policy. Terms that apply only to individual coverage forms are set forth in those forms. This policy provides coverage on a replacement cost basis for **real property, personal property, personal property of others** and equipment breakdown except as indicated on VALUATIONS, Form RM1005, or any other forms or endorsements attached to this policy.

**Real Property**

**Personal Property**, including **personal property of others**

Equipment Breakdown

Loss of **Business Income**

**Real Property or Personal Property** only

Equipment Breakdown only

**Real Property or Personal Property** and Equipment Breakdown

**Extra Expense**

**Real Property or Personal Property** only

Equipment Breakdown only

**Real Property or Personal Property** and Equipment Breakdown

### C. Limits of Liability

**We** will not pay more than the applicable **limit of liability** shown on the Schedule of this form for any one (1) **occurrence** or any one (1) **accident** covered by this policy, nor will **we** pay for more than **your** interest in the lost or damaged property.

### D. Standard Extensions of Coverage

Refer to **A.** of EXTENSIONS OF COVERAGE, Form RM1002, for the standard extensions of coverage, including sublimits of liability, provided by this policy.

### E. Optional Extensions of Coverage – Sublimits of Liability

1. The sublimits of liability shown in **E. 4.** below apply to the Optional Extensions of Coverage defined in **B.** of EXTENSIONS OF COVERAGE, Form RM1002. If no sublimit is shown, no coverage is provided.

2. If a sublimit is shown in **E. 4.** below for **miscellaneous locations, new locations** and **unscheduled locations**, coverage may be limited or excluded elsewhere in this policy or its endorsements.

## DECLARATIONS (Continued)

3. These sublimits are the most we will pay for any loss covered by these Optional Extensions of Coverage. For **miscellaneous locations, new locations** and **unscheduled locations**, the most we will pay for any loss or damage will be the lesser of:

- a. The sublimit shown below for **miscellaneous locations, new locations** or **unscheduled locations**; or
- b. The sublimit shown on any individual coverage form or endorsement.

4. Optional Extensions of Coverage:

- a. \$2,500,000                      Course of Construction;
- b. \$500,000                        Demolition Cost;
- c. \$500,000                        Increased Construction Cost;
- d. \$500,000                        Operation of Building Laws;
- e. \$No Coverage                    Errors and Omissions;
- f. \$50,000                          Exhibitions, Expositions, Fairs or Trade Shows;
- g. \$50,000                          at each **miscellaneous location**;
- h. \$1,000,000                      at each **new location**, for up to 180 days from the date such **new location(s)** is first purchased or rented, whichever is earlier;
- i. \$No Coverage                    on covered **personal property** in the custody of salespeople;
- j. \$50,000                          **Transit**;
- k. \$No Coverage                    at each **unscheduled location**.

F. Equipment Breakdown Coverage

1. Equipment Breakdown **limit of liability**

If marked with an "X" the following **limits of liability** apply:

- (X) See the Schedule of this form;
- ( ) See Form Not Applicable; or
- ( ) **Limit(s) of liability** shown below are separate from any other applicable **limit of liability** or any sublimit of liability of this policy.

- \$Not Applicable                    Damage to covered **object(s)**, loss of **business income**, and **extra expense**;
- \$Not Applicable                    Damage to covered **object(s)** and loss of **business income**;
- \$Not Applicable                    Damage to covered **object(s)** and **extra expense**;
- \$Not Applicable                    Damage to covered **object(s)**;
- \$Not Applicable                    Loss of **business income** and **extra expense**;
- \$Not Applicable                    Loss of **business income**;
- \$Not Applicable                    **Extra expense**.

## DECLARATIONS (Continued)

2. For equipment breakdown extensions of coverage see EQUIPMENT BREAKDOWN EXTENSIONS OF COVERAGE, Form RM1250.

**G.** Deductible and waiting periods, except as indicated on any other forms or endorsements attached to this policy.

1. \$5,000. Unless marked with an "X" in **G. 2.**, or as provided in **G. 3.** below, **we** will not pay unless a **covered loss** from any one (1) **occurrence** exceeds the amount shown.

2. (X) See ADDITIONAL DEDUCTIBLES AND WAITING PERIODS, Form RM1115.

3. Equipment breakdown deductibles or waiting periods will be applied as specified below:

**a.** If **you** have a combined deductible, **we** will not pay unless a covered equipment breakdown loss from any one (1) **accident** is more than:

\$See G.1. above for loss to covered **object(s)**, loss of **business income**, and **extra expense**;

\$Not Applicable for loss to covered **object(s)** and loss of **business income**;

\$Not Applicable for loss to covered **object(s)** and **extra expense**

**b.** If one (1) or more deductible amounts are shown below, each will be applied separately.

\$Not Applicable Covered **object(s)**.

\$Not Applicable Loss of **business income** and **extra expense**.

\$Not Applicable Loss of **business income**.

\$Not Applicable **Extra expense**.

Not Applicable times the **average daily value** of loss of **business income** or **extra expense** during the **period of restoration**.

Not Applicable hours immediately following the **accident** for loss of **business income** or **extra expense**.

**c.** **We** will not pay for loss of **business income**, **extra expense**, or, to the extent **perishable goods** coverage is provided in EQUIPMENT BREAKDOWN EXTENSIONS OF COVERAGE, Form RM1250, unless a covered equipment breakdown loss from any one (1) **accident** to an **object** exceeds a waiting period of Not Applicable hours.

Once the waiting period has been exceeded coverage will begin at the initial time of the interruption, and will be subject to the deductibles shown in **G. 3.**

**d.** ( ) See ADDITIONAL DEDUCTIBLES AND WAITING PERIODS, Form RM1115.

Once a deductible or waiting period is exceeded, **we** will then pay for the excess, up to the applicable **limit of liability**.

If a **covered loss**, involves two (2) or more deductibles, **we** will use no more than the largest of the applicable deductibles except as provided in **G. 3. b.** or the ADDITIONAL DEDUCTIBLES AND WAITING PERIODS, Form RM1115.

**DECLARATIONS (Continued)**

No.	Location or Sub-location	Schedule	Limit of Liability
	All covered locations including coverage for Equipment Breakdown as per Statement of Values on file with us, except as scheduled below. Insurance does not apply at locations and/or coverages at locations unless a specific value is provided by you.	Blanket Loss of <b>Business Income</b>	\$1,000,000*
		Blanket <b>Extra Expense</b>	\$1,000,000*

\*Limits include Equipment Breakdown

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## DECLARATIONS (Continued)

List of Locations:

<u>Loc #</u>	<u>Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	<u>Country</u>
1.1	6950 N E PRAIRIE RD DISTRICT OFFICES ADMINISTRATION/OFFICES	LINCOLNWOOD	IL	60712-2520	
1.2	6950 N E PRAIRIE RD DISTRICT OFFICES PROPERTY IN THE OPEN	LINCOLNWOOD	IL	60712-2520	
2.1	3925 W LUNT AVE TODD HALL SCHOOL OTHER	LINCOLNWOOD	IL	60712	
2.2	3925 W LUNT AVE TODD HALL SCHOOL PROPERTY IN THE OPEN	LINCOLNWOOD	IL	60712	
2.3	3925 W LUNT AVE TODD HALL SCHOOL SCHOOL	LINCOLNWOOD	IL	60712	
3.1	6850 N E PRAIRIE RD RUTLEDGE HALL SCHOOL PROPERTY IN THE OPEN	LINCOLNWOOD	IL	60712-2551	
3.2	6850 N E PRAIRIE RD RUTLEDGE HALL SCHOOL SCHOOL	LINCOLNWOOD	IL	60712-2551	
4.1	6855 N CRAWFORD AVE LINCOLN HALL MIDDLE SCHOOL PROPERTY IN THE OPEN	LINCOLNWOOD	IL	60712	
4.2	6855 N CRAWFORD AVE LINCOLN HALL MIDDLE SCHOOL STORAGE BUILDING	LINCOLNWOOD	IL	60712	
4.3	6855 N CRAWFORD AVE LINCOLN HALL MIDDLE SCHOOL SCHOOL	LINCOLNWOOD	IL	60712	

## COVERAGES

- A.** If coverage for **real property** is provided as shown in **B.** Coverages of the DECLARATIONS, Form RM1000, **we** will pay for a **covered loss to your real property** at or within one-thousand (1,000) feet of a **covered location**.
- B.** If coverage for **personal property** is provided as shown in **B.** Coverages of the DECLARATIONS, Form RM1000, **we** will pay for a **covered loss to your personal property**, including **personal property of others** and **valuable papers and records**, at or within one-thousand (1,000) feet of a **covered location**.
- C.** If coverage for loss of **business income** is provided as shown in **B.** Coverages of the DECLARATIONS, Form RM1000, **we** will pay for:
- 1.** The actual loss of **business income you** incur during a **period of restoration** directly resulting from damage by a **peril insured against** to the type of property covered by this policy at a **covered location**.
  - 2.** The necessary expenses **you** incur in excess of **your** normal operating expenses that reduces **your** loss of **business income**. **We** will not pay more than **we** would pay if **you** had been unable to make up lost production or continue operations or services.
  - 3.** The actual loss of **business income you** incur if **you** are denied access to a **covered location** by order of civil or military authority if:
    - a.** the order results from a **covered loss**; or
    - b.** the order results from damage by a **peril insured against** to the type of property covered by this policy within one (1) statute mile of a **covered location**.

This coverage will apply for a period not to exceed twenty-one (21) consecutive days from the date of the order.
  - 4.** The actual loss of **business income you** incur if **your** ingress to or egress from a **covered location** is prevented as the direct result of a **peril insured against** to the type of property covered by this policy within one (1) statute mile of a **covered location**.

This coverage will apply for a period not to exceed twenty-one (21) consecutive days from the date **your** ingress or egress is first prevented.
  - 5.** In determining the actual loss of **business income**, consideration must be given to:
    - a.** The experience of the business before the loss and the probable experience after the loss;
    - b.** The continuation of only those normal charges and expenses that would have been incurred had no interruption of production or suspension of business operations or services happened;
    - c.** The demonstration of an actual loss of sales, income, or rental income; and
    - d.** Any amount recovered, at selling price, for loss or damage to merchandise that will be considered to have been sold.
  - 6.** **We** will not pay unless **you** are wholly or partially prevented from:
    - a.** producing goods; or
    - b.** continuing business operations or services.

## COVERAGES (Continued)

7. **You** are required to mitigate **your** loss by:

- a. Making up lost production within a reasonable period of time not limited to the **period of restoration**.
- b. Continuing business operations or services during the **period of restoration**.
- c. Using any property or service:
  - (1) owned or controlled by **you**; or
  - (2) obtainable from any other sources.
- d. Working extra time or overtime.
- e. Using inventory.

**We** will not pay for any loss to the extent it can be reduced through these or any other means whether at a **covered location** or any other location.

8. **We** will not pay for:

- a. Any loss during any idle period. Idle period includes, but is not limited to, any period when production, operation or service would cease or be prevented due to:
  - (1) physical damage not insured under this policy on or away from the **covered location**;
  - (2) planned or rescheduled shutdown or maintenance;
  - (3) strikes or other work stoppage; or
  - (4) any reason other than a **covered loss**.
- b. Any increase in loss due to:
  - (1) suspension, cancellation or lapse of any lease, contract, license or order.
  - (2) fines or damage for breach of contract for late or non-completion of orders, or for penalties of any nature.
- c. Any consequential, indirect or remote loss.
- d. Any loss resulting from damage to:
  - (1) finished goods manufactured by **you**, nor for the time required for their reproduction.
  - (2) property in **transit**.
- e. Any loss or expense recoverable elsewhere in this policy.

9. The most **we** will pay for a loss under this coverage is the lesser of:

- a. **Your** actual loss of **business income** and necessary expense; or
- b. The applicable **limit of liability** shown on the Schedule of the DECLARATIONS, Form RM1000, or any endorsements to this policy.

## COVERAGES (Continued)

**D.** If coverage for **extra expense** is provided as shown in **B.** Coverages of the DECLARATIONS, Form RM1000, **we** will pay for:

1. The actual **extra expense you** incur during a **period of restoration** directly resulting from damage by a **peril insured against** to the type of property covered by this policy at a **covered location**.
2. The actual **extra expense you** incur if **you** are denied access to a **covered location** by order of civil or military authority if:
  - a. the order results from a **covered loss**; or
  - b. the order results from damage by a **peril insured against** to the type of property covered by this policy within one (1) statute mile of a **covered location**.

This coverage will apply for a period not to exceed twenty-one (21) consecutive days from the date of the order.

3. **We** will not pay for:
  - a. Loss of **business income**.
  - b. Costs which would have been incurred in conducting **your** business during the same period had no **covered loss** happened.
  - c. The cost of permanent repair or replacement of property that has been damaged or destroyed.
  - d. Any loss during any idle period. Idle period includes, but is not limited to, any period when production, operation or service would cease or be prevented due to:
    - (1) physical damage not insured under this policy on or away from the **covered location**;
    - (2) planned or rescheduled shutdown or maintenance;
    - (3) strikes or other work stoppage; or
    - (4) any reason other than a **covered loss**.
  - e. Any increase in loss due to:
    - (1) suspension, cancellation or lapse of any lease, contract, license or order.
    - (2) fines or damage for breach of contract for late or non-completion of orders, or for penalties of any nature.
  - f. Any consequential, indirect or remote loss.
  - g. Any loss resulting from damage to:
    - (1) finished goods manufactured by **you**, nor for the time required for their reproduction.
    - (2) property in **transit**.
  - h. Any loss or expense recoverable elsewhere in this policy.

## COVERAGES (Continued)

4. The most **we** will pay for a loss under this coverage is the lesser of:
  - a. **Your actual extra expense**; or
  - b. The applicable **limit of liability** shown on the Schedule of the DECLARATIONS, Form RM1000, or any endorsements to this policy.
- E. If coverage for equipment breakdown is provided as shown in **B**. Coverages of the DECLARATIONS, Form RM1000, the following provisions apply to loss or damage that results from or is caused by an **accident** to a covered **object**:
  1. Exclusions **B. 8.**, **B. 9.**, **B. 10.** and **B. 11.** in EXCLUSIONS, Form RM1003, do not apply to a **covered loss** that result from an **accident** to covered **object(s)**.
  2. **We** will pay if an **accident** to covered **object(s)** causes:
    - a. Loss to property **you** own;
    - b. Loss to the property of others in **your** care, custody or control and for which **you** are legally liable.
  3. If direct loss or damage to an electrical **object(s)** results from the peril of **flood we** will pay for the amount **you** actually expend to dry out the **object(s)**.

**Our** payment to **you** will:

    - a. Be subject to the applicable direct damage **limit of liability** and deductible as shown in **F. 1.** and **G. 2.** of the DECLARATIONS, Form RM1000, for damage to covered **object(s)**; and
    - b. Not exceed the value of the damaged **object(s)**.

## EXTENSIONS OF COVERAGE

### A. Standard Extensions of Coverage

In the event of a **covered loss**, the coverage provided by this policy is extended as follows:

#### 1. Accounts Receivable

**a.** We will pay up to a **limit of liability** of \$100,000 for the following expenses **you** incur directly resulting from loss or damage by a **peril insured against** to **your** records of accounts receivable at a **covered location**:

- (1) Amounts due **you** from customers that **you** are unable to collect;
- (2) Interest charges on any loan to offset amounts **you** are unable to collect, pending **our** payment of those amounts;
- (3) Collection expense above **your** normal collection expense; and
- (4) Reasonable expenses **you** incur to reestablish **your** records of accounts receivable.

**b.** For the purposes of this extension of coverage, the following additional exclusions apply and **we** will not pay for:

- (1) Any loss that requires an audit or inventory to establish its existence;
- (2) Any fraudulent, dishonest or criminal act done by:
  - (a) Anyone entrusted with the accounts receivables, including their employees and agents; or
  - (b) Anyone having an interest in the accounts receivable.

This exclusion does not apply to the acts of a carrier for hire.

- (3) Bookkeeping, accounting, or billing errors or omissions.
  - (4) Wrongful alteration, falsification, manipulation, concealment, destruction, or disposal of records of accounts receivable, committed to conceal the wrongful giving, taking, getting, or withholding of money, securities, or other property.
- c.** When records of accounts receivable have been damaged or destroyed, **you** must use all reasonable efforts, including legal action if necessary, to obtain collection of any outstanding accounts receivable, and **we** will pay such costs and expenses of obtaining collection to the extent they reduce **your** loss.
- d.** When records of accounts receivable have been damaged or destroyed, **you** will use any property or service owned or controlled by **you** or obtainable from other sources in order to reduce **your** loss.
- e.** If **you** are unable to accurately determine the amount of outstanding accounts receivable at the time of loss, **our** payment will be calculated in the following manner:

**Your** average monthly accounts receivable amount, based on the twelve (12) months preceding the loss, adjusted for normal fluctuations in the month in which the loss occurs, or for any demonstrated variance for that month.

## EXTENSIONS OF COVERAGE (Continued)

f. The following will be deducted from the total amount of accounts receivable, regardless of the method used to determine that amount:

- (1) Balances for accounts not damaged or affected by the loss;
- (2) Amounts of accounts **you** are able to reestablish and collect;
- (3) An allowance for bad debts **you** are not normally able to collect; and
- (4) All unearned interest and service charges.

### 2. Arson Reward

If one (1) or more **covered losses** are caused by or result from any fires of a suspicious nature, **we** will pay a \$25,000 reward to an individual or individuals provided:

a. The individual(s) report(s) the suspected arsonist to local law enforcement officials; and

- (1) The arsonist is apprehended, brought to trial, and convicted of arson to **your covered property**; or
- (2) The arsonist is apprehended, confesses and/or pleads guilty to arson to **your covered property** without going to trial.

b. **Our** payment of this reward will not be increased by:

- (1) The number of individuals reporting the arsonist(s);
- (2) The number of arsonists involved in the **covered loss**; or
- (3) The number of **covered losses**.

No deductible applies to this extension of coverage.

### 3. Computer Virus and Denial of Access

**We** will pay up to \$25,000 for loss or damage to, or any cost, claim or expense caused by or resulting directly or indirectly from any of the following, regardless of any other cause or event that contributes to the loss, damage, cost, claim or expense at the same time or in any sequence:

a. The introduction of a malicious code, program, virus, worm, Trojan Horse program, macro time or logic bomb or similar unauthorized instruction which is designed or intended to damage, corrupt, destroy, distort, or delete any part of the system or disrupt its normal operation, into any of the following, whether owned by **you** or others:

- (1) **Data processing equipment, software, data, or media;**
- (2) Information repository;
- (3) Hardware or **software** based computer operating systems;
- (4) Microprocessors;
- (5) Integrated circuits;
- (6) Computer networks;

## EXTENSIONS OF COVERAGE (Continued)

(7) Website service; or

(8) Any other electronic equipment, computerized equipment, or similar device.

b. A change in the functionality, availability, operation, use of accessibility to or operation of any of the items described in 3. a. (1) - (8) above.

### 4. Debris Removal Expense

a. We will pay for the expense to remove the debris from a covered loss. We will only pay these expenses if we receive immediate written notice of the covered loss and if these expenses are reported to us in writing within one-hundred-eighty (180) days of the date of the covered loss.

b. Debris removal expense is limited to a sublimit of liability of \$250,000.

c. We will pay up to \$25,000 for expenses to remove from a covered location, windblown debris of property not covered by this policy.

d. Debris removal expense does not include any costs to clean up or remove pollutants, fungus, bacteria, wet or dry rot, or decay.

### 5. Deferred Payments

a. We will pay up to a sublimit of liability of \$25,000 for the uncollectable, unpaid balance owed you for direct physical loss or damage caused by or resulting from a peril insured against to personal property of the type covered by this policy that was sold by you under a conditional sale or trust agreement or any installment or deferred payment plan after the personal property has been delivered to your client and is now in their care, custody and control.

b. In the event of loss or damage caused by or resulting from a peril insured against to personal property sold under any of the payment plans shown in 5. a. above, you will use all reasonable effort, including legal action against your client, to:

(1) Collect any outstanding balance due you; or

(2) Regain possession of the personal property.

c. We will not pay for loss or damage caused by or resulting from:

(1) A recall of your product. This includes but is not limited to your cost to recall, test or to advertise the recall.

(2) Theft or conversion of your personal property sold under any payment plan shown in 5. a. above by your client after they have taken possession of the personal property.

d. This extension of coverage only applies to your personal property sold under any of the payment plans shown in 5. a. above that is located within the territory of this policy.

e. Coverage provided by this extension does not apply if your client continues with their payments.

### 6. Duty to Defend

We will defend that part of any suit against you involving personal property of others when all of the following conditions exist:

## EXTENSIONS OF COVERAGE (Continued)

- a. The suit seeks payment for physical loss or damage to the **personal property of others**; and
- b. The physical loss or damage is caused by a **peril insured against**; and
- c. The physical loss or damage takes place while the **personal property of others** is in **your** custody; and
- d. The **personal property of others** is the type of property covered by this policy.

We will do so even if such suit is groundless, false or fraudulent, but we may, without prejudice, make such investigation, negotiation and settlement of any claim or suit, as we deem appropriate.

### 7. Extended Period of Restoration

- a. If loss of **business income** coverage is provided, we will pay the actual loss of **business income you** sustain due to a reduction in sales, earnings or rental income that directly results from direct physical loss or damage to **your covered property** by a **peril insured against**, for the additional time required, when **you** use reasonable speed, to restore **your** business to the condition it would have been in if no loss had occurred. This additional time starts with the time when the **period of restoration** would end, and continues for no more than sixty (60) consecutive days immediately following the **period of restoration**.
- b. This extension of coverage does not apply if **you** elect not to either repair or replace **your covered property**, or to resume the operation of **your** business. For purposes of this extension of coverage the exclusions and restrictions in this policy regarding loss of **your** market share do not apply to any claim made under this extension of coverage.

### 8. Fire Department Charges

We will pay charges **you** incur when the fire department is called to save or protect **covered property** from a **covered loss**.

### 9. Fine Arts

We will pay up to a sublimit of liability of \$100,000 for **covered loss to your fine arts**. We will not however pay for:

- a. Loss or damage sustained from any repair, restoration, or retouching process;
- b. Breakage of art glass windows, statuary, marble, glassware, bric-a-brac, porcelains, and similar fragile articles, unless caused by fire, lightning, aircraft, theft and or attempted theft, windstorm, **earth movement, flood**, explosion, vandalism, collision, derailment or overturn of conveyance; or
- c. Loss or damage to **your fine arts** while away from a **covered location**.

### 10. Fungus Cleanup Expense

- a. If **fungus** results from a **covered loss** due to fire or lightning, we will pay up to the applicable **limit of liability** for the cost and expense:
  - (1) To remove **fungus** from **covered property** at a **covered location**;
  - (2) To repair or replace any undamaged portion of **covered property** at a **covered location** that must be removed to gain access to **fungus** in order to remove it; and
  - (3) To test for the presence of **fungus** on **covered property** at a **covered location** after **fungus** has been removed as provided by this extension.

## EXTENSIONS OF COVERAGE (Continued)

- b. If **fungus** results from a **covered loss** due to a **peril insured against** other than fire or lightning, **we** will pay up to \$250,000 for the costs and expenses outlined in **10. a. (1) – (3)** of this extension of coverage.
- c. In order for this extension of coverage to apply **we** must receive immediate written notice of the **covered loss**, and these costs and expenses must be reported to **us** in writing within one-hundred-eighty (180) days of the date of the **covered loss**.
- d. The removal and testing for **fungus** does not include any costs to remove **pollutants**.

### 11. Installation of **Personal Property** or **Personal Property of Others**

**We** will pay up to \$250,000 for direct physical loss or damage by a **peril insured against** to **your personal property**, or **personal property of others**, which **you** have sold under an installation agreement, if **your** responsibility continues until the purchaser accepts the installation. Installation coverage applies to any non-owned location within the policy territory.

### 12. Lock and Key Replacement

- a. When a master key or grand master key is lost or damaged from a **covered loss**, **we** will pay the lesser of:
  - (1) The actual cost to replace keys;
  - (2) The cost to rekey or reprogram the current locks to accept new keys; or
  - (3) When needed, new locks including the installation and reprogramming of the new locks.
- b. The most **we** will pay in any one (1) **occurrence** for this extension of coverage is a sublimit of liability of \$25,000.

### 13. **Personal Property** of Employees

**We** will pay for loss or damage by a **peril insured against** to the **personal property** (other than vehicles) of **your** employees when such property is at a **covered location** or being used by the employee in the course of employment. **We** will not pay for any loss or damage to such property that occurs at the employee's residence.

### 14. Plants, Trees or Shrubs

**We** will pay up to a sublimit of liability of \$100,000 for a **covered loss** to plants, trees and shrubs, however loss or damage caused by freezing, disease or drought is excluded.

### 15. **Pollution** Cleanup Expense

- a. **We** will pay to remove **pollutants** from **covered property** at a **covered location** if the **pollution** results from a **specified peril**, subject to the applicable **limit of liability**.
- b. **We** will pay up to an annual aggregate **limit of liability** of \$25,000 to remove **pollutants** from **covered property** at a **covered location**, if the **pollution** results from a **peril insured against** other than a **specified peril**.
- c. If **pollution** results from a **peril insured against**, **we** will pay up to an annual aggregate **limit of liability** of \$25,000:
  - (1) To remove **pollutants** from land, soil, surface or ground water upon, within, beneath or comprising a **covered location**; or
  - (2) For testing performed in the course of extracting the **pollutants** from **covered locations**.

## EXTENSIONS OF COVERAGE (Continued)

We will pay for removal or testing after a **covered loss** that occurs during the **policy period**.

We will only pay these expenses if we receive immediate written notice of the **covered loss** and if these expenses are reported to **us** in writing within one-hundred-eighty (180) days of the date of the **covered loss**.

### 16. Professional Fees

- a. We will pay up to \$25,000 for the reasonable costs **you** incur, for auditors, architects, accountants and engineers whom **you** hire to prepare and verify the details of a claim from a **covered loss**.
- b. Professional fees covered under this extension, however, do not include:
  - (1) any fees or expenses of attorneys;
  - (2) any fees or expenses of public adjusters or any of their subsidiaries or associated entities;
  - (3) fees based on a contingency; or
  - (4) the cost of **your** own employees.

### 17. Removal

- a. We will pay the reasonable and necessary costs or expenses **you** incur:
  - (1) to remove **covered property** from locations under imminent threat by a **peril insured against**; and
  - (2) to return the **covered property** to the original location it had been removed from once the danger by a **peril insured against** has ended.
- b. When **covered property** has been removed for this reason, it will be insured against loss or damage from a **peril insured against** at the temporary location according to the following terms:
  - (1) For up to ninety (90) days at each place to which the property has been taken for preservation;
  - (2) The applicable **limit of liability** will apply to each temporary location on a pro rata basis, based on the value **your covered property** stored at that location bears to the total value of **covered property** originally insured at the location under imminent threat.

The sublimits of liability, rewards or other amounts payable under these standard extensions of coverage do not increase and are not in addition to any other applicable **limit of liability**.

## B. Optional Extensions of Coverage

These extensions of coverage apply only if the applicable sublimit of liability is shown in **E. Optional Extensions of Coverage – Sublimits of Liability** of the DECLARATIONS, Form RM1000.

### 1. Course of Construction

- a. We will pay for direct physical loss or damage to **real property** of the type insured by this policy, including new additions and buildings at an existing **covered location**, that **you** begin to construct during the **policy period**.
  - (1) This coverage only applies for sixty (60) days from the date **you** begin construction.

## EXTENSIONS OF COVERAGE (Continued)

(2) To continue this coverage beyond the sixty (60) days, **you** must:

(a) Report newly constructed **real property** to **us** prior to the end of that sixty (60) day period; and

(b) Pay premium from the date **you** begin construction.

**b.** We will also pay under this extension of coverage for materials, supplies, machinery, equipment and fixtures, including those that are **personal property of others**, which are:

(1) Intended by **you** for use in construction; and

(2) Located on the construction site awaiting use in construction.

**c.** This coverage only applies to the construction of **real property you** intend to own or occupy once constructed.

### 2. Errors and Omissions

If a **covered loss** is not payable under this policy solely because of an error or unintentional omission made by **you**:

**a.** In the description of where **covered property** is physically located;

**b.** To include any location:

(1) owned, rented or leased by **you** on the **effective date** of this policy; or

(2) purchased, rented or leased by **you** during the term of the policy; or

**c.** That results in cancellation of the property insured under this policy, except for cancellation due to nonpayment of premium.

Then **we** will pay the amount **we** would have paid had the error or omission not been made, but not exceeding the **limit of liability** provided for Errors and Omissions shown on the DECLARATIONS, Form RM1000.

This coverage does not apply, however, if coverage is found, in whole or in part, elsewhere in this policy.

### 3. Exhibitions, Expositions, Fairs or Trade Shows

**We** will pay for loss or damage to **your personal property** while at an exhibition, exposition, fair or trade show.

Coverage also applies while **your personal property** is being transported between a **covered location** and the location of the exhibition, exposition, fair or trade show.

### 4. Miscellaneous Locations

**Miscellaneous locations** are insured for coverages marked with an "X" in **B.** Coverages of the DECLARATIONS, Form RM1000, and coverages provided by endorsement.

### 5. New Locations

**a.** **New locations** are insured for coverages marked with an "X" in **B.** Coverages of the DECLARATIONS, Form RM1000, and coverages provided by endorsement for the period of time specified in **E. 4. h.** of the DECLARATIONS, Form RM1000.

## EXTENSIONS OF COVERAGE (Continued)

b. To continue this coverage beyond the time frame specified, **you** must:

- (1) Report **new locations** to **us** prior to the end of the period specified on the DECLARATIONS, Form RM1000; and
- (2) Pay premium from the date **you** purchase or rent these **new locations**.

### 6. Demolition Cost, Increased Construction Cost and Operation of Building Laws

a. In the event of a **covered loss**, **we** will pay:

#### (1) Demolition Cost

The cost incurred to demolish all or part of **your covered real property**, including the cost to clear the site, if any law or ordinance that exists at the time of loss requires such demolition.

#### (2) Increased Construction Cost

The increased cost **you** incur for materials and labor required to rebuild the damaged portion of **your real property** at the same location and in a manner that satisfies the minimum requirements of the applicable law or ordinance existing at the time of the loss.

#### (3) Operation of Building Laws

The cost **you** incur to rebuild at the same location any undamaged part of **your real property** that is required by law to be demolished after a **covered loss**, excluding any costs associated with demolition. **We** will only pay the costs to satisfy the minimum requirements of the applicable law or ordinance that exists at the time of the loss.

b. **We** will not pay for any of these costs:

- (1) Unless they are incurred within two (2) years from the date of loss.
- (2) If they are incurred due to any law or ordinance that:
  - (a) **You** were required to comply with before the loss, even if the building was undamaged; and
  - (b) **You** failed to comply with.
- (3) If they are associated with any demolition, abatement, removal, cleanup, debris removal, repair, monitoring or testing, increased cost of repair or other cost resulting from enforcement of any such law or ordinance which relates to **pollution, fungus, bacteria, wet or dry rot, or decay**.

### 7. Salespeople

a. **Your** covered **personal property** in the custody of salespeople.

b. Coverage does not apply to loss or damage by theft from the salespersons vehicle unless:

- (1) The vehicle is equipped with a fully enclosed body or compartment;
- (2) The doors, windows and hatches were securely locked; and

## EXTENSIONS OF COVERAGE (Continued)

(3) There are visible signs of forced entry to the vehicle

at the time of loss.

### 8. Transit

**Your covered personal property while in transit.**

This extension of coverage also applies to **personal property of others** while in **transit at your risk**, but does not apply if **you** are acting as a common or contract carrier.

### 9. Unscheduled Locations

**Unscheduled locations** are insured for coverages marked with an "X" in **B**. Coverages of the DECLARATIONS, Form RM1000, and coverages provided by endorsement.

The sublimits of liability or amounts payable under these optional extensions of coverage do not increase and are not in addition to any other applicable **limit of liability**.

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## EXCLUSIONS

### A. GROUP A EXCLUSIONS

We will not pay for loss or damage caused by or resulting from any of the following, regardless of any other cause or event, including a **peril insured against**, that contributes to the loss at the same time or in any other sequence:

1. Loss attributable to:

- a. War, including undeclared or civil war; or
- b. Warlike action by a military force, including action in hindering or defending against an actual or expected attack, by any government, sovereign or other authority using military personnel or other agents; or
- c. Insurrection, rebellion, revolution, usurped power, including action taken by a governmental authority in hindering or defending against any of these

whether or not involving the use of any chemical, biological or nuclear substance.

2. **Earth movement**, whether sudden or gradual.

- a. If a loss to **covered property** by fire, theft, or explosion ensues, we will pay for that loss.
- b. This exclusion does not apply to **covered property in transit**.
- c. This exclusion does not apply to **sinkhole collapse** or **volcanic activity**.

3. **Flood**.

- a. If a loss to **covered property** by fire, theft, or explosion ensues, we will pay for that loss.
- b. This exclusion does not apply to **covered property in transit**.

4. **Fungus**, bacteria, wet or dry rot, decay.

If a loss to **covered property** from a **specified peril** ensues, we will pay for that loss.

5. **Pollution**.

6. Demolition cost, operation of building laws and increased cost of construction including the enforcement of any ordinance or law regulating the use, construction, repair or demolition of buildings or structures.

7. Seizure or destruction of **covered property** by government order.

We will pay for loss to **covered property** resulting from acts of destruction ordered by government to prevent the spread of fire.

8. Nuclear reaction or nuclear radiation, or radioactive contamination.

If a loss to **covered property** by fire ensues, we will pay for that loss unless otherwise limited or excluded elsewhere in this policy, including any limits or exclusions applicable to terrorism.

## EXCLUSIONS (Continued)

9. Interference with or interruption of any public or private utility or any entity providing electrical, heating, air conditioning, refrigeration, telecommunication, steam, water, sewer or fuel service or any other service, if the failure occurs away from the **covered location**.

If a **covered loss** ensues, **we** will pay for that loss.

10. The actual or suspected presence or threat of any virus, organism or like substance that is capable of inducing disease, illness, physical distress or death, whether infectious or otherwise, including but not limited to any epidemic, pandemic, influenza, plague, SARS or Avian Flu.
11. Except as shown in **A. 3. Standard Extensions of Coverage of EXTENSIONS OF COVERAGE, Form RM1002**, loss attributable to:
- a. The introduction of a malicious code, program, virus, worm, Trojan Horse program, macro time or logic bomb or similar unauthorized instruction which is designed or intended to damage, corrupt, destroy, distort, or delete any part of the system or disrupt its normal operation, into any of the following, whether owned by **you** or others:
    - (1) **Data processing equipment, software, data, or media;**
    - (2) Information repository;
    - (3) Hardware or **software** based computer operating systems;
    - (4) Microprocessors;
    - (5) Integrated circuits;
    - (6) Computer networks;
    - (7) Website service; or
    - (8) Any other electronic equipment, computerized equipment, or similar device.
  - b. Programming, operation or operator error of any of the items described in **11. a. (1) - (8)**.
  - c. Incompatibility, or the inability to properly interface between any of the items described in **11. a. (1) - (8)**.
  - d. A change in the functionality, availability, operation, use of, accessibility to or operation of any of the items described in **11. a. (1) - (8)**.
  - e. Inability, failure or malfunction of the items as described in **11. a. (1) - (8)** or any services, functions, or products that use or rely upon in any manner one (1) or more of the items as described in **11. a. (1) - (8)** to correctly recognize, distinguish, interpret, process, provide or accept **data** or one (1) or more dates or times.
  - f. Advice, consultation, evaluation, design, inspection, installation, repair, replacement or maintenance done by **you** or for **you** to determine or correct any conditions or problems described by in **11. a. - e**.

If loss to **covered property** by any of the following perils ensues, **we** will pay for that loss;

- a. Fire;
- b. Explosion; or
- c. Leakage or accidental discharge from automatic fire protection system.

However, **we** will not pay for modification, repair or replacement of systems or devices described in **11. a. (1) - (8)** in order to correct any potential or actual deficiencies or to change any features.

## EXCLUSIONS (Continued)

### B. GROUP B EXCLUSIONS

We will not pay for loss or damage caused by or resulting from any of the following:

1. Unexplained or mysterious disappearance of any property.
2. Shortage of property discovered on taking inventory.
3. Theft by employees, whether acting alone or with others.
4. Any criminal, fraudulent or dishonest acts committed alone or in collusion with others:
  - a. By you;
  - b. By any of **your** associates, proprietors, partners, directors, trustees, officers, agents, employees or representatives; or
  - c. By any person or entity to whom **you** or any of **your** associates, proprietors, partners, directors, trustees, officers, agents, employees or representatives voluntarily relinquishes possession of **covered property** with or without **your** authority.

However, acts of destruction, including vandalism, by employees to **covered property** shall not be subject to this exclusion.

5. Manufacturing or processing operations, which result in damage to stock or materials while the stock or materials are being processed, manufactured, worked on or tested.

If a **covered loss** ensues, **we** will pay for that loss.

6. Delay, loss of market, loss of use, indirect or remote loss or damage.
7. Loss attributable to:
  - a. Wear and tear, deterioration, depletion, erosion, rust, corrosion;
  - b. Inherent vice, latent defect, or any quality in the **covered property** that causes it to damage or destroy itself;
  - c. Smog, acid rain, agricultural smudging;
  - d. Smoke, fumes, gas or vapor that result from industrial operations;
  - e. Settling, cracking, shrinking, bulging or expansion of pavements, foundations, walls, floors, roofs or ceilings, retaining walls or outdoor swimming pools;
  - f. Animals, birds, vermin, rodents or insects;
  - g. Change or extremes in temperature or humidity, whether atmospheric or not, except damage to equipment; or
  - h. Contamination, shrinkage, change in taste, texture, finish or color.

If a **covered loss** ensues, **we** will pay for that loss.

8. Failure or breakdown of machinery or equipment, including rupture or bursting caused by centrifugal force.

If a **covered loss** ensues, **we** will pay for that loss.

This exclusion will not apply to physical loss to **data, data processing equipment** or **software**.

## EXCLUSIONS (Continued)

9. Explosion of the following:

- a. Steam boilers;
- b. Steam turbines, steam engines, steam piping, electric steam generators; or
- c. Gas turbines.

If a loss to **covered property** by fire or explosion ensues, **we** will pay for that loss.

10. Rupture, bursting, cracking, burning or bulging of the following:

- a. Steam boilers;
- b. Steam turbines, steam engines, steam piping, electric steam generators;
- c. Hot water boilers or other equipment for heating water;
- d. Pressure vessels; or
- e. Gas turbines.

If a loss to **covered property** by fire or explosion ensues, **we** will pay for that loss.

11. Any electrical injury or disturbance to electrical appliances, devices, fixtures, wiring or other electrical or electronic equipment caused by electrical currents artificially generated.

If a fire or an explosion loss ensues, **we** will pay for that loss.

This exclusion will not apply to physical loss to:

- a. **Data** or **software** caused by injury, disturbance, or erasure resulting from electricity or magnetic fields; or
- b. **Data processing equipment** caused by short circuit, blowout, or other electrical damage.

12. Loss attributable to faulty, defective or inadequate:

- a. Construction, workmanship or material;
- b. Maintenance;
- c. Design, plan or specification;
- d. Developing, surveying or siting of buildings or structures during the course of construction or alterations.

If a **covered loss** ensues, **we** will pay for that loss.

13. Loss or damage to bulkheads, piers, wharves, docks, seawalls or jetties from freezing or thawing, impact of watercraft, or by the pressure or weight of ice or water whether driven by **wind** or not.

14. Acts or decisions, including the failure to act or decide, of any governmental employee, agent, group, organization, agency or body.

If a **covered loss** ensues, **we** will pay for that loss.

## PROPERTY NOT COVERED

We do not cover loss to:

- A. Aircraft;
- B. Animals;
- C. Bridges or tunnels, however pedestrian walkways connecting buildings are covered;
- D. Caves, caverns, mines of any type, or any property contained within them;
- E. Contraband or property in the course of illegal transportation or trade;
- F. Currency, money, securities and negotiable instruments of any kind;
- G. Dams, dikes, levees;
- H. Furs, jewelry;
- I. Locomotives, including rolling stock;
- J. **Mobile equipment or tools**, when more than one-thousand (1,000) feet away from a **covered location**;
- K. Precious metal, except when used in industrial or service operations;
- L. Precious stones, except when used in industrial or service operations;
- M. Property insured under import or export ocean cargo policies;
- N. Property **you** transport as a common or contract carrier;
- O. Property shipped by mail, unless sent registered or certified;
- P. Vehicles, licensed for highway use, when more than one-thousand (1,000) feet away from **covered location**. If **your** vehicles, licensed for highway use, are covered for physical damage by other insurance, **you** agree that such other insurance is considered **your** primary coverage for any loss or damage that occurs;
- Q. Water, land, including land on which **covered property** is located, lawns, growing crops, or standing timber;
- R. Watercraft, except watercraft that is part of **your** inventory while being stored un-fueled and on dry land at **covered location**.

## VALUATIONS

### A. Replacement Cost

1. Loss or damage to **covered property** will be valued at the time and place of the loss at **replacement cost** unless otherwise indicated in **B.** and **C.** below or by other forms or endorsements attached to this policy.
2. **We** will not pay **replacement cost** until the lost or damaged property is actually repaired or replaced. If repairs or replacement are not made within two (2) years after the date of the physical loss **we** will pay only the **actual cash value** amount.
  - a. **Our** obligations for **replacement cost** will be the smaller of:
    - (1) The cost to repair the damaged property; or
    - (2) The cost to replace or rebuild with new materials of like size, kind and quality; or
    - (3) The selling price of **your real property** or **personal property**, other than stock, that is offered for sale, less all saved expenses; or
    - (4) The amount of **your** legal liability to the owner of **personal property of others**; or
    - (5) The applicable **limit of liability**.
  - b. **We** will not pay for any increase in cost due to **your** failure to use reasonable speed to repair, rebuild or replace the damaged property.
  - c. If the replacement occurs at another location, **we** will not pay for the cost of land at either the original or the **new location**.
3. If **you** elect not to rebuild **your real property** after a **covered loss**, **you** may still make claim for the **covered loss** to **your real property** at **replacement cost**, excluding any amounts for demolition or increased cost of construction, provided;
  - a. **you** actually spend those funds on capital expenditures to improve **real property** at **covered locations** within the policy territory;
  - b. those capital expenditures were not planned as of the date of loss; and
  - c. **you** make claim for the expenditure of these funds within two (2) years of the date of loss.
4. If an **object** requires replacement due to an **accident**, **we** will pay **your** additional cost to replace with equipment that is better for the environment, safer or more efficient than the equipment being replaced.

However, **we** will not pay more than one-hundred twenty-five (125) percent of what the cost would have been to repair or replace the **object(s)** with like kind and quality.

This does not apply to any property subject to valuation based on **actual cash value**, nor does this provision increase any other applicable **limit of liability**.

The **period of restoration** will not be increased by any of the above.

### B. Actual Cash Value

Loss or damage to these types of **covered property** will be valued at **actual cash value** at the time and place of loss:

## VALUATIONS (Continued)

- a. Manuscripts;
- b. **Mobile equipment or tools**; and
- c. Vehicles licensed for highway use.

### C. Other Valuations

Loss or damage to these types of **covered property** will be valued at the time and place of loss as follows:

#### 1. Exposed film

The value of unexposed film of the same type and quality.

#### 2. Fine Arts

a. The lesser of the:

- (1) Reasonable or necessary restoration or repair costs needed to return the damaged article(s) to its condition as of the time of loss;
- (2) Cost to replace the damaged article;
- (3) Value specified for an article(s) if shown on a schedule of **fine arts** on file with **us**, or
- (4) Value specified for an article(s) if shown on the schedule of any form or endorsement attached to this policy.

b. In the event of the total loss of an article or articles which are a part of a pair or set, **we** will pay **you** the full amount of the value of such set as determined in **C. 2. a.** above and **you** will surrender the remaining article or articles of the set to **us**.

#### 3. Finished goods manufactured by **you**

The regular cash selling price at the location where the loss happens, less all discounts and charges to which the merchandise would have been subject had no loss occurred.

#### 4. **Media, data**, programs or any **software** stored on electronic, electromechanical, electromagnetic **data processing equipment** or production equipment.

The cost of transferring such from backup or from originals of a previous generation. **We** will not pay for any other cost, including research, engineering or other cost of restoring or recreating lost information.

#### 5. Stock in process

The value of raw materials and labor expended plus the proper proportion of overhead charges.

#### 6. **Valuable papers and records**

The value blank, plus the cost of copying from backup or from originals of a previous generation. **We** will not pay for any other cost, including research, engineering or other cost, of restoring or recreating lost information.

## CONDITIONS

### A. Abandonment of Property

**You** may not abandon property to **us**.

### B. Appraisal

1. If **you** fail to agree with **us** on the amount of a loss, either party may demand that the disputed amount be submitted for appraisal. A demand for appraisal will be made in writing within sixty (60) days after **our** receipt of proof of loss. Each party will then choose a competent and disinterested appraiser. Each party will notify the other of the identity of its appraiser within thirty (30) days of the written demand for appraisal.
2. The two (2) appraisers will choose a competent and disinterested umpire. If the appraisers are unable to agree on an umpire within fifteen (15) days, **you** or **we** may petition a judge of a court of record in the state where the **covered loss** happened, to select an umpire.
3. The appraisers will then set the amount of the loss or damage. If the appraisers submit a written report of an agreement to **you** and **us**, the amount they agree on will be the amount of **our** payment for the loss or damage. If the appraisers fail to agree within a reasonable time, they will submit their differences to the umpire. Written agreement signed by any two (2) of these three (3) will set the amount of loss or damage.
4. Each appraiser will be paid by the party that selects him or her. Other expenses of the appraisal and compensation of the umpire will be paid equally by **you** and **us**.

### C. Assignment

**Your** assignment of this policy will not be valid except with **our** written consent.

### D. Brands and Labels

In the event of a **covered loss** to branded or labeled merchandise, **we** may choose to take title to all or any part of that merchandise, at the value established by the terms of this policy. **You** may, at **your** expense:

1. Stamp "salvage" on the merchandise or its containers; or
2. Remove or obliterate the brands or labels if such removal or obliteration will not physically damage the merchandise. **You** must re-label the merchandise or containers in compliance with the requirements of law.

### E. Breach of Condition

A breach of any condition of this policy at any **covered location** will not affect coverage at any other **covered location** where, at the time of loss or damage, no breach exists.

### F. Cancellation

1. **You** may cancel this policy by mailing or delivering to **us** advance written notice of cancellation.
2. If this policy has been in effect for less than sixty (60) days and is not a renewal of a policy **we** issued, **we** may cancel this policy for any reason by giving **you** written notice of cancellation at least:
  - a. Ten (10) days before the date of cancellation if **we** cancel for nonpayment of premium; or

## CONDITIONS (Continued)

- b. Sixty (60) days before the date of cancellation if **we** cancel for any other reason.
3. If this policy has been in effect for sixty (60) days or more or is a renewal of a policy **we** issued, **we** may cancel this policy by giving **you** written notice of cancellation at least:
  - a. Ten (10) days before the date of cancellation if **we** cancel for one (1) or more of the following reasons:
    - (1) Nonpayment of premium;
    - (2) Conviction of a crime arising out of acts increasing the likelihood of a **covered loss**;
    - (3) Discovery of fraud or material misrepresentation by **you** in obtaining this policy or in pursuing a claim under this policy;
    - (4) Discovery of any willful or reckless act or omission by **you** increasing the likelihood of a **covered loss**; or
    - (5) A determination by the Commissioner of Insurance that continuation of the policy would violate or place **us** in violation of the law.
  - b. Sixty (60) days before the date of cancellation if **we** cancel for one (1) or more of the following reasons:
    - (1) Physical changes in the property, which increase the likelihood of a **covered loss**;
    - (2) A material increase in the likelihood of a **covered loss**; or
    - (3) Loss or decrease of **our** reinsurance covering the insurance provided by this policy.
4. If **we** cancel for nonpayment of premium, **you** may continue the coverage and avoid cancellation by making full payment any time prior to the date of cancellation.
5. Notice of Cancellation will be delivered or sent by;
  - a. Registered mail;
  - b. Certified mail; or
  - c. First-Class mail.

**We** will mail or deliver the notice to **your** last mailing address known to **us**.
6. Notice of cancellation will state the reason for cancellation, and the effective date of cancellation. The **policy period** will end on that date.
7. If this policy is canceled, **we** will send to **you** any premium refund due. If **we** cancel, the refund will be pro rata. If **you** cancel, the refund will be 90% of pro rata. The cancellation will be effective even if **we** have not yet made or offered a refund.
8. If notice is mailed, proof of mailing will be sufficient evidence of notice.

### G. Change of Terms

The terms of this insurance will not be waived, changed, or modified except by written endorsement issued by **us** and which becomes a part of this policy.

## CONDITIONS (Continued)

### H. Collection from Others

Payment to **you** for a **covered loss** will be reduced to the extent **you** have collected that loss from others.

### I. Concealment, Misrepresentation or Fraud

This entire policy is void, if with the actual intent to deceive

1. **You**;
2. **Your** representatives; or
3. any insured;

commit fraud or conceal or misrepresent a fact or circumstance concerning

1. This policy;
2. The **covered property**;
3. **Your** interest in the **covered property**; or
4. A claim under this policy.

### J. Inspection

1. During the period of this policy, **we** will be permitted, but not obligated, to inspect the **covered property**. Neither **our** right to make inspections, nor making them, nor any report of them, will imply for **you** or others, nor constitute an undertaking, that the **covered property** is safe, healthful, or in compliance with laws, regulations, codes or standards.
2. This condition does not apply to any inspections, surveys, reports or recommendations **we** may make relative to certification, under state or municipal statutes, ordinances or regulations, of boilers, pressure vessels or elevators.

**We** will have no liability to **you** or others because of any inspection or failure to inspect.

### K. Liberalization

If, during the **policy period** or forty-five (45) days prior to the **policy period**, a filing of **ours** to a state insurance department would broaden this insurance without requiring any additional premium, then the terms and coverage of that filing will apply to **covered locations** and **covered property** within that state, effective on the dates specified within the filing.

### L. Loss Payee

In the event of a **covered loss** to property in which both **you** and a loss payee shown on the SCHEDULE OF MORTGAGE HOLDERS OR LOSS PAYEES, Form RM1102, have an insurable interest, **we** will:

1. Adjust the **covered loss** with **you**; and
2. Make payment for the **covered loss** to **you** and the loss payee jointly, as their interests may appear.

## CONDITIONS (Continued)

### M. Mortgage Holders

1. We will pay for **covered loss** to buildings or structures to each mortgage holder shown on the SCHEDULE OF MORTGAGE HOLDERS OR LOSS PAYEES, Form RM1102, as their interests may appear.
2. A mortgage holder has the right to receive loss payment even if the mortgage holder has started foreclosure or similar action on the building or structure.
3. If we deny **your** claim because of **your** acts or because **you** have failed to comply with the terms of this policy, the mortgage holder will still have the right to receive loss payment, up to the amount of their insurable interest, but in no event more than the applicable **limit of liability**, if the mortgage holder:
  - a. Pays any premium due under this policy at **our** request;
  - b. Submits a signed, sworn proof of loss within sixty (60) days after receiving notice from **us** of **your** failure to do so; and
  - c. Has notified **us** of any change in ownership, occupancy, or substantial change in risk known to the mortgage holder.All terms and conditions of this policy will then apply directly to the mortgage holder.

4. If we pay the mortgage holder for any **covered loss** and deny payment to **you** because **you** have failed to comply with the terms of this policy:
  - a. The mortgage holder's rights under the mortgage will be transferred to **us** to the extent of the amount we pay; and
  - b. The mortgage holder's right to recover the full amount of the mortgage claim will not be impaired.

In the event of a **covered loss**, we will, at **our** option, pay the mortgage holder the whole principal of **your** mortgage plus any accrued interest. In that event, **your** mortgage and note will be transferred to **us**, and **you** will pay **your** remaining mortgage debt to **us**.

5. If we cancel or nonrenew this policy, we will give the mortgage holder the same notice we give to **you**.
6. The term "mortgage holder" includes trustee.

### N. No Benefit to Bailee

No person or organization, having custody of **your covered property**, will benefit from this policy.

### O. No Reduction by Loss

Except for those coverages written with an annual aggregate **limit of liability** or sublimits of liability, we will pay for a **covered loss** without reducing any other applicable **limit of liability** or sublimits of liability.

### P. Nonrenewal

1. If we decide not to renew this policy, we will mail or deliver a written notice of nonrenewal to **you** at least sixty (60) days before the expiration date of this policy. Notice will be sent to **your** last mailing address known to **us**. We will state the reason for nonrenewal.

## CONDITIONS (Continued)

2. This notice will be delivered or sent by:
  - a. Registered mail;
  - b. Certified mail; or
  - c. First-Class mail.
3. If notice is mailed, proof of mailing will be sufficient evidence of notice.

### Q. Other Insurance

1. If there is any other insurance that would apply in the absence of this policy, **we** will pay for a **covered loss** only after the limits of all other applicable insurance are exhausted.
2. If this policy is deemed by law to contribute to a loss with other insurance, **we** will pay only **our** proportionate share of the loss, up to the applicable **limit of liability**. **Our** share will be the proportion that the applicable **limit of liability** of this policy bears to the total applicable **limits of liability** available from all insurance.
3. **You** are permitted to have other insurance over any limits or sublimits of liability specified in this policy.
4. The existence of such insurance will not reduce any limit or sublimit of liability in this policy.
5. To the extent this policy replaces another policy, coverage under this policy shall not become effective until such other policy has terminated.

### R. Our Options

At **our** option, **we** will repair, rebuild or replace damaged **covered property** with other property of like kind and quality within a reasonable period of time. If **we** elect to repair or replace the **covered property**, **we** will notify **you** of that decision within sixty (60) days of **our** receipt of **your** proof of loss. **We** will, at **our** option, take title to all or any part of the damaged or destroyed property at the agreed or appraised value.

### S. Pair, Set or Parts

In the event of a **covered loss** to an article that is part of a pair or set, **our** payment for that loss will be:

1. The cost to repair or replace any part to restore the pair or set to its value before the **covered loss**; or
2. The difference between the value of the pair or set before and after the **covered loss**.

In no event will the loss of part of a pair or set be regarded as a total loss of the pair or set.

When **covered property** consists of several parts, **we** will pay only for the lost or damaged part.

### T. Payment of Loss

**We** will pay the **covered loss** within thirty (30) days after **we** receive and accept the signed, sworn Proof of Loss, if:

1. **You** have complied with all the terms of this policy;

## CONDITIONS (Continued)

2. **We** have reached agreement with **you** on the amount of **covered loss**, or
3. An appraisal award is made as provided for in Condition **B**. Appraisal.

### U. Policy Period and Territory

**We** will only pay for direct physical loss or damage to **covered property** of the type insured by this policy as the result of a **peril insured against** during the **policy period** shown on the DECLARATIONS, Form RM1000, while the **covered property** is:

1. Within the continental United States of America, Hawaii and Puerto Rico;
2. Being moved on land or in the air within or between the continental United States of America and Canada; or moved on land or in the air within Hawaii or Puerto Rico; or
3. Being moved on inland waters and intercoastal waterways of the continental United States of America, or on any of the Great Lakes.

### V. Recovered Property

1. If either **you** or **we** recover any **covered property** after **we** have paid for its loss, that party must give the other prompt written notice of the recovery.
2. If **we** recover the **covered property**, **we** will return it to **you**, if **you** so request. **You** must then return the amount **we** paid to **you** for it.
3. If **you** recover the **covered property**, **you** may either keep it or surrender it to **us**. If **you** choose to keep it, **you** must return the amount **we** paid to **you** for it.

### W. Right to Adjust with Owner

1. **Covered losses** will be adjusted with **you** except as provided in Condition **M**. Mortgage Holders.
2. If a claim is made for damage to **covered property** of others, **we** will have the right to adjust that loss or damage with the owners of that property. **Our** payment to the owners will fully satisfy any claim of **yours** for damage to that property.

### X. Subrogation

1. If **we** make payment for a loss, **you** will assign to **us** all **your** rights of recovery against any party for that loss. **We** will not acquire any rights of recovery **you** have waived prior to the loss. **You** agree to cooperate and not to waive, prejudice, settle or compromise any claim against any party after the loss has occurred.
2. **You** will be paid any recovery, in the proportion that **your** deductible and any provable uninsured loss bears to the total loss less **your** proportion of fees and expenses.

### Y. Suit

No suit or other legal proceeding shall be brought against **us** unless there has been full compliance with all the policy terms and conditions. Any suit against **us** must be brought within two (2) years after the date on which the direct physical loss or damage occurred, or the shortest time permitted by law, whichever is greater.

## CONDITIONS (Continued)

### Z. Suspension

If Equipment Breakdown is marked with an "X" in **B. Coverages of the DECLARATIONS**, Form RM1000, and **we** discover a dangerous condition relating to an **object**, **we** may immediately suspend the insurance provided by this coverage for that covered equipment by written notice mailed or delivered to **you** either at **your** address or at the location of any **object**. Suspended insurance may be reinstated by **us**, but only by an endorsement issued as part of this policy. **You** will be credited for the unearned portion of the premium paid for the suspended insurance, pro rata, for the period of suspension. The suspension will be effective even if **we** have not yet made or offered a refund.

### A.A. Titles of Paragraphs

The titles of the paragraphs of this policy and of any endorsements attached to it are only for reference. They do not affect the terms to which they relate.

### B.B. Vacancy

#### 1. If any of **your real property**:

- a. is vacant at the inception of this policy; or
- b. becomes vacant, and remains vacant for more than sixty (60) consecutive days, during the **policy period**;

it is a requirement of this policy that **you**:

- (1) Notify **us** in writing of the vacancy prior to loss or damage; and
  - (2) Maintain in complete working order the protective safeguards present prior to the vacancy. Protective safeguards include, but are not limited to:
    - (a) Automatic sprinkler systems;
    - (b) Fire alarm systems;
    - (c) Guard or watchman services;
    - (d) Burglary systems; and
    - (e) Monitoring systems.
2. If the above requirements are not met, then in addition to the other terms, conditions, limitations and exclusions in this policy, **we** will:
- a. Not pay for any loss or damage caused by or resulting from any of the following:
    - (1) Breakage of building glass;
    - (2) **Fungus** (including **fungus** cleanup);
    - (3) Sprinkler leakage, unless the system has been protected against freezing;
    - (4) Theft or attempted theft;
    - (5) Vandalism;

## CONDITIONS (Continued)

(6) Malicious mischief; or

(7) Water damage.

b. Value the loss or damage for the vacant **real property** (including any loss or damage to **personal property**) at the time of loss at the smaller of:

(1) The **actual cash value**;

(2) The actual cost to repair; or

(3) The selling price, less all saved expenses, if it was being offered or listed for sale at the time of loss.

3. **Real property** is considered vacant unless at least thirty (30) percent of the square footage is:

a. Being used by **you** to conduct **your** customary operations; or

b. Rented by **you** to a tenant or sub-tenant and is being used by them to conduct their customary operations.

4. **Real property** is not considered vacant during its ongoing construction or renovation.

### C.C. Your Duties After a Loss

In case of loss **you** will:

1. Give **us** immediate written notice of the loss;

2. Give notice of such loss to the proper authorities if the loss may be due to a violation of the law;

3. As soon as possible, give **us** a description of the property involved and how, when and where the loss happened;

4. Take all reasonable steps to protect the **covered property** from further damage;

5. Promptly separate the damaged property from the undamaged property, and keep it in the best possible order for examination;

6. Furnish a complete inventory of the lost, damaged and destroyed property, showing in detail the quantity, and amount of loss claimed under the valuation provision of the policy;

7. Keep an accurate record of all repair costs;

8. Keep all bills, receipts and related documents that establish the amount of loss;

9. As often as may reasonably be required:

a. Permit **us** to inspect the damaged property and take samples for inspection, testing and analysis.

b. Produce for inspection and copying, all of **your** books of account, business records, bills and invoices.

c. Permit **us** to question, under oath, **you** and any of **your** agents, employees, or representatives involved in the purchase of this insurance or the preparation of **your** claim, including any public adjusters and any of their agents, employees or representatives, and verify **your** answers with a signed acknowledgment.

## CONDITIONS (Continued)

10. Submit to **us**, within ninety (90) days from the date of loss, unless **we** extend the time in writing, a signed, sworn Proof of Loss that states to the best of **your** knowledge and belief:

- a. The time and cause of the loss;
- b. **Your** interest and the interest of all others in the property involved;
- c. Any other policies of insurance that may provide coverage for the loss;
- d. Any changes in title or occupancy of the property during the **policy period**; and
- e. The amount of **your** claimed loss.

**You** shall also submit with the Proof of Loss:

- a. The inventory referred to in **C.C. 6.**;
- b. The records specified in **C.C. 7.** and **C.C. 8.**;
- c. Specifications for any damaged building; and
- d. Detailed estimates and invoices for the repair of any damage.

11. Cooperate with **us** in the investigation and adjustment of the loss.

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## DEFINITIONS

**A. Accident** means a sudden, fortuitous event that causes direct physical damage to an **object(s)**, which requires that the **object(s)** be repaired or replaced, in whole or in part.

**Accident**, however, does not include any of the following:

1. Fire, including water or other means used to extinguish the fire;
2. Combustion explosion. This includes but is not limited to, a combustion explosion of any steam boiler or other fired vessel;
3. Discharge of molten material from equipment including the heat from such discharged material;
4. Depletion, deterioration, rust, corrosion, erosion, settling or wear and tear or any other gradually developing condition;
5. Misalignment, miscalibration, tripping off-line, or any condition which can be corrected by resetting, tightening, adjusting or cleaning, or by the performance of maintenance;
6. Lightning;
7. Any loss or damage caused by or resulting from any type of electrical or electronic insulation breakdown test; or
8. Any loss or damage caused by or resulting from any type of hydrostatic, pneumatic or gas pressure test.

**B. Actual cash value** means **replacement cost** less deduction for depreciation.

**C. Average daily value (ADV)** means **your business income** that would have been earned during the **period of restoration** had no loss happened, divided by the number of operating days in that period.

The **average daily value (ADV)** applies to the **business income** value of the entire **covered location** whether or not the loss effects the entire **covered location**. If more than one (1) **covered location** is included in the valuation of the loss, the **average daily value (ADV)** will be the combined value of all **covered locations**.

**D. Business income** means:

Gross earnings, including rental income, plus all other earnings derived from the operation of the business, less all charges and expenses which do not necessarily continue.

For example:

1. Manufacturing operations:

The net sales value of production less the cost of all raw stock, materials and supplies utilized in such production.

2. Mercantile or nonmanufacturing operations:

The net sales less the cost of merchandise sold and materials and supplies consumed in the operations or services rendered by **you**.

## DEFINITIONS (Continued)

3. Property rental operations:

The total expected gross rental income from tenant occupancy of **your covered location(s)**. This also includes all charges which are the legal obligation of **your** tenants, which would otherwise be **your** obligations, and the fair rental value of any portion of **your covered location(s)** which **you** occupy.

- E. Covered location(s)** means those locations shown on the Schedule of the DECLARATIONS, Form RM1000, or on the Schedule of any endorsement to this policy.
- F. Covered loss** means a loss to **covered property** at a **covered location** resulting from a **peril insured against**.
- G. Covered property** means property insured by this policy.
- H. Data** means any information recorded on **media** and used in **your** processing operations.
- I. Data processing equipment** means processing units, terminals, tape drives, disk drives, controllers, printers, and other equipment capable of receiving, processing, storing or retrieving information.
- J. Earth movement**, whether natural or man-made, includes but is not limited to:
1. Earthquake;
  2. Landslide;
  3. Mudflow or mudslide; or
  4. Sinking, rising or shifting of the earth.
- K. Effective date** means the day and time at which the insurance provided by this policy begins.
- L. Extra expense** means the reasonable and necessary extra costs:
1. Incurred to temporarily continue as nearly normal as practicable the conduct of **your** business; or
  2. Of temporarily using property or facilities of **yours** or others.
  3. For purposes of applying the above provision "normal" means the condition that would have existed had no **covered loss** happened.
- M. Fine arts** means property of rarity, antiquity, or artistic merit, including but not limited to paintings; etchings; pictures (including their negatives); tapestries; statuary; marbles; bronzes; antique jewelry; antique furniture; antique silver; rare books; porcelains; rare or art glassware; art glass windows; valuable rugs; bric-a-brac and porcelains.
- N. First tier wind Counties and Parishes** means the Counties and Parishes in the States as follows:
- Baldwin and Mobile Counties in the State of Alabama;
- All Counties in the State of Florida;
- Bryan, Camden, Chatham, Glynn, Liberty and McIntosh Counties in the State of Georgia;

## DEFINITIONS (Continued)

The Hawaiian Islands;

Cameron, Iberia, Jefferson, Lafourche, Orleans, Plaquemines, St Bernard, St Mary, St Tammany, Terrebonne and Vermilion Parishes in the State of Louisiana;

Hancock, Harrison, and Jackson Counties in the State of Mississippi;

Beaufort, Bertie, Brunswick, Camden, Carteret, Chowan, Currituck, Dare, Hyde, New Hanover, Onslow, Pamlico, Pasquotank, Pender, Perquimans, Tyrrell, and Washington Counties in the State of North Carolina;

Beaufort, Charleston, Colleton, Georgetown, Horry and Jasper Counties in the State of South Carolina;

Aransas, Brazoria, Calhoun, Cameron, Chambers, Galveston, Jefferson, Kenedy, Kleberg, Matagorda, Nueces, Refugio, San Patricio and Willacy Counties in the State of Texas; and

The Commonwealth of Puerto Rico.

**O. Flood** means:

1. The release of water from, or the rising, overflowing, or breaking of boundaries of rivers, lakes, streams, ponds, or other natural or man-made bodies of water; or
2. Waves, tides, tidal waves, surface water, rain accumulation or runoff.

**Flood** includes spray from any of them, all whether driven by **wind** or not.

**P. Fungus** means any of a major group (fungi) of saprophytic and parasitic lower plants that lack chlorophyll and include but are not limited to molds, rusts, mildews, smuts, mushrooms, and yeasts, and any mycotoxins, spores, scents or by-products produced or released by fungi.

**Q. Hail** means precipitation composed of concentric layers of clear ice and hardened snow in the shape of stones ranging in size from pea to softball or larger.

**R. Limit(s) of liability** means the maximum amount we will pay for a **covered loss**.

**S. Media** means the medium on which **data** or **software** is stored, such as magnetic tape, perforated paper tape, punch cards, media cards, discs, drums, and other storage devices used in **your data processing equipment**.

**T. Miscellaneous location(s)** means a location other than:

1. A **covered location**;
2. A **new location**;
3. An **unscheduled location**;
4. A location where **covered property** is at an exhibition, exposition, fair or trade show; or
5. A location for which coverage is found, in whole or in part, elsewhere in this policy including any coverage under errors and omissions.

## DEFINITIONS (Continued)

U. **Mobile equipment or tools** means **your** machinery and equipment principally used by **you** or **your** employees away from a **covered location**, including:

1. Tools, whether powered or not; and
2. Machinery and equipment that is attached to a vehicle licensed for highway use.

**Mobile equipment or tools** does not, however, include vehicles licensed for highway use.

V. **Named Storm** means any storm or weather disturbance that is named by the U.S. National Weather Service. All damage resulting from a single **named storm** that occurs within a continuous seventy-two (72) hour period will be considered a single **occurrence**.

W. **New location(s)** means **real property you** purchase or rent, including **personal property** at that location, after the **effective date** of this policy.

X. **New Madrid** means the Counties and Independent Cities in the States as follows:

Clay, Craighead, Crittenden, Cross, Greene, Independence, Jackson, Lawrence, Lee, Mississippi, Monroe, Phillips, Poinsett, Randolph, St Francis, White, and Woodruff Counties in the State of Arkansas;

Alexander, Franklin, Gallatin, Hamilton, Hardin, Jackson, Johnson, Massac, Perry, Pope, Pulaski, Randolph, Saline, Union, and Williamson Counties in the State of Illinois;

Ballard, Calloway, Carlisle, Crittenden, Fulton, Graves, Hickman, Livingston, Lyon, Marshall, and Mcracken Counties in the State of Kentucky;

Desoto, Marshall, Tate, and Tunica Counties in the State of Mississippi;

Bollinger, Butler, Cape Girardeau, Carter, Dunklin, Iron, Jefferson, Madison, Mississippi, New Madrid, Perry, Pemiscot, Reynolds, Ripley, St Charles, St Francois, St Louis, Ste Genevieve, Scott, Stoddard, and Wayne Counties and the Independent City of St. Louis in the State of Missouri;

Crockett, Dyer, Fayette, Gibson, Hardeman, Haywood, Henry, Lake, Lauderdale, Madison, Obion, Shelby, Tipton, and Weakley Counties in the State of Tennessee.

Y. **Object(s)** means the following:

1. Unless specified otherwise in an endorsement to this policy:

- a. Equipment at a **covered location** that generates, transmits or utilizes energy including electronic communications and **data processing equipment**.
- b. Equipment at a **covered location** which, during normal usage, operates under vacuum or pressure, other than the weight of its contents.

2. **Object(s)** does not include any of the following:

- a. Structure, including but not limited to the structural portions of buildings and towers, scaffolding, and any air supported structure;
- b. Foundation;

## DEFINITIONS (Continued)

- c. Cabinet, compartment, conduit or ductwork;
- d. Insulating or refractory material;
- e. Buried vessels or piping;
- f. Waste, drainage or sewer piping;
- g. Piping, valves or fittings forming a part of a sprinkler or fire suppression system;
- h. Water piping that is not part of a closed loop used to conduct heat or cooling from a boiler of refrigeration or air conditioning system;
- i. Vehicle or any equipment mounted on a vehicle;
- j. Satellite, spacecraft, or any equipment mounted on a satellite or spacecraft;
- k. Dragline, excavation or construction equipment;
- l. Equipment manufactured by **you** for sale; or
- m. **Data.**

**Z. Occurrence** means all loss or damage attributable directly or indirectly to one (1) cause or series of similar causes. All such loss or damage will be added together, and the total loss or damage will be treated as one (1) **occurrence** irrespective of the amount of time or area over which such loss or damage occurs.

**A.A. Perils insured against** means causes of loss for which this policy provides coverage.

**B.B. Period of restoration** means;

1. For buildings and equipment, the period of time

- a. starts at the time of a **covered loss** and
- b. ends when using reasonable speed the building and equipment could be:
  - (1) repaired or replaced; and
  - (2) made ready for operations;

under the same or equivalent physical and operating conditions that existed prior to the damage.

2. For buildings in the course of construction:

- a. **We** will apply the time period defined in **B.B. 1.** above to the level of business that would have been reasonably achieved after construction and startup would have been completed had no physical damage happened; and
- b. **We** will give consideration to the actual experience of the business after completion of the construction and startup.

## DEFINITIONS (Continued)

3. For stock in-process and mercantile stock, including finished goods not manufactured by **you**, the time required using reasonable speed:
    - a. To restore stock in process to the same state of manufacture which existed at the beginning of the interruption of production or suspension of business operations or services; and
    - b. To replace physically damaged mercantile stock.
  4. For raw materials and supplies, the period of time:
    - a. Of actual interruption of production or suspension of operation or services which results from **your** inability to obtain suitable replacement raw materials and supplies; but
    - b. Limited to that period for which the damaged raw materials and supplies would have satisfied operating needs.
  5. For **valuable papers and records**, the time required using reasonable speed to copy the physically damaged **valuable papers and records** from backup or from originals of a previous generation. This time does not include research, engineering or any other time necessary to restore or recreate lost information.
  6. For **data**, programs, or other **software**, the time required using reasonable speed to restore the physically damaged or destroyed **data**, programs, or other **software** from backup. This time does not include research, engineering or any other time necessary to restore or recreate lost information.
  7. The **period of restoration** does not include any additional time due to **your** inability to resume operations for any other reason, including but not limited to:
    - a. Making changes to equipment.
    - b. Making changes to the buildings, or structures, except as provided in the Demolition Cost, Increased Construction Cost and Operation of Building Laws provision, if a **limit of liability** is shown in **E. 4. b.**, **E. 4. c.** or **E. 4. d.** of the DECLARATIONS, Form RM1000, attached to this policy.
    - c. Restaffing or retraining employees.
    - d. Any law or ordinance that requires testing, monitoring, clean up, removal, decontamination, treatment, detoxification or neutralization of, or any other response to **pollution** or **pollutant(s)**.
  8. The expiration of this policy will not terminate the **period of restoration**. In no event will the **period of restoration** exceed twenty-four (24) months from the date of loss.
- C.C. Perishable goods** means any **covered property** subject to deterioration or impairment as a result of a change in conditions including but not limited to temperature, humidity or pressure.
- D.D. Personal property** means **your** tangible things, other than **real property**, including improvements and betterments **you** have made in buildings **you** do not own.
- E.E. Personal property of others** means tangible things **you** do not own, other than **real property**, that are:
1. Sold by **you** that **you** agreed, prior to loss, to insure for the account of the purchaser during delivery;
  2. In **your** custody which **you** agreed, prior to loss, to insure; or

## DEFINITIONS (Continued)

3. In **your** care, custody or control, and for which **you** are legally liable, but only to the extent of **your** insurable interest therein.

**F.F. Policy period** means the time during which insurance is provided by this policy.

**G.G. Pollutant(s)** means any solid, liquid, gaseous or thermal irritant or contaminant, including, but not limited to, fiber, smoke, vapor, soot, fumes, acids, alkalis, chemicals, biological, organic or bacterial agents and waste. "Waste" includes, but is not limited to, materials to be recycled, reconditioned or reclaimed. However, **pollutant(s)** does not include ammonia.

**H.H. Pollution** means the presence, discharge, dispersal, seepage, migration, release or escape of any **pollutant(s)**.

**I.I. Puget Sound** means the Counties of Clallam, Island, Jefferson, King, Kitsap, Mason, Pierce, San Juan, Skagit, Snohomish, Thurston, and Whatcom in the State of Washington.

**J.J. Real property** means buildings and any other structure, including:

1. Completed additions, extensions, permanent fittings or fixtures;
2. Machinery and equipment used to service the buildings;
3. Yard fixtures.

**K.K. Replacement cost** means the cost to replace **covered property**:

1. With new materials of like kind and quality and used for the same purpose; and
2. At the location where the loss happened.

But **replacement cost** excludes any increased cost of repair or reconstruction by reason of any law or ordinance regulating construction, repair or use.

**L.L. Second tier wind Counties and Parishes** means the Counties and Parishes in the States as follows:

Clarke, Covington, Escambia, Geneva, Monroe, and Washington Counties in the State of Alabama;

Brantley, Brooks, Bulloch, Charlton, Effingham, Evans, Long, Tattnall, Thomas, and Wayne Counties in the State of Georgia;

Acadia, Assumption, Calcasieu, Iberville, Jefferson Davis, Lafayette, St Charles, St James, St John the Baptist, St Martin, Tangipahoa and Washington Parishes in the State of Louisiana;

George, Pearl River, and Stone Counties in the State of Mississippi;

Bladen, Columbus, Craven, Duplin, Gates, Halifax, Hertford, Jones, Lenoir, Martin, Northampton, Pitt and Sampson Counties in the State of North Carolina;

Bamberg, Berkeley, Dillon, Dorchester, Hampton, Marion and Williamsburg Counties in the State of South Carolina;

Bee, Brooks, Fort Bend, Goliad, Hardin, Harris, Hidalgo, Jackson, Jim Wells, Liberty, Live Oak, Orange, Victoria, and Wharton Counties in the State of Texas.

**M.M. Sinkhole collapse** means loss to **covered property** resulting from the sudden sinking or collapse of any land into naturally occurring underground empty spaces created by the action of water on limestone or similar rock formations. Coverage for **sinkhole collapse** does not include the cost of filling sinkholes.

## DEFINITIONS (Continued)

**N.N. Software** means programs stored on **media** that instruct **data processing equipment** how to process **data**.

**O.O. Specified perils** means direct physical loss or damage caused by or resulting from:

1. Fire;
2. Lightning;
3. Aircraft;
4. Explosion;
5. Riot;
6. Civil commotion;
7. Smoke;
8. Vehicles;
9. **Wind or hail;**
10. Malicious mischief;
11. Leakage or accidental discharge from automatic fire protection system;
12. Collapse.

**P.P. Transit** means the conveyance of **your personal property** within the **policy period** and territory as specified in this policy, from the time it leaves the original point of shipment until it arrives at its intended destination.

This period includes:

1. While the property is in the care, custody or control of hired carriers; and
2. Transfers between conveyances.

**Transit** does not include **personal property** while in the custody of **your** salespeople, or while being conveyed between a **covered location** and the location of an exhibition, exposition, fair or trade show.

Should this policy expire or be canceled after the property leaves the original point of shipment but before it arrives at its intended destination, coverage will continue on this **personal property** until it arrives at its intended destination.

**Q.Q. Unscheduled location(s)** means:

1. **Real property** reported to **us**, but not shown on the Schedule of the DECLARATIONS, Form RM1000, which **you** owned or rented before the **effective date**; and
2. Locations reported to **us**, but not shown on the Schedule of the DECLARATIONS, Form RM1000, at which **you** had **personal property** before the **effective date** other than **new locations**.

**R.R. Valuable papers and records** means written or printed documents or records including books, maps, negatives, drawings, abstracts, deeds, mortgages and manuscripts.

## DEFINITIONS (Continued)

**S.S. Volcanic activity** means direct physical loss or damage to **covered property** directly resulting from:

1. Airborne volcanic blast or shockwave;
2. Ash, dust or particulate matter; or
3. Lava flow.

All **volcanic activity** resulting from volcanic eruptions occurring within any one-hundred sixty-eight (168) hour period will constitute a single **occurrence**.

**Volcanic activity** does not include the cost to remove ash, dust or particulate matter that does not cause direct physical damage to **covered property**.

**T.T. We, us and our(s)** means the company issuing this policy, as shown on the DECLARATIONS, Form RM1000.

**U.U. Wind** means the direct action of the movement of air at any velocity.

**V.V. You and your(s)** mean the named insured shown on the DECLARATIONS, Form RM1000.

DRAFT

Policy number P00-000-000397-774

This endorsement is effective 01/01/2021 and will terminate with the policy. It is issued by the company designated in the Declarations. All other provisions of the policy remain unchanged.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **MOBILE EQUIPMENT OR TOOLS EXTENSION**

This endorsement modifies insurance provided under the following:

PROPERTY NOT COVERED, Form RM1004

1. We will pay for loss to **your mobile equipment or tools** resulting from a **peril insured against** while away from a **covered location** subject to the following:
2. We will not pay more than:
  - A. The **limits of liability** shown on the Schedule of this endorsement;
  - B. \$ No Coverage on any one (1) item or piece of *newly acquired mobile equipment or tools* **you** own; or
  - C. \$ No Coverage on any one (1) item or piece of **mobile equipment or tools** leased or rented by **you**.

We will not pay more than \$ 10,000 in any one (1) **occurrence**.

3. We will not pay unless a **covered loss** exceeds:

(X) Straight Deductible:

\$See Form RM1115. We will then pay the amount of loss in excess of the deductible, up to the applicable **limit of liability**.

( ) Percentage Deductible:

N/A percent of the reported values applicable to the lost or damaged **mobile equipment or tools**. This percentage deductible will not be less than \$ Not Applicable or more than \$ Not Applicable in any one (1) **occurrence**. We will then pay the amount of loss in excess of the deductible, up to the applicable **limit of liability**.

4. **You** will keep a record of all *newly acquired mobile equipment or tools* bought during the **policy period** including the value of the equipment and the date it was purchased. **You** will also provide changes in the values of equipment currently insured, and in the case of leased or rented equipment, the total annual *cost of hire*. **You** will report this information to **us** at the time **you** report the values at risk, or at expiration or cancellation of this policy, whichever occurs first.

A premium charge will be made unless waived by **us**.

**MOBILE EQUIPMENT OR TOOLS EXTENSION (Continued)**

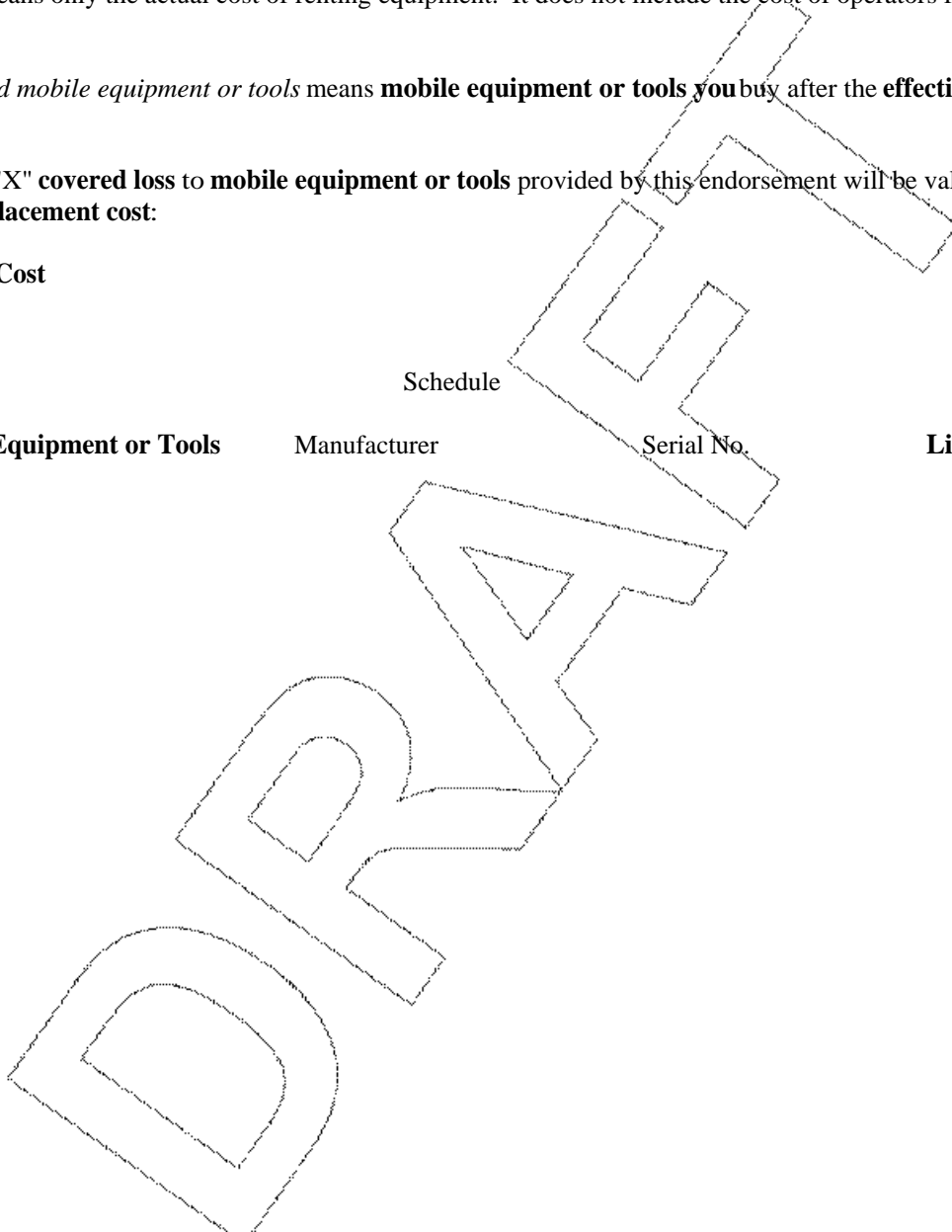
5. For the purpose of coverage provided by this endorsement the *italicized* term:

- A. *Cost of hire* means only the actual cost of renting equipment. It does not include the cost of operators furnished with the equipment.
- B. *Newly acquired mobile equipment or tools* means **mobile equipment or tools you buy** after the **effective date** of this endorsement.

6. If marked with an "X" **covered loss to mobile equipment or tools** provided by this endorsement will be valued at the time and place of loss at **replacement cost**:

( ) **Replacement Cost**

Description of <b>Mobile Equipment or Tools</b>	Schedule		<b>Limit of Liability</b>
	Manufacturer	Serial No.	
Miscellaneous Articles			\$10,000
Musical Instruments			\$10,000



Policy number P00-000-000397-774

This endorsement is effective 01/01/2021 and will terminate with the policy. It is issued by the company designated in the Declarations. All other provisions of the policy remain unchanged.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **EARTH MOVEMENT COVERAGE**

This endorsement modifies insurance provided under the following:

EXCLUSIONS, Form RM1003

- 1. We** will pay for direct physical loss or damage to **covered property** caused by sudden **earth movement** within a state(s) or at a location(s) shown on the Schedule of this endorsement.

In addition, if coverage is provided for **business income** or **extra expense** in **B**. Coverages of the DECLARATIONS, Form RM1000, **we** will pay for covered loss of **business income** or **extra expense** that results from direct physical loss or damage to **covered property** caused by sudden **earth movement** within a state(s) or at a location(s) shown on the Schedule of this endorsement.

If **your** policy includes EARTH MOVEMENT SPRINKLER LEAKAGE EXTENSION, Form RM1105, there is no coverage in this endorsement for any loss or damage (including any coverage for **business income** or **extra expense**) resulting from leakage of an automatic fire extinguishing system caused by sudden **earth movement** (see Form RM1105 for any coverage for such loss or damage).

All **earth movement**, including any earthquake shocks, within a continuous seventy-two (72) hour period will be considered a single **occurrence**. The expiration of this policy will not reduce this seventy-two (72) hour period.

- 2. Limit of Liability**

The following **limits of liability** do not increase and are not in addition to any other applicable **limit of liability**.

- A.** The most **we** will pay for all loss or damage, including any loss of **business income** or **extra expense**, for each **occurrence** of sudden **earth movement** loss will be the lesser of the applicable **limit of liability** shown on:

- (1)** The DECLARATIONS, Form RM1000;
- (2)** EXTENSIONS OF COVERAGE, Form RM1002;
- (3)** The Schedule of this endorsement for that particular state or the particular location(s); or
- (4)** Any other applicable endorsement to this policy.

- B.** The most **we** will pay for all loss or damage caused by all sudden **earth movement**, including any loss of **business income** or **extra expense**, during any one (1) policy year is \$5,000,000.

## EARTH MOVEMENT COVERAGE (Continued)

### 3. Deductible Amount

**A.** We will not pay for a sudden **earth movement** loss until the loss exceeds either the applicable flat amount deductible or percentage deductible shown for that particular state or the particular location(s) shown on the Schedule of this endorsement. We will then pay the amount of loss in excess of the applicable deductible, up to the applicable **limit of liability**.

**B.** If a percentage deductible is shown on the Schedule of this endorsement, the deductible amount will be determined as follows:

We will not pay for an **earth movement** loss until the loss exceeds the greater of:

(1) The sum of multiplying the deductible factor shown on the Schedule of this endorsement for a particular state or location(s) times:

- a. the total reported values on file with us for the **covered property** at the **covered location** when and where the loss occurred; plus
- b. the full annual **business income** value which **you** would have earned in the twelve (12) month period following the loss had no loss occurred; or

(2) The corresponding minimum deductible amount also shown for that particular state or the particular location(s).

We will then pay the amount of the loss in excess of the greater of these two (2) amounts up to the applicable **limit of liability**.

**C.** These deductibles do not apply to **covered property in transit**.

**D.** If indicated by an asterisk (\*) after the deductible amount, a separate deductible amount will apply to any **covered property**, loss of **business income**, **extra expense**, or any other coverage or peril listed on the Schedule of this endorsement.

**4.** This endorsement does not apply to, and no **earth movement** coverage is provided for, the following coverage(s):

Form RM1002, Course of Construction  
Form RM1002, Exhibitions, Expositions, Fairs or Trade Shows  
Form RM1110, Interruption of Services Coverage Extension  
Form RM1002, **Miscellaneous Locations**  
Form RM1002, **New Locations**

## EARTH MOVEMENT COVERAGE (Continued)

5. This endorsement does not apply to, and no **earth movement** coverage is provided for, any **covered property** situated in or at the following state(s) and location(s):

When indicated with an (X), **covered property** at any location situated in:

- A.  The State of Alaska;
- B.  The State of California;
- C.  The State of Hawaii;
- D.  The State of Nevada;
- E.  The area defined in this policy as **New Madrid**;
- F.  The area defined in this policy as **Puget Sound**;
- G.  The Commonwealth of Puerto Rico; and
- H.  Any other location(s) shown below:

Location

Not Applicable

Refer to the last page of this endorsement for the Schedule of States and Locations for which **earth movement** coverage is provided by this policy.

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## EARTH MOVEMENT COVERAGE (Continued)

### Schedule of States and Locations

State or Location	<b>Limit of Liability per occurrence</b>	<b>Limit of Liability in any one (1) policy year</b>	Deductible Amount
Locations not situated in the areas defined on the schedule of states and locations in Item 5 of this endorsement.	\$5,000,000	\$5,000,000	\$50,000

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This endorsement is effective 01/01/2021 and will terminate with the policy. It is issued by the company designated in the Declarations. All other provisions of the policy remain unchanged.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**FLOOD COVERAGE**

This endorsement modifies insurance provided under the following:

**EXCLUSIONS, Form RM1003**

1. **We** will pay for direct physical loss or damage to **covered property** caused by **flood** within a state(s) or at a location(s) shown on the Schedule of this endorsement.

In addition, if coverage is provided for **business income** or **extra expense** in **B**. Coverages of the DECLARATIONS, Form RM1000, **we** will pay for covered loss of **business income** or **extra expense** that results from direct physical loss or damage to **covered property** caused by **flood** within a state(s) or at a location(s) shown on the Schedule of this endorsement.

All **flood** losses within a continuous seventy-two (72) hour period will be considered a single **occurrence**. The expiration of this policy will not reduce this seventy-two (72) hour period.

2. **Limit of Liability**

The following **limits of liability** do not increase and are not in addition to any other applicable **limit of liability**.

- A. The most **we** will pay for all loss or damage, including any loss of **business income** or **extra expense**, for each **occurrence** of **flood** loss within a state(s) or at a location(s) shown on the Schedule of this endorsement will be the lesser of the applicable **limit of liability** shown on:

- (1) The DECLARATIONS, Form RM1000;
- (2) EXTENSIONS OF COVERAGE, Form RM1002;
- (3) The Schedule of this endorsement for that particular state or the particular location(s); or
- (4) Any other applicable endorsement to this policy.

- B. The most **we** will pay for all loss or damage caused by **flood**, including any loss of **business income** or **extra expense**, during any one (1) policy year is \$5,000,000.

3. **Deductible Amount**

- A. **We** will not pay for a **flood** loss until the loss exceeds either the applicable flat amount deductible or percentage deductible shown for that particular state or the particular location(s) shown on the Schedule of this endorsement. **We** will then pay the amount of loss in excess of the applicable deductible, up to the applicable **limit of liability**.

## FLOOD COVERAGE (Continued)

- B.** If a percentage deductible is shown on the Schedule of this endorsement, the deductible amount will be determined as follows:

**We will not pay for a flood loss until the loss exceeds the greater of:**

- (1) The sum of multiplying the deductible factor shown on the Schedule of this endorsement for a particular state or location(s) times:
  - a. the total reported values on file with **us** for the **covered property** at the **covered location** when and where the loss occurred; plus
  - b. the full annual **business income** value which **you** would have earned in the twelve (12) month period following the loss had no loss occurred; or
- (2) The corresponding minimum deductible amount also shown for that particular state or the particular location(s).

**We will then pay the amount of the loss in excess of the greater of these two (2) amounts up to the applicable limit of liability.**

- C.** These deductibles do not apply to **covered property in transit**.
- D.** If indicated by an asterisk (\*) after the deductible amount, a separate deductible amount will apply to any **covered property**, loss of **business income**, **extra expense**, or any other coverage or peril listed on the Schedule of this endorsement.
- 4.** This endorsement does not apply to, and no **flood** coverage is provided for, the following coverage(s):  
Form RM1002, Course of Construction  
Form RM1002, Exhibitions, Expositions, Fairs or Trade Shows  
Form RM1110, Interruption of Services Coverage Extension  
Form RM1002, **Miscellaneous Locations**  
Form RM1002, **New Locations**

- 5.** This endorsement does not apply to, and no **flood** coverage is provided for, any **covered property** situated in or at the following state(s) and location(s):

Not Applicable

Refer to the last page of this endorsement for the Schedule of States and Locations for which **flood** coverage is provided by this policy.

## FLOOD COVERAGE (Continued)

### Schedule of States and Locations

Loc. No.	State or Location	Limit of Liability per occurrence	Limit of Liability in any one (1) policy year	Deductible Amount
	<u>Group 1</u>	\$5,000,000	\$5,000,000	\$50,000
1.1	6950 N E PRAIRIE RD LINCOLNWOOD IL 60712-2520 DISTRICT OFFICES ADMINISTRATION/OFFICES			
1.2	6950 N E PRAIRIE RD LINCOLNWOOD IL 60712-2520 DISTRICT OFFICES PROPERTY IN THE OPEN			
2.1	3925 W LUNT AVE LINCOLNWOOD IL 60712 TODD HALL SCHOOL OTHER			
2.2	3925 W LUNT AVE LINCOLNWOOD IL 60712 TODD HALL SCHOOL PROPERTY IN THE OPEN			
2.3	3925 W LUNT AVE LINCOLNWOOD IL 60712 TODD HALL SCHOOL SCHOOL			
3.1	6850 N E PRAIRIE RD LINCOLNWOOD IL 60712-2551 RUTLEDGE HALL SCHOOL PROPERTY IN THE OPEN			
3.2	6850 N E PRAIRIE RD LINCOLNWOOD IL 60712-2551 RUTLEDGE HALL SCHOOL SCHOOL			

## FLOOD COVERAGE (Continued)

### Schedule of States and Locations

Loc. No.	State or Location	Limit of Liability per occurrence	Limit of Liability in any one (1) policy year	Deductible Amount
4.1	6855 N CRAWFORD AVE LINCOLNWOOD IL 60712 LINCOLN HALL MIDDLE SCHOOL PROPERTY IN THE OPEN			
4.2	6855 N CRAWFORD AVE LINCOLNWOOD IL 60712 LINCOLN HALL MIDDLE SCHOOL STORAGE BUILDING			
4.3	6855 N CRAWFORD AVE LINCOLNWOOD IL 60712 LINCOLN HALL MIDDLE SCHOOL SCHOOL			

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This endorsement is effective 01/01/2021 and will terminate with the policy. It is issued by the company designated in the Declarations. All other provisions of the policy remain unchanged.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**INTERRUPTION OF SERVICES COVERAGE EXTENSION**

This endorsement modifies insurance provided under the following:

EXTENSIONS OF COVERAGE, Form RM1002  
EXCLUSIONS, Form RM1003

1. We will pay for physical loss or damage to **covered property**, loss of **business income** and **extra expense** resulting from an interruption of the electrical, heating, air conditioning, refrigeration, telecommunication, steam, water, sewer or fuel service to a location shown on the Schedule of this endorsement, but only if the interruption of service results:
  - A. From physical damage by a **peril insured against**;
  - B. Away from a location shown on the Schedule of this endorsement;
  - C. To the following, if marked with an "X", that directly supply service to the location shown on the Schedule of this endorsement and are either owned, managed or controlled by a company with a contract to supply these services to that location, or are located within one (1) mile of that location:
    - (1)  Any electrical generating plant, substation, power switching station, transformer, gas compressor station, telephone switching facility, water or sewer treatment plant or any other plant or facility responsible for providing the services specified in **1.** above;
    - (2)  Transmission and distribution lines, connections or supply pipes which furnish electricity, steam, gas, refrigeration, telecommunication, water or sewer (other than overhead transmission and distribution lines);
    - (3)  Overhead transmission and distribution lines.
2. We will not pay for any physical loss or damage to **covered property**, loss of **business income** or **extra expense** due to any interruption of service from:
  - A. A satellite, regardless of cause; or
  - B. The operation of any breaker, switch, device or system designed to preserve or protect any property or system integrity; or
  - C. Any misalignment, miscalibration, tripping off-line, or any condition which can be corrected by resetting, tightening, adjusting, cleaning, or the performance of maintenance.
3. Conditions
  - A. This extension applies only to the Coverages marked with an "X" in **B.** Coverages of the DECLARATIONS, Form RM1000.

## INTERRUPTION OF SERVICES COVERAGE EXTENSION (Continued)

**B.** This extension, however, does not apply to, and no coverage is provided in conjunction with, Standard Extension of Coverage **A. 7. Extended Period of Restoration**, EXTENSIONS OF COVERAGE, Form RM1002, with respect to any loss of **business income** covered solely under this endorsement.

### 4. Limit of Liability

We will not pay more than the applicable **limit of liability** shown on the Schedule of this endorsement for any one (1) **occurrence**. This **limit of liability** does not increase and is not in addition to any other applicable **limit of liability**.

### 5. Waiting Period

If an interruption of service waiting period is shown below or on the Schedule of this endorsement, we will only pay for loss of **business income**, **extra expense** or for **perishable goods** if the interruption exceeds the specified waiting period. Once the waiting period is met coverage will commence at the initial time of the interruption, and will be subject to any deductible shown in **6.** below or on the Schedule of this endorsement.

The following interruption of service waiting period(s) apply:

**A.** Equipment Breakdown 24 Hours

**B.** All Coverages Except Equipment Breakdown 24 Hours

### 6. Deductible

If the interruption of service exceeds the waiting periods in **5.**, the following deductibles apply to any loss covered under this endorsement unless otherwise shown on the Schedule of this endorsement.

**A.** Equipment Breakdown

Deductible(s) as specified in **G. 3. a.** and **G. 3. b.** on the DECLARATIONS, Form RM1000, or on the ADDITIONAL DEDUCTIBLES AND WAITING PERIODS, Form RM1115.

**B.** All Coverages Except Equipment Breakdown

(1) We will not pay unless a loss covered under this endorsement exceeds \$5,000. We will then pay only the amount of loss in excess of this deductible, up to the applicable **limit of liability**.

If a separate deductible is shown below, the foregoing dollar amount deductible does not apply to the loss of **business income** or **extra expense** portion of the loss covered under this endorsement, which will be subject to the following deductible.

(2) Unless otherwise shown on the Schedule of this endorsement, we will not pay for loss of **business income** or **extra expense** until an interruption of service exceeds a time period of Not Applicable immediately following the loss covered under this endorsement. We will then pay only the amount of loss sustained after this period of time, up to the **limit of liability** specified.

For a time deductible shown as days, each day consists of twenty-four (24) consecutive hours.

When an asterisk (\*) follows one (1) or more of the applicable deductible amounts described on the Schedule of this endorsement or any other endorsement to this policy, the amounts shown will be applied separately, and are in addition to any other applicable deductible(s).

**7.** Refer to the last page of this endorsement for the Schedule of location(s) for which interruption of services coverage is provided by this policy.

**INTERRUPTION OF SERVICES COVERAGE EXTENSION (Continued)**

Schedule

Location(s), Coverage(s), Additional Deductible(s)  
or Waiting Periods

**Limit of Liability** or Deductible(s)

**A.** Locations

All **covered locations** except as indicated in B., C., and D. below.

\$50,000

**B.** Coverages

**C.** Additional Deductibles or Waiting Periods

Interruption of Services - Equipment Breakdown

\$10,000

Interruption of Services - **Business Income** or **Extra Expense**

\$10,000

**D.** Other

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Policy number P00-000-000397-774

This endorsement is effective 01/01/2021 and will terminate with the policy. It is issued by the company designated in the Declarations. All other provisions of the policy remain unchanged.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**ADDITIONAL DEDUCTIBLES AND WAITING PERIODS**

This endorsement modifies insurance provided under the following:

DECLARATIONS, Form RM1000

- A.** If **G. 2.** or **G. 3. d.** on Form RM1000 is marked with an (X), the deductibles and waiting periods for the coverages described on the Schedule of this endorsement apply. If not shown on the Schedule of this endorsement the deductibles and waiting periods for all other coverages remain unchanged.
- B.** If a **covered loss** involves two (2) or more deductibles, we will use no more than the largest of the applicable deductibles unless otherwise provided below.
- C.** When an asterisk (\*) follows one (1) or more of the deductible amounts described on the Schedule of this endorsement, the amounts shown will be applied separately, and are in addition to any other applicable deductible(s).

Schedule

Description of Coverage Deductible or Waiting Period	Amount of Deductible and Waiting Period
Educational Institutions Endorsement	\$500*
<b><u>Wind associated with a Named Storm</u></b> (Deductible)	

**A.** All loss or damage to **covered property** caused by or resulting from **wind** associated with a **Named Storm** will be subject to the deductible obtained by adding up all of the following with respect to the deductible factors/amounts listed in Paragraph C. below:

- 1. the sum of all applicable percentage deductible factors, calculated as described in Paragraph B. below, subject to any applicable minimums or maximums; and
- 2. Any applicable flat deductible amounts.

**B.** To determine the amount to be used in Paragraph A. for any percentage deductible factors provided in Paragraph C., multiply the applicable percentage shown by:

- 1. the total reported values on file with us for the **covered property** at the corresponding location(s) (including sub-locations) where the loss occurred; plus
- 2. the full annual loss of **business income** value which **you** would have earned for the corresponding location (including sub-locations) where the loss occurred in the twelve (12) month period following the loss had no loss occurred.

**ADDITIONAL DEDUCTIBLES AND WAITING PERIODS (continued)**

Schedule

Description of Coverage Deductible or Waiting Period	Amount of Deductible and Waiting Period
<p><b>C.</b> The following are the deductible factors/amounts to be used for purposes of calculating the <b>wind</b> associated with a <b>Named Storm</b> deductible. If a location (including its sub-locations) falls into two or more of the following categories, the category that more specifically identifies that location will be the only one that applies to that location for purposes of calculating its portion of the <b>wind</b> associated with a <b>Named Storm</b> deductible:</p>	
<u>Categories (by Group(s), Region(s), State(s), County(ies), Location(s))</u>	<u>Deductible Factors/Amounts</u>
<b>Second tier wind Counties and Parishes; and Additional First Tier Wind Counties and Independent Cities</b>	\$50,000
<b>First tier wind Counties and Parishes; and Harris County, TX</b>	2% subject to \$100,000 minimum
Florida; Hawaiian Islands; and Puerto Rico	5% subject to \$250,000 minimum
New York counties of Suffolk and Nassau	\$50,000
<p><b>D.</b> The foregoing <b>wind</b> associated with a <b>Named Storm</b> deductible is a single deductible, even if multiple percentages, minimums or flat deductible factors/amounts apply.</p>	
<u>Course of Construction</u>	
Course of Construction	\$5,000
<b><u>Mobile Equipment or Tools</u></b>	
<b>Mobile Equipment or Tools</b>	See below
Miscellaneous Articles	\$500
Musical Instruments	\$500

Policy number P00-000-000397-774

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**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**STANDARD EXTENSIONS AMENDATORY**

This endorsement modifies insurance provided under the following:

EXTENSIONS OF COVERAGE, Form RM1002

The following Standard Extensions of Coverage are amended as shown below when marked with an "X":

Standard Extensions of Coverage

1.  Accounts Receivable

**Our** sublimit under **A. 1. a.** Accounts Receivable is increased from \$100,000 to \$Not Applicable.

2.  Arson Reward

**Our** sublimit under **A. 2.** Arson Reward is increased from \$25,000 to \$Not Applicable.

3.  Computer Virus and Denial of Access

**Our** sublimit under **A. 3.** Computer Virus and Denial of Access is increased from \$25,000 to \$Not Applicable.

4.  Debris Removal Expense

**A. Our** sublimit under **A. 4. b.** Debris Removal Expense is increased from \$250,000 to \$Not Applicable.

**B. A. 4. c.** Debris Removal Expense is deleted and replaced by the following:

**c. We** will pay up to \$Not Applicable for expenses to remove from a **covered location**, windblown debris of property not covered by this policy.

5.  Deferred Payments

**Our** sublimit under **A. 5. a.** Deferred Payments is increased from \$25,000 to \$Not Applicable.

## STANDARD EXTENSIONS AMENDATORY (Continued)

6.  Extended **Period of Restoration**

**A. 7. a.** Extended **Period of Restoration** is amended to NA days in lieu of sixty (60) days.

7.  **Fine Arts**

**Our** sublimit under **A. 9. Fine Arts** is increased from \$100,000 to \$Not Applicable.

8.  **Fungus Cleanup Expense**

**Our** sublimit under **A. 10. b. Fungus Cleanup Expense** is increased from \$250,000 to \$Not Applicable.

9.  Installation of **Personal Property** or **Personal Property of Others**

**Our** sublimit under **A. 11. Installation of Personal Property or Personal Property of Others** is increased from \$250,000 to \$Not Applicable.

10.  Lock and Key Replacement

**Our** sublimit under **A. 12. b. Lock and Key Replacement** is increased from \$25,000 to \$Not Applicable.

11.  Plants, Trees or Shrubs

**Our** sublimit under **A. 14. Plants, Trees or Shrubs** is increased from \$100,000 to \$Not Applicable.

12.  **Pollution Cleanup Expense**

**A. Our** annual aggregate **limit of liability** under **A. 15. b. Pollution Cleanup Expense** is increased from \$25,000 to \$50,000.

**B. Our** annual aggregate **limit of liability** under **A. 15. c. Pollution Cleanup Expense** is increased from \$25,000 to \$50,000.

13.  Professional Fees

**Our** sublimit under **A. 16. a. Professional Fees** is increased from \$25,000 to \$50,000.

14.  Removal

**A. 17. b. (1)** Removal is deleted and replaced by the following:

**(1)** For up to NA days at each place to which the property has been taken for preservation;

This endorsement is effective 01/01/2021 and will terminate with the policy. It is issued by the company designated in the Declarations. All other provisions of the policy remain unchanged.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**CAP ON LOSSES FROM CERTIFIED ACT(S) OF TERRORISM**

This endorsement modifies insurance provided under the following:

EXCLUSIONS, Form RM1003  
DEFINITIONS, Form RM1007

**1. Definition of *Certified Act(s) of Terrorism***

For the purpose of this endorsement, the italicized phrase *certified act(s) of terrorism* means one (1) or more acts certified by the Secretary [of the Treasury], in consultation with the Secretary of Homeland Security, and the Attorney General of the United States, to be terrorism pursuant to the federal Terrorism Risk Insurance Act, including all amendments (hereafter "TRIA"). The criteria contained in TRIA for *certified act(s) of terrorism* include that the act is a violent act or an act that is dangerous to human life, property or infrastructure, and is committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

**2. Cap on Losses From *Certified Act(s) of Terrorism***

If aggregate insured losses attributable to *certified act(s) of terrorism*:

- A. exceed \$100 billion in a program year (January 1 through December 31); and
- B. ~~we~~ we have met ~~our~~ deductible under the Act;

neither ~~we~~ we nor the Secretary of the Treasury shall be liable for the payment of any portion of the amount of such losses that exceeds the \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of the Treasury.

**3. Application of Exclusions**

The terms and limitations of any terrorism exclusion, or the inapplicability or omission of a terrorism exclusion, do not serve to create coverage for any loss which would otherwise be excluded by this policy, such as losses under **GROUP A** exclusions **A. 1.** and **A. 8.** on EXCLUSIONS, Form RM1003 attached to this policy.

Policy number P00-000-000397-774

This endorsement is effective 01/01/2021 and will terminate with the policy. It is issued by the company designated in the Declarations. All other provisions of the policy remain unchanged.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**ADDITIONAL FIRST TIER WIND COUNTIES AND INDEPENDENT CITIES  
(THE STATES OF VIRGINIA THROUGH AND INCLUDING MAINE)**

This endorsement modifies insurance provided under the following:

DEFINITIONS, Form RM1007

The following Counties and Independent Cities are added to Item N. **First tier wind Counties and Parishes** on DEFINITIONS, Form RM1007:

Fairfield, Middlesex, New Haven and New London Counties in the State of Connecticut;

Sussex County in the State of Delaware;

Cumberland, Hancock, Knox, Lincoln, Penobscot, Sagadahoc, Waldo, Washington and York Counties in the State of Maine;

Somerset and Worcester Counties in the State of Maryland;

Barnstable, Bristol, Dukes, Essex, Middlesex, Nantucket, Norfolk, Plymouth and Suffolk Counties in the State of Massachusetts;

Rockingham County in the State of New Hampshire;

Bronx, Kings, Nassau, New York, Queens, Richmond and Suffolk Counties in the State of New York;

Bristol, Newport and Washington Counties in the State of Rhode Island; and

Accomack, Gloucester, Hampton, Lancaster, Mathews, Middlesex, Newport News, Norfolk, Northampton, Northumberland, Poquoson, Portsmouth, Virginia Beach, Williamsburg and York Counties and Independent Cities in the State of Virginia.

Policy number P00-000-000397-774

This endorsement is effective 01/01/2021 and will terminate with the policy. It is issued by the company designated in the Declarations. All other provisions of the policy remain unchanged.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**RM CUSTOM SELECT™ EDUCATIONAL INSTITUTIONS**

This endorsement modifies insurance provided under the following:

EXTENSIONS OF COVERAGE, FORM RM1002  
 EXCLUSIONS, FORM RM1003  
 PROPERTY NOT COVERED, FORM RM1004  
 CONDITIONS, FORM RM1006

Coverage	Sublimits of Liability
Animals	\$ 25,000 per <b>occurrence</b> \$ 1,500 per animal
Broadened <b>Covered Location</b> Distance	1,250 feet
Classroom Chemical Spills	\$ 10,000 per <b>occurrence</b> \$ 50,000 annual aggregate
<i>Crisis Event</i>	\$ 50,000 per <b>occurrence</b>
<i>Employee Dishonesty</i>	\$ 25,000 per <b>occurrence</b>
Fire Protective Equipment Recharging	<b>Real Property</b> limit applicable, per 12-month <b>policy period</b>
<i>Forgery or Alteration</i>	\$ 25,000 per <b>occurrence</b>
<i>Miscellaneous School Property</i> at School Sponsored Events Away From a <b>Covered Location</b>	\$ 50,000 per <b>occurrence</b>
<i>Money and Securities:</i> At Each <b>Covered Location</b> Within a Bank or Savings Institution Other Locations or In Transit	\$ 25,000 per <b>occurrence</b> \$ 25,000 per <b>occurrence</b> \$ 25,000 per <b>occurrence</b>
Money Orders and Counterfeit Currency	\$ 25,000 per <b>occurrence</b>
Personal Effects of <b>Your</b> Students	\$100,000 per <b>occurrence</b> \$ 5,000 per student

The sublimits of liability shown in this endorsement do not increase and are not in addition to any other applicable **limit of liability**. The extensions of coverage provided by this endorsement are subject to the deductible(s) in ADDITIONAL DEDUCTIBLES AND WAITING PERIODS, Form RM1115 and the other terms and conditions in **your** policy.

## RM CUSTOM SELECT™ EDUCATIONAL INSTITUTIONS (Continued)

1. The coverage provided by this policy for a **covered loss** is extended as follows:

**A. Animals**

**We** will pay up to \$25,000 in any one **occurrence**, but not more than \$1,500 for any one animal, for direct physical loss or damage to animals at a **covered location** which **you** use as part of an agricultural, vocational or equestrian program. The direct physical loss or damage must be caused by or result from **specified perils**, theft, collision with a vehicle, electrocution, attack by dogs or wild animals, accidental shooting or drowning. Coverage applies only if the animal is killed or its destruction is made necessary for humane reasons. Poultry is covered only while inside buildings.

For purposes of this Animals extension of coverage only, Item **B. (Animals)** in Form RM1004, PROPERTY NOT COVERED is deleted.

**B. Broadened Covered Location Distance**

The one-thousand (1,000) feet of a **covered location** limitation stated in paragraphs **A. (real property)** and **B. (personal property)** in RM1001, COVERAGES is deleted and replaced by 1,250 feet.

**C. Classroom Chemical Spills**

**We** will pay up to \$10,000 per **occurrence** to clean up accidental classroom chemical spills at the affected **covered location**. Regardless of the number of **occurrences**, the most **we** will pay under this extension of coverage during each separate 12-month period of this policy is an annual aggregate **limit of liability** of \$50,000. The expenses will be paid only if they are reported to **us** in writing within 180 days of the date on which the accidental classroom chemical spill occurs. Any coverage provided by this extension of coverage is in addition to any other applicable coverage provided by the policy. This extension of coverage does not apply to costs to test for, monitor or assess the existence, concentration or effects of **pollutants**. But **we** will pay for testing which is performed in the course of cleaning up the accidental classroom chemical spill.

**D. Crisis Event**

**We** will pay up to \$50,000 in any one **occurrence** for:

- (1) The actual loss of **business income you** incur if **you** are denied access to a **covered location** by order of civil or military authority resulting from a *crisis event* at such *covered location*; and
- (2) *Crisis event extra expense you* incur at a **covered location** which results from a *crisis event* at such **covered location**.

This coverage will apply for a period not to exceed 60 consecutive days from the date of the order. Additionally, any coverage for loss of **business income** or **extra expense** found elsewhere in this policy does not apply to loss or damage caused by a *crisis event*.

As used in this extension of coverage:

- (1) *Crisis event* means an actual or attempted murder, suicide, armed robbery, or other violent crime.
- (2) *Crisis event extra expense* means the reasonable and necessary extra costs:
  - a. Of temporarily using property or facilities of **yours** or others; or
  - b. Temporary fees paid to an outside security services firm; or

## RM CUSTOM SELECT™ EDUCATIONAL INSTITUTIONS (Continued)

- c. Transportation costs from the affected covered location(s) at the time of the *crisis event*; or
- d. Costs incurred by a professional crisis management or public relations firm to assist or advise on communications strategies to mitigate negative publicity or to attempt to restore **your** business's image to pre-*crisis event* status

The **limit of liability** provided in this extension of coverage does not increase any other applicable **limit of liability** (including any **limits of liability** for loss of **business income** or **extra expense**) found elsewhere in this policy.

The duties described in Form RM1006, CONDITIONS, item **C.C. Your Duties After a Loss** also apply to a *crisis event*.

### E. Employee Dishonesty

We will pay up to \$25,000 in any one **occurrence** for direct loss or damage to **personal property**, including *money* and *securities*, that **you** sustain resulting from dishonest acts committed by any of **your employees** acting alone or in collusion with other persons (except **you** or **your partners**) **you discovered** taking place during the **policy period** with the manifest intent to:

- (1) Cause **you** to sustain loss or damage; and
- (2) Obtain financial benefit (other than salaries, commissions, fees, bonuses, promotions, awards, profit sharing, pensions or other employee benefits earned in the normal course of employment) for any *employee* or any other person or organization.

We will also pay for direct loss or damage that **you** sustained prior to the effective date of cancellation of this insurance, which is *discovered* by **you** no later than one year from the date of that cancellation. However, this extended period to *discover* loss terminates immediately upon the effective date of any other insurance obtained by **you**, whether from **us** or another insurer, replacing in whole or in part the coverage afforded under this insurance, whether or not such other insurance provides coverage for loss sustained prior to its effective date.

Regardless of the number of years this policy remains in force or the number of premiums paid, no **limit of liability** cumulates from year to year or period to period.

In addition to the policy limitations and exclusions, we will not pay for loss or damage caused by or resulting from:

- (1) Any dishonest or criminal act that **you** or any of **your partners** commit whether acting alone or in collusion with other persons;
- (2) Loss the only proof of which as to its existence or amount is dependent upon an inventory computation or a profit and loss computation;
- (3) Mathematical or accounting mistakes or omissions;
- (4) *Money, securities* and negotiable instruments (including checks) contained in any device unless the amount deposited in it is recorded by a continuous recording instrument;
- (5) An *employee* if the *employee* also committed theft or a dishonest act prior to the **effective date**, and **you** or any of **your** associates, proprietors, partners, directors, trustees or officers learned of that theft or dishonest act prior to the **effective date**;
- (6) Caused by an *employee* who has already committed theft or a dishonest act for which a claim has already been made under this policy; or
- (7) Voluntary parting, giving, surrendering or trading in any exchange or purchase *money, securities, negotiable instruments* (including checks), or any other property.

## RM CUSTOM SELECT™ EDUCATIONAL INSTITUTIONS (Continued)

As used in this extension of coverage:

- (1) *Discover* or *discovered* means the time when **you** first become aware of facts that would cause a reasonable person to suspect that a loss of a type covered by this insurance has been or will be incurred, even though the exact amount or details may not then be known, including the time when **you** first become aware of an actual or potential claim against **you** that may be covered under this insurance.
- (2) *Employee* means
  - a. Any natural person:
    - i. While in **your** service and for 30 days after their termination, unless such termination is due to theft or any dishonest act committed by them;
    - ii. Whom **you** compensate directly by wages, salary or commissions; and
    - iii. Whom **you** have the right to direct and control while performing services for **you**.
  - b. Any natural person **you** hire through a temporary employment firm or leased to **you** through a written agreement while that person is subject to **your** direction and control and performing services for **you** excluding, however, any such person while having care and custody of **personal property** away from a **covered location**.

However, *employee* does not mean or include any agent, broker, consignee, factor, commission merchant, representative, independent contractor or directors/trustees (except a director/trustee who would also qualify as an *employee*, but only while they are performing acts within the usual duties of an *employee*).
- (3) *Money* means currency, coins, bank notes in current use and having a face value, travelers checks, register checks and money orders held for sale to the public.
- (4) *Securities* means negotiable and nonnegotiable instruments or contracts representing either money or other property and includes:
  - a. Tokens, tickets, revenue and other stamps (whether represented by actual stamps or unused value in a meter) in current use; and
  - b. Evidences of debt issued in connection with credit or charge cards, which cards are not issued by you;
  - c. But does not include "money" or Lottery tickets held for sale.
- (5) The value of United States currency is determined by its face value.
- (6) The value of currency issued by a country other than the United States (provided that the other country is not subject to United States Government trade sanctions) is determined by its face value or, at **your** option, in its United States dollar equivalent determined by the exchange rate published in the Wall Street Journal as of the day the loss is *discovered*.
- (7) The value of *securities* is determined by the market closing price as of the day the loss is *discovered*.
- (8) The value of negotiable instruments, including checks, is determined by the sum certain payable.

For purposes of this *Employee Dishonesty* extension of coverage only:

- (1) Item F. ("Currency, money, securities and negotiable instruments of any kind") in Form RM1004, PROPERTY NOT COVERED is deleted.

## RM CUSTOM SELECT™ EDUCATIONAL INSTITUTIONS (Continued)

(2) The following provisions in Item **B. GROUP B EXCLUSIONS**, Form RM1003, EXCLUSIONS are modified as follows:

- a. Item **3.** ("Theft by employees, whether acting alone or with others") is deleted.
- b. In items **4.b.** and **4.c.**, the word "employees" is deleted.

(3) The following is added to the definition of **occurrence** in form RM1007, DEFINITIONS, item **Z.**:

The total of all acts or events, whether separate or a series, and whether related or not, will be treated as one **occurrence** irrespective of the time, area, number of individuals, or means and methods involved.

### F. Fire Protective Equipment Recharging

We will pay, for each separate 12-month period of this policy, up to the **real property limit of liability** applicable to the affected **covered location** shown in DECLARATIONS, Form RM1000 for recharging or refilling of **your** fire protective devices that are permanently installed at the affected **covered location** when such devices have been accidentally discharged or after being used in fighting a fire. This extension of coverage does not apply to any discharge that occurs during the installation, repair, recharging or refilling of **your** fire protective devices.

### G. Forgery or Alteration

We will pay up to \$25,000 in any one **occurrence** for **your** direct loss resulting from *forgery* or alteration of any negotiable instrument, including checks. Under this extension of coverage, checks include a substitute check as defined in the Check Clearing for the 21st Century Act, and will be treated the same as the original it replaced. Under this coverage:

- (1) We will treat signatures produced electronically, mechanically, or by other means the same as hand written signatures; and
- (2) **You** must include with **your** signed, sworn Proof of Loss any instrument involved in that loss, if available.
- (3) Coverage applies worldwide.

As used in this extension of coverage, the value of negotiable instruments, including checks, is determined by the sum certain payable.

Under this extension of coverage, all loss caused by one or more persons, or involving a single act or a series of related acts will be considered a single **occurrence**. In addition to the policy limitations and exclusions, **we** will not pay for loss caused by or resulting from:

- (1) Any credit, debit or charge card if **you** have not complied fully with the provisions, conditions or other terms under which the card was issued;
- (2) Accounting or mathematical errors or omissions;
- (3) Negotiable instruments (including checks) that are given, surrendered or traded in any exchange, purchase or voluntary parting; or
- (4) Negotiable instruments, including checks, contained in any device unless the amount deposited in it is recorded by a continuous recording instrument.
- (5) Any dishonest or criminal acts committed by **you** or any of **your** partners, *employees*, managers, members, officers, directors or trustees, whether acting alone or in collusion with others.

## RM CUSTOM SELECT™ EDUCATIONAL INSTITUTIONS (Continued)

As used in this extension of coverage, *forgery* means the signing of the name of another person or organization with the intent to deceive; it does not mean a signature that consists, in whole or in part, of one's own name signed, with or without authority, in any capacity, for any purpose.

For purposes of this *Forgery* or *Alteration* extension of coverage only, Item **F.** ("Currency, money, securities and negotiable instruments of any kind") in Form RM1004, **PROPERTY NOT COVERED** is deleted.

### H. *Miscellaneous School Property* at School Sponsored Events Away From a **Covered Location**

**We** will pay up to \$50,000 per **occurrence** for **covered loss** to **your** *miscellaneous school property* while at school sponsored events away from a **covered location** and within the territory as specified in this policy. This extension of coverage also applies to school sponsored events outside the territory as specified in this policy (provided that the other country is not subject to United States Government trade sanctions) for a period of not more than 30 days. All claims for loss or damage to **your** *miscellaneous school property* must be brought in the United States.

As used in this extension of coverage, *miscellaneous school property* means musical instruments, band uniforms and equipment, theatrical property including scenery and costumes, and athletic equipment.

### I. *Money and Securities*

**We** will pay up to the limits shown below for **your** direct loss caused by theft, disappearance or destruction of *money* and *securities* owned by **you** while:

- (1) At a **covered location** or the premises of a bank or savings institution; or
- (2) At any other location, or in transit, in the custody of a *messenger*.

The most **we** will pay in any one **occurrence** is:

- (1) \$25,000 at each **covered location**;
- (2) \$25,000 within a bank or savings institution; or
- (3) \$25,000 while at any other location or in transit, in the custody of a *messenger*;

provided that **you** have maintained records of all *money* and *securities* so that **we** can verify the amount of **your** loss.

Under this extension of coverage, all loss caused by one or more persons, or involving a single act or a series of related acts will be considered a single **occurrence**. In addition to the policy limitations and exclusions, **we** will not pay for loss caused by or resulting from:

- (1) Accounting or mathematical errors or omissions;
- (2) The giving or surrendering of *money* and *securities* in any exchange or purchase, the transfer or surrender of *money* and *securities* to a person or place outside a **covered location** or the premises of a banking or savings institution, or any other voluntary parting with possession of or title to *money* and *securities*;
- (3) *Money* or *securities* contained in any device unless the amount deposited in it is recorded by a continuous recording instrument; or
- (4) Any dishonest or criminal acts committed by **you** or any of **your** partners, *employees*, managers, members, officers, directors or trustees, whether acting alone or in collusion with others.
- (5) *Forgery* or alteration.

## RM CUSTOM SELECT™ EDUCATIONAL INSTITUTIONS (Continued)

As used in this extension of coverage:

- (1) *Discovered* means the time when **you** first become aware of facts that would cause a reasonable person to suspect that a loss of a type covered by this insurance has been or will be incurred, even though the exact amount or details may not then be known, including the time when **you** first become aware of an actual or potential claim against **you** that may be covered under this insurance.
- (2) *Forgery* means the signing of the name of another person or organization with the intent to deceive; it does not mean a signature that consists, in whole or in part, of one's own name signed, with or without authority, in any capacity, for any purpose.
- (3) *Messenger* means **you**, any of **your** partners, any *employee* or volunteer while having care and custody of *money* and *securities* away from a **covered location**.
- (4) *Money* means currency, coins, bank notes in current use and having a face value, travelers checks, register checks and money orders held for sale to the public.
- (5) *Securities* means negotiable and nonnegotiable instruments or contracts representing either money or other property and includes:
  - a. Tokens, tickets, revenue and other stamps (whether represented by actual stamps or unused value in a meter) in current use; and
  - b. Evidences of debt issued in connection with credit or charge cards, which cards are not issued by you;
  - c. But does not include "money" or Lottery tickets held for sale.
- (6) The value of United States currency is determined by its face value.
- (7) The value of currency issued by a country other than the United States (provided that the other country is not subject to United States Government trade sanctions) is determined by its face value or, at **your** option, in its United States dollar equivalent determined by the exchange rate published in the Wall Street Journal as of the day the loss is *discovered*.
- (8) The value of *securities* is determined by the market closing price as of the day the loss is *discovered*.
- (9) The value of negotiable instruments, including checks, is determined by the sum certain payable.

For purposes of this *Money and Securities* extension of coverage only, Item **F**. ("Currency, money, securities and negotiable instruments of any kind") in Form RM1004, **PROPERTY NOT COVERED** is deleted.

### J. Money Orders and Counterfeit Currency

We will pay up to \$25,000 in any one **occurrence** for **your** direct loss resulting from **your** good faith acceptance of:

- (1) Any U. S. post office, express company, or national or state chartered bank money order that is not paid upon presentation to the issuer; or
- (2) Counterfeit paper or coin currency, in exchange for merchandise, money or services, or as part of a normal business transaction;

that occurs anywhere in the world.

## RM CUSTOM SELECT™ EDUCATIONAL INSTITUTIONS (Continued)

As used in this extension of coverage:

- (1) The value of United States currency is determined by its face value.
- (2) The value of currency issued by a country other than the United States (provided that the other country is not subject to United States Government trade sanctions) is determined by its face value or, at **your** option, in its United States dollar equivalent determined by the exchange rate published in the Wall Street Journal as of the day the loss is *discovered*.
- (3) The value of money orders is determined by the sum certain payable.
- (4) *Discovered* means the time when **you** first become aware of facts that would cause a reasonable person to suspect that a loss of a type covered by this insurance has been or will be incurred, even though the exact amount or details may not then be known, including the time when **you** first become aware of an actual or potential claim against **you** that may be covered under this insurance.

Under this extension of coverage, all loss caused by one or more persons, or involving a single act or a series of related acts will be considered a single **occurrence**. In addition to the policy limitations and exclusions, **we** will not pay for loss caused by or resulting from:

- (1) Accounting or mathematical errors or omissions;
- (2) Money orders or currency that are given, surrendered or traded in any exchange, purchase or voluntary parting; or
- (3) Money orders or currency contained in any device unless the amount deposited in it is recorded by a continuous recording instrument.
- (4) Any dishonest or criminal acts committed by **you** or any of **your** partners, *employees*, managers, members, officers, directors or trustees, whether acting alone or in collusion with others.

For purposes of this Money Orders and Counterfeit Currency extension of coverage only, Item **F.** ("Currency, money, securities and negotiable instruments of any kind") in Form RM1004, PROPERTY NOT COVERED is deleted.

### **K.** Personal Effects of **Your** Students

**We** will pay up to \$100,000 per **occurrence**, but not more than \$5,000 per student, for direct physical loss or damage caused by or resulting from a **peril insured against** to the personal effects of **your** students (other than vehicles) while located at a **covered location**. This extension of coverage does not apply to loss or damage by theft or mysterious disappearance.

2. The coverage extensions in this endorsement are commonly provided by other insurance policies. The coverage provided by these extensions is therefore excess of, and will not contribute with, any other insurance available to **you** or **your** students. This subparagraph **2** supersedes and replaces any inconsistent provision within paragraph **Q.** Other Insurance, of the RM1006. The coverage extensions included herein provide primary insurance to the limits and terms detailed above only if no other insurance exists.

This endorsement is effective 01/01/2021 and will terminate with the policy. It is issued by the company designated in the Declarations. All other provisions of the policy remain unchanged.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**EQUIPMENT BREAKDOWN EXTENSIONS OF COVERAGE**

This endorsement modifies insurance provided under the following:

COVERAGES, Form RM1001

1. If coverage for Equipment Breakdown is provided as shown in **B. Coverages of the DECLARATIONS, Form RM1000, we will pay up to the sublimit of liability shown for each of the extensions described below.**

These extensions of coverage do not increase the **limit of liability** under this coverage.

**A. Expediting Expenses Coverage**

**We will pay up to a sublimit of \$100,000 for the reasonable extra costs of temporary repair to property or of expediting the permanent repair or replacement of the property, whichever is less. Expenses we will cover include overtime wages and extra costs for rapid means of transportation.**

**We will not cover expenses for temporary rental of property or temporary replacement of damaged property under this extension of coverage. We will pay only for expediting expenses caused by an **accident** to an **object**.**

**B. Hazardous Substances Coverage**

**We will pay up to a sublimit of \$100,000 for **extra expenses** to clean up, repair, replace or dispose of property that is damaged, contaminated or polluted by a ~~hazardous substance~~. The damage, contamination or **pollution** must result from an **accident** to an **object**.**

As used here, **extra expenses** will mean expenses incurred beyond those for which we would have been liable if no ~~hazardous substance~~ had been involved.

**C. Perishable Goods Coverage**

(1) **We will pay up to a sublimit of \$100,000 for:**

- a. physical damage to **perishable goods** due to spoilage;
- b. physical damage to **perishable goods** due to contamination from the release of refrigerant, including but not limited to ammonia;
- c. any necessary expenses **you** incur to reduce the amount of loss under this coverage to the extent that they do not exceed the amount of loss that otherwise would have been payable under this coverage.

## EQUIPMENT BREAKDOWN EXTENSIONS OF COVERAGE (Continued)

(2) If **you** are unable to replace the **perishable goods** before its anticipated sale, the amount of **our** payment will be determined on the basis of the sales price of the **perishable goods** at the time of the **accident**, less discounts and expenses **you** otherwise would have had. Otherwise **our** payment will be determined in accordance with the valuations endorsement.

(3) As used here, **covered property** does not include animals.

### D. Data Restoration

**We** will pay up to a sublimit of \$100,000 for **your** reasonable and necessary cost to research, replace and restore lost **data**.

2. If coverage for Equipment Breakdown is provided as shown in **B**. Coverages of the DECLARATIONS, Form RM1000, the coverage provided by this policy is extended as follows:

#### A. Water Damage Coverage

**We** will pay for loss to property, including the cost of salvage, caused by water, if such damage results from an **accident** to an **object**.

#### B. CFC Refrigerants

**We** will pay for the additional cost to repair or replace **covered property** because of the use or presence of a refrigerant containing CFC (chlorinated fluorocarbon) substances. This means the **extra expense** to do the least expensive of the following:

- (1) Repair the damaged property and replace any lost CFC refrigerant;
- (2) Repair the damaged property, retrofit the system to accept a non-CFC refrigerant and charge the system with a non-CFC refrigerant; or
- (3) Replace the system with one (1) using a non-CFC refrigerant.

Additional costs mean those beyond what would have been required had no CFC refrigerant been involved.

**We** will also pay for the additional loss as described in loss of **business income** and **extra expense** coverages caused by such loss, if these coverages are indicated in the DECLARATIONS, Form RM1000.

3. For the purpose of this endorsement the italicized term *hazardous substance* means any substance that is hazardous to health or has been declared to be hazardous to health by a governmental agency.

**DISCLOSURE - TERRORISM RISK INSURANCE ACT**

**THIS FORM IS MADE PART OF YOUR POLICY PURSUANT TO THE TERRORISM RISK INSURANCE ACT.**

In accordance with the Terrorism Risk Insurance Act, including all amendments ("TRIA" or the "Act"), we are required to provide you with a notice of the portion of your premium attributable to coverage for "certified acts of terrorism," the federal share of payment of losses from such acts, and the limitation or "cap" on our liability under the Act.

**Disclosure of Premium**

The Company has made available coverage for "certified acts of terrorism" as defined in the Act. If purchased, the portion of your premium attributable to coverage for "certified acts of terrorism" is shown on the DECLARATIONS, or elsewhere by endorsement in your policy.

**THE TERRORISM RISK INSURANCE ACT**

The Terrorism Risk Insurance Act, including all amendments ("TRIA" or the "Act"), establishes a program to spread the risk of catastrophic losses from certain acts of terrorism between insurers and the federal government. If an individual insurer's losses from a "certified act of terrorism" exceed a specified deductible amount, the government will reimburse the insurer for a percentage of losses (the "Federal Share") paid in excess of the deductible but only if aggregate industry losses from such an act exceed the "Program Trigger". An insurer that has met its insurer deductible is not liable for any portion of losses in excess of \$100 billion per year. Similarly, the federal government is not liable for any losses covered by the Act that exceed this amount. If aggregate insured losses exceed \$100 billion, losses up to that amount may be pro-rated, as determined by the Secretary of the Treasury.

Beginning in calendar year 2020, the Federal Share equals 80% and the Program Trigger is \$200,000,000.

## **DISCLOSURE - TERRORISM RISK INSURANCE ACT (Continued)**

### MANDATORY AVAILABILITY OF COVERAGE FOR “CERTIFIED ACTS OF TERRORISM”

TRIA requires insurers to make coverage available for any loss that occurs within the United States (or outside of the U.S. in the case of U.S. missions and certain air carriers and vessels), results from a “certified act of terrorism” AND that is otherwise covered under your policy.

A “certified act of terrorism” means:

[A]ny act that is certified by the Secretary [of the Treasury], in consultation with the Secretary of Homeland Security, and the Attorney General of the United States

- (i) to be an act of terrorism;
- (ii) to be a violent act or an act that is dangerous to –
  - (I) human life;
  - (II) property; or
  - (III) Infrastructure;
- (iii) to have resulted in damage within the United States, or outside of the United States in the case of –
  - (I) an air carrier (as defined in section 40102 of title 49, United States Code) or United States flag vessel (or a vessel based principally in the United States, on which United States income tax is paid and whose insurance coverage is subject to regulation in the United States); or
  - (II) the premises of a United States mission; and
- (iv) to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

## REPORTING A COMMERCIAL CLAIM 24 HOURS A DAY

Liberty Mutual Insurance claims professionals across the United States are ready to resolve your claim quickly and fairly, so you and your team can focus on your business. Our claims teams are specialized, experienced and dedicated to a high standard of service.

### We're Just a Call Away — One Phone Number to Report All Commercial Insurance Claims

Reporting a new claim has never been easier. A Liberty Mutual customer service representative is available to you 24/7 at **800-362-0000** for reporting new property, auto, liability and workers' compensation claims. With contact centers strategically located throughout the country for continuity and accessibility, we're there when we're needed!

### Additional Resource for Workers' Compensation Customers

In many states, employers are required by law to use state-specific workers compensation claims forms and posting notices. This type of information can be found in the Policyholders Toolkit section of our website along with other helpful resources such as:

- Direct links to state workers compensation websites where you can find state-specific claim forms
- Assistance finding local medical providers
- First Fill pharmacy forms — part of our managed care pharmacy program committed to helping injured workers recover and return to work

Our Policyholder Toolkit can be accessed at [www.libertymutualgroup.com/toolkit](http://www.libertymutualgroup.com/toolkit).

For all claims inquiries please call us at **800-362-0000**.

**Liberty Mutual Group  
Umbrella Liability Proposal**



<b>Account Name</b>	LINCOLNWOOD SCHOOL DISTRICT 74	<b>Broker</b>	LAMB LITTLE & COMPANY
<b>Address</b>	6950 N EAST PRAIRIE RD	<b>Address</b>	1101 PERIMETER DR STE 500
<b>Address</b>		<b>Address</b>	
<b>City</b>	Lincolnwood	<b>City</b>	SCHAUMBURG
<b>State</b>	IL	<b>State</b>	IL
<b>Zip</b>	60712	<b>Zip</b>	60173-5060
<b>Underwriter</b>	Daniel Corsiuk	<b>Broker Contact</b>	Tom Cummings

**Writing Company:** Liberty Insurance Corporation (7)  
**Proposal Effective:** 1/1/2021 to 1/1/2022

<u>Coverages:</u>	<u>Limits:</u>
Each Occurrence Limit	\$10,000,000
General Aggregate Limit	\$10,000,000
Products - Completed Operations Aggregate Limit	\$10,000,000
Self-Insured Retention – Each Occurrence	\$0
Flat Charge	N/A
Minimum Retained Premium	\$0
Premium Subtotal	\$12,530
State Surcharges	\$0
FIGA Surcharge	\$0
Kentucky Municipal Tax	\$0
Terrorism Risk Insurance Act	\$313
UM/UIM Charge	\$0
Crisis Response Charge	\$0
<b>Total Estimated Premium</b>	<b>\$12,843</b>
Commission	15.0%
<b>Payment Terms</b>	<b>Premium is due 20 days from invoice date</b>

<u>Underlying Schedule</u>	<u>Limits</u>	<u>Carrier</u>	<u>Premium</u>	
General Liability	Each Occurrence	1,000,000	LM Insurance Corporation	
	General Aggregate	2,000,000		
	Products/Completed Ops Aggregate	2,000,000		
	Pers & Adv Injury Limit	1,000,000		
Employee Benefits Liability	Each Employee	1,000,000	The First Liberty Insurance Corporation	
	Aggregate	3,000,000		
Auto Liability	CSL	1,000,000	LM Insurance Corporation	
School Leaders Errors and Omissions Liability	Each Wrongful Act	1,000,000	Liberty Mutual Insurance Company	
	Aggregate	1,000,000		
Sexual Misconduct and Molestation Liability	Each Loss	1,000,000	Liberty Mutual Insurance Company	
	Aggregate	1,000,000		
Estimated Exposures	Students		1,234	
	Power Units		0	
		PPT		0
		LT		0
		MT		0
		HT		0
		EHT		0
		Tractor		0
	Number of Employees		0	

**Policy Form and Endorsements:**

LCU 21 19 01 18 Silica or Silica-Related Dust Exclusion  
LCU 21 47 01 18 Damage First Occurring Prior To Policy Period Exclusion  
LCU 21 85 01 18 Access or Disclosure of Confidential or Personal Information and Data-Related Liability Exclusion – With Limited Bodily Injury Exception  
LCU 25 09 01 18 Non-Cumulation Of Liability (Same Occurrence)  
LCU 99 05 01 18 Declarations Extension – Named Insured  
Item 1. Named Insured of the Declarations is amended as follows:  
LCU 32 143 01 18 Crisis Management Coverage  
Crisis Management Expense Aggregate Limit: \$250,000  
Liberty Mutual Preferred Public Relations Vendor: Weber Shandwick  
Liberty Mutual Claims: 1-800-362-0000  
LCU 24 09 09 19 Foreign Liability Limitation  
LCU 02 26 01 18 Illinois Changes – Cancellation And Nonrenewal  
SNI 12 01 07 18 Illinois Notice To Policyholders  
LIL 90 05 06 13 Participating Provision  
LCU 00 01 01 18 Commercial Liability – Umbrella Coverage Form  
LCU 32 97 05 19 Illinois Changes - Defense Costs  
SNI 04 01 01 20 Liberty Mutual Group California Privacy Notice  
IL N 175 11 11 Illinois Notice To Policyholders Regarding The Religious Freedom Protection And Civil Union Act  
SNI 90 02 01 20 Policyholder Disclosure Terrorism Risk Insurance Act  
LCU 21 109 08 18 School Law Enforcement Professional Liability Exclusion

**Important Considerations:**

Please read this proposal carefully, as the terms and conditions may differ from those in the submission.

Quote expires on: 1/1/2021.

We reserve the right to amend premium, terms & conditions or withdraw the proposal if underlying carriers, pricing or terms change.

All underlying carriers must be rated A- V or better by A.M. Best.

Underlying policy numbers must be received upon binding for policy issuance.

The Terrorism Risk Insurance Act offer letter is included in this document.

Copies of all non-Liberty Mutual underlying policies must be received within 60 days of binding.

An important notice regarding the expiration of the Terrorism Risk Insurance Act is included in this document.

To learn more about Liberty Mutual's privacy policy,  
go to: <https://www.libertymutualgroup.com/about-lm/corporate-information/privacy-policy>



**Terrorism Risk Insurance Act, Including all Amendments, ("TRIA" or the "Act")**

**ACCEPT OR REJECT OPTION: The following notice will be added to your policy:**

**POLICYHOLDER DISCLOSURE, TERRORISM RISK INSURANCE ACT**

**If you ACCEPT TRIA: The following endorsements will be added to your policy:**

The Terrorism endorsements described below **do not apply** to umbrella coverage over underlying Commercial Automobile insurance, but otherwise apply as follows if attached to your policy:

**Underlying Coverage Requirement for Certified Acts of Terrorism – LCU 60 01**

**Cap on Losses from Certified Acts of Terrorism – LCU 60 04**

**Punitive Damages Related to a Certified Act of Terrorism Exclusion – LCU 60 06**

**Punitive Damages Related to a Certified Act of Terrorism Exclusion – LCU 60 10**  
(This endorsement applies only in Arkansas.)

**If you REJECT TRIA: The following endorsement will be added to your policy:**

The Terrorism endorsement described below **does not apply** to umbrella coverage over underlying Commercial Automobile insurance, but otherwise applies as follows if attached to your policy:

**Certified Acts of Terrorism Exclusion – LCU 60 05**

November 18, 2020

LINCOLNWOOD SCHOOL DISTRICT 74



Umbrella Policy

Effective: January 1, 2021

**POLICYHOLDER DISCLOSURE**

**NOTICE OF OFFER TO PURCHASE TERRORISM INSURANCE  
FOR POLICY PERIOD**

**This notice contains important information about the Terrorism Risk Insurance Act and your option to purchase terrorism insurance coverage. Please read it carefully.**

**THE TERRORISM RISK INSURANCE ACT**

The Terrorism Risk Insurance Act, including all amendments ("TRIA" or the "Act") establishes a program to spread the risk of catastrophic losses from certain acts of terrorism between insurers and the federal government. If an individual insurer's losses from "certified acts of terrorism" exceed a specified deductible amount, the government will generally reimburse the insurer for a percentage of losses (the "Federal Share") paid in excess of the deductible, but only if aggregate industry losses from "certified acts of terrorism" exceed the "Program Trigger". An insurer that has met its insurer deductible is not liable for any portion of losses in excess of \$100 billion per year. Similarly, the federal government is not liable for any losses covered by the Act that exceed this amount. If aggregate insured losses exceed \$100 billion, losses up to that amount may be pro-rated, as determined by the Secretary of the Treasury.

Beginning in calendar year 2020, the Federal Share is 80% and Program Trigger is \$200,000,000.

**MANDATORY OFFER OF COVERAGE FOR "CERTIFIED ACTS OF TERRORISM" AND DISCLOSURE OF PREMIUM**

TRIA requires insurers to make coverage available for any loss that occurs within the United States (or outside of the U.S. in the case of U.S. missions and certain air carriers and vessels), results from a "certified act of terrorism" AND that is otherwise covered under this policy. You have the option to accept or reject this coverage.

A "certified act of terrorism" means:

[A]ny act that is certified by the Secretary [of the Treasury], in consultation with the Secretary of Homeland Security, and the Attorney General of the United States

(i) to be an act of terrorism;

(ii) to be a violent act or an act that is dangerous to –

(I) human life;

(II) property; or

(III) infrastructure;

(iii) to have resulted in damage within the United States, or outside of the United States in the case of –

(I) an air carrier (as defined in section 40102 of title 49, United States Code) or United States flag vessel (or a vessel based principally in the United States, on which United States income tax is paid and whose insurance coverage is subject to regulation in the United States); or

(II) the premises of a United States mission; and

(iv) to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

**How the act affects your policy and what you must do**

**SELECTION OR REJECTION OF OPTIONAL TERRORISM INSURANCE COVERAGE**

You have the option of purchasing coverage for losses resulting from “certified acts of terrorism” where it could otherwise be excluded. This offer pertains only to those lines of business covered by TRIA and, more specifically, does not apply to commercial automobile insurance. This offer is also expressly conditioned upon your acceptance of coverage for “certified acts of terrorism” on all underlying insurance policies that are subject to TRIA or, where applicable, the existence of such coverage on all TRIA eligible lines for which you self insure. If you reject TRIA coverage on your primary liability policies, you must also reject it on your Excess, Umbrella or Umbrella Excess policy.

The premium charge for this coverage for the policy period is \$313 and does not include any charges for the portion of loss covered by the Federal government under the Act.

If you reject this offer, you will not be covered for losses resulting from “certified acts of terrorism.”

Please indicate on the attached coverage election form, whether you accept or reject this offer. If we do not receive a completed Terrorism Coverage Election Form from you, coverage for “certified acts of terrorism” will be excluded from your policy.

**TERRORISM COVERAGE ELECTION FORM**

PLEASE INDICATE YOUR ELECTION TO ACCEPT OR REJECT THIS OFFER BELOW:

I hereby elect to purchase coverage for “certified acts of terrorism” for the policy period for \$313

I hereby reject this offer of coverage. I understand that by rejecting this offer, I will have no coverage for losses arising from “certified acts of terrorism” and my policy will be endorsed accordingly.

**POLICYHOLDER ACKNOWLEDGEMENT**

I hereby acknowledge that I have received notice of TRIA, the federal share of compensation for “certified acts of terrorism,” and the premium charge for losses covered by TRIA.

\_\_\_\_\_  
Policyholder/Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

**The summary of the Act and the coverage under your policy contained in this notice is necessarily general in nature. Your policy contains specific terms, definitions, exclusions and conditions. In case of any conflict, your policy language will control the resolution of all coverage questions. Please read your policy carefully.**

If you have any questions regarding this notice, please contact your sales representative or agent.

# SELECTIVE

BE UNIQUELY INSURED<sup>SM</sup>

Quotation of Commercial Insurance

**Prepared for:**  
LINCOLNWOOD SCHOOL DISTRICT 74  
6950 N EAST PRAIRIE RD  
LINCOLNWOOD, IL 607122520

CWHITED@SD74.ORG

**Presented By:**  
LAMB LITTLE & CO

CG 2503 AND CG 2504 INCLUDED ON PACKAGE

Proposal Print Date:11/23/2020

# SELECTIVE

BE UNIQUELY INSURED<sup>SM</sup>

Quotation of Commercial Insurance  
Schools  
New Business

**Prepared for:**  
LINCOLNWOOD SCHOOL DISTRICT 74  
6950 N EAST PRAIRIE RD  
LINCOLNWOOD, IL 607122520

CWHITED@SD74.ORG

**Presented By:**  
LAMB LITTLE & CO

The following quotation of insurance has been developed for the above captioned risk.  
IT IS AGREED AND UNDERSTOOD NO COVERAGE HAS BEEN BOUND.

This quotation will expire after ( 30 ) days Or the effective date of requested coverages unless otherwise notified.



## Providing Insurance Solutions Clients Can Trust Since 1926

Since its founding, Selective has built a reputation of honesty, efficiency and quality service among agents and customers alike. As of 1930, that reputation has been backed by an "A" (Excellent) or better rating from A.M. Best – a premier financial rating organization.

Combining great products and service, coupled with an exemplary record of responsiveness is the Selective advantage that will keep you coming back for more. Whether you need an insurance expert in your field, the continual support of 24/7 claims service, the convenience of paying your bill online or customized coverage designed to fit your unique needs, Selective is the answer.

Selective Insurance Group, Inc. is primarily a holding company for ten customer-focused property and casualty (P&C) insurance companies and ranked as the 49th largest P&C insurance group in the United States by A.M. Best Co. These companies offer a broad range of insurance and alternative risk management services. Selective provides value-added products and services to businesses, public entities and individuals through approximately 990 independent agents in 22 primary eastern and Midwestern states. Our approximately 1,900 employees create the competitive advantages that make Selective one of the best regional insurance organizations in the marketplace.

# HERE'S WHAT YOU CAN EXPECT AS A BUSINESS CUSTOMER WITH SELECTIVE.

## PRIOR TO POLICY ISSUED



Top Quality Agent



Safety Management Survey<sup>1</sup>

- Comprehensive Risk Advice
- Help Identify Unknown Risks
- A local team from Selective working in partnership with your agent

## AS A SELECTIVE CUSTOMER



Welcome Email



Digital Policy



Mobile App & Web Portal

- Sign up for [Online Access](#)
- View Policies, Bills, Auto ID Cards<sup>2</sup>
- Manage Account 24/7



Safety Management Evaluation



Safety Management Service Visit



License Verification with Atlas Certified

- Review Risk Mitigation Efforts
- [Online Tools & Videos](#)
- Validate Credentials and Increase Compliance



Electronic Billing Alerts



Automatic Payment Options

- Via Email, Text<sup>3</sup>, [Mobile App](#)<sup>3</sup>
- Checking/Savings Account, Credit/Debit Cards
- Various Flexible Payment Plans
- Pay as You Go<sup>4</sup>



Extended Hours Contact Center



Instant Customer Recognition

- Pay via Phone 24/7
- Communication via Phone, Email, Chat



Selective<sup>®</sup> Drive

- [Selective<sup>®</sup> Drive Mobile App](#)
- Reduce Distracted/Careless Driving
- Track Driver Locations
- Fleet Route Optimization



Customer Preferences



Proactive Messages



Recall Alerts

- Choice of Communication Channel
- Billing, Claims & Policy Notifications
- Customized Weather Alerts
- Product & Auto Recalls



Accident Claim



Upload Claim Photos with EZ Write



48-Hour Payment with SWIFTClaim<sup>SM</sup>

- Multiple Claim Reporting Options
- Unlimited Photo Upload
- Payment Within Two Days<sup>5</sup>



Proof of Insurance via Mobile App

- Instant Access to Proof of Insurance
- Locate Key Service Providers



Automatic Renewal Options

- Convenient Automatic Renewals
- Multi-Line Product Discount Opportunities

<sup>1</sup> Available for selected Commercial Lines Customers

<sup>2</sup> Where Allowable by State

<sup>3</sup> Coming in 2019

<sup>4</sup> With PaySync<sup>®</sup> Products

<sup>5</sup> Only for SWIFTClaim<sup>SM</sup>

Quotation of Commercial Insurance  
LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

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This non-binding proposal is only a summary of premium. It is not a guarantee that the actual premium will not exceed the amount of the proposal. No coverage is provided by this summary nor does it replace any provisions of the final policy. For specific terms and restrictions, refer to the individual policy and coverage forms.

Quotation of Commercial Insurance  
LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

## Premium Summary

<u>Coverage</u>	<u>Premium</u>
Property	\$43,587.00
Crime Fidelity	\$50.00
Inland Marine	\$9,827.00
General Liability	\$9,582.00
Abuse or Molestation	\$7,467.00
Automobile	\$2,303.00
Umbrella	\$14,516.00
Cyber Liability and Data Breach Response	\$2,894.00
School Board Legal Liability (SBLL)	\$3,833.00
<b>Total Premium</b>	<b>\$94,059.00</b>

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Quotation of Commercial Insurance  
LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

**Line Of Business Premium Recap**

**Property Premium Totals**

<u>Coverages</u>	
Schools Property Extension Coverage	\$1,500.00
Bldg/Tenants Impr & Bett	\$14,029.00
Business Personal Property	\$1,751.00
Business Income Educational Institution	Included
Blanket Group I	\$19,717.00
Blanket Group II	\$753.00
Power Pac Class Rated Premium	\$4,348.00
Terrorism (Certified Acts)	\$1,473.00
Identity Recovery Coverage	16
<hr/>	
<b>Grand Total LOB Premium</b>	<b>\$43,587.00</b>

**Crime Fidelity Premium Totals**

<u>Coverages</u>	<u>Premium</u>
Ip - Theft Of Money And Securities	Included
Ip - Robbery Or Safe Burglary Of Othr Prop	Included
Outside The Premises	Included
Schools Crime ElitePac Endorsement	\$50.00
<hr/>	
<b>Grand Total LOB Premium</b>	<b>\$50.00</b>

**Inland Marine Premium Totals**

<u>Coverages</u>	<u>Premium</u>
Accounts Receivable	\$75.00
Commercial Articles	\$190.00
Electronic Information Systems	\$2,064.00
Flood and EarthQuake Coverage	\$6,991.00
IM-PAC PRIMARY	\$175.00
Terrorism (Certified Acts)	\$332.00

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Quotation of Commercial Insurance  
LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

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**Grand Total LOB Premium**      \$9,827.00

**General Liability Premium Totals**

<u>Coverages</u>	<u>Premium</u>
Premises Operations	\$8,394.00
Employee Benefits Program	\$352.00
Terrorism (Certified Acts)	\$324.00
Schools General Liability Extension Coverage	\$512.00
<hr/>	
<b>Grand Total LOB Premium</b>	<b>\$9,582.00</b>

**Abuse or Molestation Premium Totals**

<u>Coverages</u>	<u>Premium</u>
Occurrence	
Schools Abuse or Molestation	
	\$7,467.00
<hr/>	
<b>Grand Total LOB Premium</b>	<b>\$7,467.00</b>

**Automobile Premium Totals**

<u>Liab Coverages</u>	<u>Premium</u>
Medical Payments	\$9.00
Excess Hired	\$281.00
Non-owned	\$1,881.00
Terrorism Premium	\$78.00
Schools Auto Extension Coverage	\$54.00
<hr/>	
<b>Grand Total LOB Premium</b>	<b>\$2,303.00</b>

**Umbrella Premium Totals**

<u>Coverages</u>	<u>Premium</u>
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Quotation of Commercial Insurance  
LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

Terrorism (Certified Acts)	\$491.00
Umbrella	\$14,025.00
<hr/>	
<b>Grand Total LOB Premium</b>	<b>\$14,516.00</b>

**Cyber Liability and Data Breach Response Premium Totals**

<u>Coverages</u>	<u>Premium</u>
Cyber Liability and Data Breach Response Coverage	\$2,680.00
Consequential Reputational Loss Coverage	\$134.00
Criminal Reward Coverage	\$80.00
<hr/>	
<b>Grand Total LOB Premium</b>	<b>\$2,894.00</b>

**School Board Legal Liability Premium Totals**

<u>Coverages</u>	<u>Premium</u>
School Board Legal Liability	\$3,833.00
Non Monetary Damages	Included
<hr/>	
<b>Grand Total LOB Premium</b>	<b>\$3,833.00</b>

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Quotation of Commercial Insurance  
LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

**Policy Location Schedule**

<u>Loc#</u>	<u>Bldg#</u>	<u>Street</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
002	001	6950 N EAST PRAIRIE RD	LINCOLNWOOD	IL	60712
		Class Code	0702	Property Interest	Not Available
		Year Built	1963	Stories	1
		Total Area	6077	Protection Class	03
		Sprinklered	N	Alarm	Not Available
		Construction Type	MASONRY NON-COMB		
003	001	6970,6976,6984 N. EAST PRAIRE RD.	LINCOLNWOOD	IL	60645
004	001	6855 N CRAWFORD AVE	LINCOLNWOOD	IL	60712
		Class Code	1052	Property Interest	Not Available
		Year Built	2000	Stories	2
		Total Area	150000	Protection Class	03
		Sprinklered	N	Alarm	Fire & Burglar
		Construction Type	MASONRY NON-COMB		
004	002	6855 N CRAWFORD AVE	LINCOLNWOOD	IL	60712
		Class Code	0567	Property Interest	Not Available
		Year Built	2000	Stories	Not Available
		Total Area	1000	Protection Class	03
		Sprinklered	N	Alarm	Not Available
		Construction Type	FRAME		
005	001	3925 W LUNT AVE	LINCOLNWOOD	IL	60712
		Class Code	0852	Property Interest	Not Available
		Year Built	1959	Stories	1
		Total Area	37643	Protection Class	03
		Sprinklered	N	Alarm	Not Available
		Construction Type	MASONRY NON-COMB		
005	002	3925 W LUNT AVE	LINCOLNWOOD	IL	60712

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Quotation of Commercial Insurance  
LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

Class Code	0567	Property Interest	Not Available
Year Built	2000	Stories	Not Available
Total Area	2000	Protection Class	03
Sprinklered	N	Alarm	Not Available
Construction Type	FRAME		
006 001	6850 N EAST PRAIRIE RD	LINCOLNWOOD	IL 60712
Class Code	0702	Property Interest	Not Available
Year Built	1963	Stories	1
Total Area	6077	Protection Class	03
Sprinklered	N	Alarm	Not Available
Construction Type	MASONRY NON-COMB		

This non-binding proposal is only a summary of premium. It is not a guarantee that the actual premium will not exceed the amount of the proposal. No coverage is provided by this summary nor does it replace any provisions of the final policy. For specific terms and restrictions, refer to the individual policy and coverage forms.

Quotation of Commercial Insurance  
LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

**Policy Auto Schedule**

<u>Veh #</u>	<u>State</u>	<u>Year</u>	<u>Make/Model</u>	<u>VIN</u>	<u>Comp Ded</u>	<u>Coll Ded</u>	<u>Premium</u>
001	IL	15	FORD/F250 SUPER DUTY	1FTBF2B6XFEB25250			\$9.00

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Quotation of Commercial Insurance  
LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

**Property**

**Policy Level**

Deductible: 2,500  
Coinsurance: Bldg: 100    BPP: 100  
Loss Free Years: 3

<b><u>Special Plans</u></b>	<b><u>Limit</u></b>	<b><u>Premium</u></b>
Blanket Group I - SPCL Cls + BLDG 100% of Total Value	45,854,613	\$19,717.00
Blanket Group II - BPP ONLY 100% of Total Value	1,107,895	\$753.00
<b><u>Optional Coverages/Extensions</u></b>	<b><u>Limit</u></b>	<b><u>Premium</u></b>
Schools Property Extension Coverage		\$1,500.00
<b>Systems Power Pac Clas Rated Deductibles</b>		
Combined All Coverages Ded: Follows Property Deductible		
Identity Recovery Coverage		\$16.00

**Location Level**

Location 002/001 - 6950 N EAST PRAIRIE RD, LINCOLNWOOD, IL

<b><u>Coverage</u></b>	<b><u>Limit</u></b>	<b><u>Premium</u></b>
Building	4,039,152	\$1,939.00
Business Pers Prop - Business Personal Property	257,833	\$235.00
Business Income Educational Institution	550,000	Included
Agreed Value – Yes		
Civil Authority - Modification of One-Mile Radius	5 miles	
waiting period- 72 hours		
Property in the open	9,862	Included in Blanket Group 1
Systems Power Pac		\$364.00
<b>Location 002/001 - Total Premium</b>		<hr/> 2538

Location 004/001 - 6855 N CRAWFORD AVE, LINCOLNWOOD, IL

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Quotation of Commercial Insurance  
LINCOLNWOOD SCHOOL DISTRICT 74

Quote # 46553400

Policy Period: 01/01/21 to 01/01/22

<u>Coverage</u>	<u>Limit</u>	<u>Premium</u>
Building	45,142,607	Inc in Blkt Grp 1
Business Pers Prop - Business Personal Property	1,667,490	\$868.00
Business Income Educational Institution	550,000	Included
Agreed Value – Yes		
Civil Authority - Modification of One-Mile Radius	5 miles	
waiting period- 72 hours		
Property in the open	130,133	Included in Blanket Group 1
Systems Power Pac		\$2,147.00
<b>Location 004/001 - Total Premium</b>		3015
Location 004/002 - 6855 N CRAWFORD AVE, LINCOLNWOOD, IL		
<u>Coverage</u>	<u>Limit</u>	<u>Premium</u>
Business Pers Prop - Business Personal Property	8,235	Inc in Blkt Grp 2
Business Income Educational Institution	550,000	Included
Agreed Value – Yes		
Civil Authority - Modification of One-Mile Radius	5 miles	
waiting period- 72 hours		
Systems Power Pac		\$4.00
<b>Location 004/002 - Total Premium</b>		4
Location 005/001 - 3925 W LUNT AVE, LINCOLNWOOD, IL		
<u>Coverage</u>	<u>Limit</u>	<u>Premium</u>
Building	14,325,958	\$6,446.00
Business Pers Prop - Business Personal Property	980,966	\$648.00
Business Income Educational Institution	550,000	Included
Agreed Value – Yes		
Civil Authority - Modification of One-Mile Radius	5 miles	
waiting period- 72 hours		
Property in the open	164,620	Included in Blanket Group 1
Systems Power Pac		\$888.00
<b>Location 005/001 - Total Premium</b>		7982

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Quotation of Commercial Insurance  
LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

Location 005/002 - 3925 W LUNT AVE, LINCOLNWOOD, IL

<u>Coverage</u>	<u>Limit</u>	<u>Premium</u>
Building	179,469	Inc in Blkt Grp 1
Business Income Educational Institution	550,000	Included
Agreed Value – Yes		
Civil Authority - Modification of One-Mile	5 miles	
Radius		
waiting period- 72 hours		
Systems Power Pac		\$29.00
<b>Location 005/002 - Total Premium</b>		29

Location 006/001 - 6850 N EAST PRAIRIE RD, LINCOLNWOOD, IL

<u>Coverage</u>	<u>Limit</u>	<u>Premium</u>
Building	14,850,585	\$5,644.00
Business Pers Prop - Business Personal Property	1,099,660	Inc in Blkt Grp 2
Business Income Educational Institution	550,000	Included
Agreed Value – Yes		
Civil Authority - Modification of One-Mile	5 miles	
Radius		
waiting period- 72 hours		
Property in the open	227,922	Included in Blanket Group 1
Systems Power Pac		\$916.00
<b>Location 006/001 - Total Premium</b>		6560

**Other**

Terrorism Premium (Certified Acts) \$1,473.00

<b>Total Property Premium</b>	<b>\$43,587.00</b>
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Quotation of Commercial Insurance  
LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

**Crime Fidelity**

**Policy Level**

Coverage Type	Governmental Crime Coverage		
<u>Coverages</u>	<u>Deductible</u>	<u>Limit</u>	<u>Premium</u>
Schools Crime ElitePac Endorsement			\$50.00

**Location Level**

**Location 002/001 - 6950 N EAST PRAIRIE RD, LINCOLNWOOD, IL**

<u>Coverages</u>	<u>Deductible</u>	<u>Limit</u>	<u>Premium</u>
IP - Theft of Money and Securities	\$500.00	25,000	Included
IP - Robbery or Safe Burg of Other Prop	\$500.00	25,000	Included
Outside the Premises	\$500.00	25,000	Included

**Location 004/001 - 6855 N CRAWFORD AVE, LINCOLNWOOD, IL**

<u>Coverages</u>	<u>Deductible</u>	<u>Limit</u>	<u>Premium</u>
IP - Theft of Money and Securities	\$500.00	25,000	Included
IP - Robbery or Safe Burg of Other Prop	\$500.00	25,000	Included
Outside the Premises	\$500.00	25,000	Included

**Location 004/002 - 6855 N CRAWFORD AVE, LINCOLNWOOD, IL**

<u>Coverages</u>	<u>Deductible</u>	<u>Limit</u>	<u>Premium</u>
IP - Theft of Money and Securities	\$500.00	25,000	Included
IP - Robbery or Safe Burg of Other Prop	\$500.00	25,000	Included
Outside the Premises	\$500.00	25,000	Included

**Location 005/001 - 3925 W LUNT AVE, LINCOLNWOOD, IL**

<u>Coverages</u>	<u>Deductible</u>	<u>Limit</u>	<u>Premium</u>
IP - Theft of Money and Securities	\$500.00	25,000	Included
IP - Robbery or Safe Burg of Other Prop	\$500.00	25,000	Included

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LINCOLNWOOD SCHOOL DISTRICT 74  
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Policy Period: 01/01/21 to 01/01/22

Outside the Premises \$500.00 25,000 Included

**Location 005/002 - 3925 W LUNT AVE, LINCOLNWOOD, IL**

<u>Coverages</u>	<u>Deductible</u>	<u>Limit</u>	<u>Premium</u>
IP - Theft of Money and Securities	\$500.00	25,000	Included
IP - Robbery or Safe Burg of Other Prop	\$500.00	25,000	Included
Outside the Premises	\$500.00	25,000	Included

**Location 006/001 - 6850 N EAST PRAIRIE RD, LINCOLNWOOD, IL**

<u>Coverages</u>	<u>Deductible</u>	<u>Limit</u>	<u>Premium</u>
IP - Theft of Money and Securities	\$500.00	25,000	Included
IP - Robbery or Safe Burg of Other Prop	\$500.00	25,000	Included
Outside the Premises	\$500.00	25,000	Included

**Total Crime Fidelity Premium \$50.00**

**Inland Marine**

**Policy Level Coverages**

	<u>Limit</u>	<u>Premium</u>
Commercial Articles (Ded \$1,000)		
Cameras - Motion Pictures	100,000	\$154.00
Musical Instruments - Other Band	100,000	\$36.00

**Flood and Earthquake Coverage**

Coverage Method - Blanket Coverage

Type of Coverage - Flood & Earthquake

Refer to the end of Inland Marine Coverage section for location Flood & EQ coverage information

**Earthquake Coverage**

Occurrence Limit 5,000,000(applies to each "covered location")

Aggregate Limit 5,000,000(applies to each "covered location" for any one policy period)

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LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

Catastrophe Limit 10,000,000(applies to all "covered locations" for any one policy period)  
EQ Deductible - 25,000  
**Total Earthquake Coverage Premium** \$1,165.00

**Flood Coverage**  
Occurrence Limit 5,000,000(applies to each "covered location" )  
Aggregate Limit 5,000,000(applies to each "covered location" for any one policy period)  
Catastrophe Limit 10,000,000(applies to all "covered locations" for any one policy period)  
Flood Deductible - 25,000  
**Total Flood Coverage Premium** \$5,826.00

**Coverage Extensions**  
Additional Debris Removal Expenses-25% Of loss paid plus 10,000  
Emergency Removal 30  
Limited Fungus Coverage 15,000

**Supplemental Coverages**  
Foundations of Buildings, Pilings and Underground Pipes 100,000  
Newly Acquired Buildings (applies for 90 days) 100,000  
Ordinance or Law -Undamaged Parts of Building COVERED  
Ordinance or Law -Increased Cost to Repair or Demolish 100,000  
Personal Property Acquired Locations 100,000  
Pollutant Clean Up and Removal 25,000  
Property in Transit 50,000

**Coverage Options**  
Masonry Veneer Covered for Loss caused by Earthquake  
Valuation Replacement Cost

**Total Flood and Earthquake Premium & Minimum Premium** \$6,991.00

Virus or Harmful Code 50,000 \$ .00  
IM-PAC PRIMARY - (Class Code 900/ Ded \$500) 25,000 \$175.00

**Location Level**

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LINCOLNWOOD SCHOOL DISTRICT 74  
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Policy Period: 01/01/21 to 01/01/22

Location 002/001 - 6950 N EAST PRAIRIE RD, LINCOLNWOOD, IL

	<u>Limit</u>	<u>Premium</u>
Electronic Information Systems - Blanket		\$2,064.00
Equipment - Formula	1,380,000	
Data - Formula	138,000	
Accounts Receivable - Non-Reporting		\$75.00
Limit #1	250,000	
<b><u>Other</u></b>		
Terrorism Premium		\$332.00
<b>Total Inland Marine Premium</b>		<b>\$9,827.00</b>

**Flood and Earthquake Location Coverage Schedule**

<u>Loc#</u>	<u>Bldg#</u>	<u>EQ Coverage</u>	<u>Flood Coverage</u>
002	001	Yes	Yes
004	001	Yes	Yes
004	002	Yes	Yes
005	001	Yes	Yes
005	002	Yes	Yes
006	001	Yes	Yes

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Quotation of Commercial Insurance  
LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

**General Liability**

**Policy Level**

	<u>Limit</u>	<u>Premium</u>
General Aggregate	2,000,000	
Products/Completed Ops	2,000,000	
Each Occurrence	1,000,000	
Personal & Advertising Injury	1,000,000	
Fire Damage	1,000,000	
Medical Expense	20,000	
 <u>Additional Coverages</u>	 <u>Quantity/Limit</u>	 <u>Premium</u>
Employee Benefits Program	100 & over	\$352.00
Schools General Liability Extension Coverage		\$512.00

**Location Level**

Location 002/001 - 6950 N EAST PRAIRIE RD, LINCOLNWOOD, IL  
Class 47469 - SCHOOLS FACULTY LIABILITY FOR CORPORAL

<u>Coverage</u>	<u>Exposure</u>	<u>Premium</u>
Premises Operation (Final Rate 7.797)	109	\$850.00

**Location Level**

Location 002/001 - 6950 N EAST PRAIRIE RD, LINCOLNWOOD, IL  
Class 47471 - SCHOOLS PUBLIC ELEMENTARY, KINDERGARTEN

<u>Coverage</u>	<u>Exposure</u>	<u>Premium</u>
Premises Operation (Final Rate 5.983)	1,251	\$7,485.00

**Location Level**

Location 003/001 - 6970,6976,6984 N. EAST PRAIRE RD., LINCOLNWOOD, IL  
Class 49452 - VACANT LAND NOT FOR PROFIT ONLY

<u>Coverage</u>	<u>Exposure</u>	<u>Premium</u>
Premises Operation (Final Rate 2.968)	20	\$59.00

**Other**

	<u>Premium</u>
Terrorism Premium (Certified Acts)	\$324.00

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LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

<b>Total General Liability Premium</b>	<b>\$9,582.00</b>
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**Abuse or Molestation**

	<u>Limit</u>	<u>Premium</u>
Each Abuse or Molestation/Aggregate	\$1,000,000/1,000,000	\$7,467.00
Deductible:	NONE	Each Abuse or Molestation
Total Students All Locs	1,243	

<b>Total Schools Abuse or Molestation Premium</b>	<b>\$7,467.00</b>
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**Automobile**

**Policy Level**

	<u>Symbol</u>	<u>Limit</u>	<u>Premium</u>
Liability Limit Type CSL			
- Liability	7,8,9	1,000,000	
Schools Auto Extension Coverage			\$54.00

**State Level Coverages (IL)**

<u>Coverage</u>	<u>Symbol</u>	<u>Limit</u>	<u>Premium</u>
Non-Owned Employee Count		101 - 500	\$1,881.00
Excess Hired		30,000	\$281.00
UM/UIM (BI/CSL)	7	1,000,000	

**Vehicle Level**

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LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

**Vehicle IL/001 : 2015 FORD F250 SUPER DUTY VIN# 1FTBF2B6XFEB25250**

<u>Coverage</u>	<u>Symbol</u>	<u>Limit</u>	<u>Premium</u>
Liability	7,8,9	See State Level	
Medical Payments	2	5,000	\$9.00
UM/UIM (PD)		15,000	
<b>Vehicle Total Premium</b>			<b>\$9.00</b>

**Other**

Terrorism Premium	<u>Premium</u>
	\$78.00

**Total Automobile Premium \$2,303.00**

**Umbrella**

**Policy Level**

**Limit/Premium Basis**

Excess Limit	\$10,000,000
Aggregate Limit	\$10,000,000
Self Insured Retention	ZERO

**Underlying Liability**

**Limit/Premium Basis**

**Premium**

**Automobile**

\$519.00

Carrier: Selective Ins Co of America

CSL 1,000,000

**Employers Liability**

Each Accident Limit 500,000

Each Employee Limit 500,000

Policy Limit 500,000

**General Liability**

\$1,336.00

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LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

Carrier: Selective Ins Co of America		
General Aggregate	2,000,000	
Prod Comp Aggregate	2,000,000	
Pers/Adv Aggregate	1,000,000	
Each Occurrence	1,000,000	
<b>School Board</b>		<b>\$1,150.00</b>
Carrier: Selective Ins Co of America		
General Aggregate	1,000,000	
Per Claim Aggregate	1,000,000	
<b>Employee Benefits</b>		<b>\$106.00</b>
Carrier: Selective Ins Co of America		
General Aggregate	2,000,000	
Per Claim Aggregate	1,000,000	
<b>Abuse or Molestation Liab</b>		<b>\$2,240.00</b>
Carrier: Selective Ins Co of America		
Each Abusive Conduct	1,000,000	
Aggregate Limit	1,000,000	
<b>Total 1st 1 MM</b>		<b>\$5,351.00</b>
1 MM X/S 1MM		\$2,140.00
1 MM X/S 2MM		\$1,284.00
1 MM X/S 3MM		\$750.00
1 MM X/S 4MM		\$750.00
1 MM X/S 5MM		\$750.00
1 MM X/S 6MM		\$750.00
1 MM X/S 7MM		\$750.00
1 MM X/S 8MM		\$750.00
1 MM X/S 9MM		\$750.00
<b><u>Other</u></b>		
Terrorism Premium (Certified Acts)		\$491.00

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Quotation of Commercial Insurance  
LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

**Total Umbrella Premium** **\$14,516.00**

**Cyber Liability and Data Breach Response Coverage**

Cyber Liability and Data Breach Response Application must be completed and signed by the Insured and received by the - Company before the policy can be Issued. A copy of the form is included in this Quote Proposal.

**CLAIMS-MADE**

Retroactive Date:	01/01/21		
	<u>Limit</u>	<u>Retention</u>	<u>Premium</u>
Policy Aggregate Limit	\$1,000,000		\$2,680.00
<b>Includes:</b>			
Information Security and Privacy Liability	\$1,000,000	\$10,000	
Privacy Breach Response Services	\$250,000	\$10,000	
Maximum Notified Individuals	100000	250	
Regulatory Defense and Penalties	\$100,000	\$10,000	
Website Media and Content Liability	\$1,000,000	\$10,000	
PCI Fines, Expenses and Costs	\$25,000	\$10,000	
Cyber Extortion	\$50,000	\$10,000	
First Party Data Protection	\$50,000	\$10,000	
First Party Data Protection Business Interruption	\$50,000	\$10,000	
Fraudulent Instruction	\$50,000	\$10,000	
Electronic Crime	\$50,000	\$10,000	
<b>Other</b>			
Consequential Reputational Loss	\$50,000	\$10,000	\$134.00
Criminal Reward	\$50,000		\$80.00

**Total Cyber Liability and Data Breach Response Premium** **\$2,894.00**

\* Note: Retention for First Party Data Protection Business Interruption is the greater of the noted retention or income loss during 12 hour waiting period.

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Quotation of Commercial Insurance  
LINCOLNWOOD SCHOOL DISTRICT 74  
Quote # 46553400  
Policy Period: 01/01/21 to 01/01/22

**School Board Legal Liability**

**Policy Level**

Per Claim Limit/ Aggregate limit:	1,000,000/1,000,000
Deductible	2500
Exposure Student Population (All loc)	1243

<u>Coverage</u>	<u>Limit</u>	<u>Premium</u>
School Board Legal Liability	See Above	\$3,833.00
Non Monetary Damages- SC 1800	100,000/100,000	Included

<b>Total School Board Legal Liability Premium</b>	<b>\$3,833.00</b>
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LINCOLNWOOD SCHOOL DISTRICT 74  
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### **Terrorism (Certified Acts) Information**

Refer to attached IN 0585 0116 Policyholder Disclosure Notice - Offer of Terrorism Insurance Coverage and Rejection Form – Effective Until Revoked

**YOUR POLICY INCLUDES TERRORISM COVERAGE FOR AN ADDITIONAL PREMIUM OF:**

**TERRORISM - CERTIFIED ACTS: \$2,620.00**

**TERRORISM – AUTO \$78.00**

**IF YOU REJECT THE TERRORISM COVERAGE, AS NOTED ABOVE, THE PREMIUM FOR THE TERRORISM (FIRE ONLY) COVERAGE IS \$885.00.**

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## Selective Customer Self-Service and Billing Options



We understand that each customer has unique needs—that’s why Selective offers a variety of installment plans. Your agent can assist you with selecting a plan that works best with and meets the eligibility requirements for your particular policy. Please note that policies on the same account may have different payment plans and installment fees may apply.

- 1-Pay: Due in full at policy inception
- 2-Pay: Two equal installments due at policy inception and in the 6th month of the policy term
- 4-Pay: Four equal installments due at policy inception and in the 3rd, 6th and 9th months of the policy term
- Quarterly: Four equal installments due quarterly starting at policy inception
- 10-Pay: 19% due at policy inception, the remaining balance billed in nine equal monthly installments

### ***The SelectPay® Advantage (Electronic Funds Transfer)***

With our free SelectPay® service, your insurance payments can be automatically deducted from your checking or savings account. Not only will this save you time, but you’ll avoid late fees.

Signing up for SelectPay® is easy – just visit [www.selective.com](http://www.selective.com) and sign in. Click the “Billing & Payments” tab and then choose the “Pay Bill” link. You will need your policy number and bank account information to complete the transaction.

### ***PaySync® Flexible Payment Program***

Get the cash flow flexibility you need with PaySync® for your Selective Workers Compensation (WC) and Commercial Package Policy (CPP). With PaySync® WC, pay your premium installments when you pay your payroll; with PaySync® CPP, premiums are broken down into 12, 24, 26, or 52 payments – your choice during policy issuance. Benefits include:

- No down payments
- PaySync® is simply another pay plan option, so no special underwriting guidelines apply

You’ll need to provide Selective with your payroll information each pay cycle to be eligible to the PaySync® WC program. Payroll information can be submitted by you or a third party, such as an accountant or payroll processor, on your behalf. For more information about the program, please visit [selective.com/paysync](http://selective.com/paysync) or contact your agent.

**Your time is valuable. Selective lets you manage your policy on your own time through our online Customer Self-Service site. Here you can:**

- Pay your bill
- Schedule future payments
- Build and print certificates of insurance
- Print automobile ID cards
- File a claim
- Review, download or print a copy of your policy

Registration is simple. Have your policy or bill handy when you visit [www.selective.com](http://www.selective.com) and then click “Need a Customer User ID and Password”. Follow the onscreen instructions to answer the three security questions identifying your policy and begin managing your account 24/7.

# POLICYHOLDER DISCLOSURE NOTICE OFFER OF TERRORISM INSURANCE COVERAGE AND REJECTION FORM — EFFECTIVE UNTIL REVOKED

## Offer of Coverage:

You are hereby notified that under the Terrorism Risk Insurance Act, as amended, you have a right to purchase insurance coverage for losses resulting from “acts of terrorism”, as defined in Section 102(1) of the Act. The term “act of terrorism” means any act or acts that are certified by the Secretary of the Treasury - in consultation with the Secretary of Homeland Security, and the Attorney General of the United States - to be an “act of terrorism”; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

**You may accept or reject insurance coverage for losses resulting from certified “acts of terrorism”.**

- If you accept this offer of coverage simply pay your billed premium, which includes the amount shown below. You do not need to do anything else.
- If you would like to reject this coverage, please see the section of this form entitled Rejection of Terrorism Insurance Coverage and follow the instructions. Even if you reject this coverage, state law prohibits us from excluding fire losses resulting from an “act of terrorism”. Therefore, the terrorism exclusion we place on your policy will contain an exception for fire losses resulting from an “act of terrorism”. The additional premium for such fire losses resulting from an “act of terrorism” is shown below. **Please note that if you reject coverage for losses resulting from certified “acts of terrorism”, we will not provide coverage on renewals of this policy unless you ask us for coverage in the manner set forth in our “Offer of Terrorism Insurance Coverage When Terrorism Insurance Coverage Was Previously Rejected” form, which will be attached to renewals of this policy.**

## Disclosure of Premium:

The portion of your annual premium that is attributable to coverage for “acts of terrorism” is \_\_\_\_\_ and does not include any charges for the portion of loss that may be covered by the federal government under the Act.

The premium for terrorism (fire only) coverage is \_\_\_\_\_ and is due regardless of whether you reject coverage for certified “acts of terrorism”.

Please be aware that even if you purchase coverage for losses resulting from certified “acts of terrorism”, your policy will still contain other policy terms, conditions, limitations and exclusions that may impact whether coverage is available in the event of a loss resulting from a certified “act of terrorism”.

**Federal Participation in Payment of Terrorism Losses:**

You should know that where coverage is provided by this policy for losses resulting from certified “acts of terrorism”, such losses may be partially reimbursed by the United States Government under a formula established by federal law. Under the formula, the United States Government generally reimburses the following percentages of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage:

- a. 85% through 2015;
- b. 84% beginning on January 1, 2016;
- c. 83% beginning on January 1, 2017;
- d. 82% beginning on January 1, 2018;
- e. 81% beginning on January 1, 2019;
- f. and 80% beginning on January 1, 2020.

**Cap on Insurer Participation in Payment of Terrorism Losses:**

You should also know that the Terrorism Risk Insurance Act, as amended, contains a \$100 billion cap that limits United States Government reimbursement as well as insurers’ liability for losses resulting from certified “acts of terrorism” when the amount of such losses in any one calendar year exceeds \$100 billion. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

**Rejection of Terrorism Insurance Coverage:**

You may reject this offer of coverage by checking the box, filling in the information below, signing and returning this form to your agent. If you choose to reject this offer of coverage, we will add an exclusionary endorsement to your policy to eliminate coverage for losses resulting from certified “acts of terrorism”.

**Rejection of Coverage - Effective Until Revoked**

**I HAVE READ THIS FORM IN ITS ENTIRETY AND DO NOT WANT TO PURCHASE COVERAGE FOR CERTIFIED “ACTS OF TERRORISM”. I UNDERSTAND THAT THIS REJECTION IS EFFECTIVE UNTIL I AFFIRMATIVELY REVOKE IT IN THE MANNER SET FORTH IN SELECTIVE’S “OFFER OF TERRORISM INSURANCE COVERAGE WHEN TERRORISM INSURANCE COVERAGE WAS PREVIOUSLY REJECTED” FORM, AND THAT IF I SIGN THIS FORM THIS POLICY AND ANY RENEWALS WILL EXCLUDE COVERAGE FOR LOSSES RESULTING FROM CERTIFIED “ACTS OF TERRORISM”.**

\_\_\_\_\_  
Policyholder/Applicant’s Signature

\_\_\_\_\_  
Insurance Company

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Policy or Quote Number

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

## Schools Property Extension

Selective’s Education market segment targets public and private schools grades K-12, including Montessori, faith-based, charter and vocational schools. We will also consider private secondary schools with dormitories and community colleges. We offer Property, General Liability, Automobile and School Board Legal Liability coverages that are tailored for public and private schools. Selective also offers a participating (dividend) plan\* to private schools.

The following forms are included:

- CP 7630 ElitePac<sup>®</sup> Property Extension Endorsement
- CP 7648 Schools ElitePac<sup>®</sup> Property Extension Endorsement ▲ (symbol indicates unique coverages)
- CP 7649 ElitePac<sup>®</sup> Schedule – Schools (lists the coverages & limits in the above endorsements)
- CP 0030 Business Income (and EE) Coverage Form ▲
- CP 1525 Business Income Changes – Educational Institutions ▲

Coverage	Limit [1]
Additional Costs	\$25,000
Additional Property Covered:	
The cost of excavations, grading, backfilling or filling	Included in Bldg Limit
Foundations of buildings, structures, machinery or boilers	Included in Bldg Limit
Personal property while airborne or waterborne	Included in BPP Limit
Underground pipes, flues or drains	Included in Bldg Limit
Arson, Theft and Vandalism Rewards (not applicable in New York)	\$25,000
Automated External Defibrillators ▲	\$10,000
Back Up Of Sewer, Drain Or Sump - Direct Damage	\$100,000
Brands and Labels	Included in BPP Limit
Building Owner - Tenant Move Back Expenses	\$25,000
Business Income/Extra Expense Coverage CP 0030 and CP 1525 ▲	\$550,000 per location
Business Income/Extra Expense Related Additional Coverages:	
Auto Physical Damage Business Income	\$25,000
Back Up Of Sewer, Drain Or Sump - Business Income	\$100,000
Building Owner - Lessor’s Leasehold Interest	\$25,000
Communicable Disease Extra Expense ▲	\$25,000
Contractual Penalty	\$25,000
Denial of Service	\$25,000
Dependent Properties	\$100,000
Emergency Vacating Expense ▲	\$25,000

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## Schools Property Extension

Coverage	Limit [1]
Extended Period of Indemnity	180 Days
Extra Expense (refer to Property Dec for BI/EE limit)	\$10,000
Food Contamination Shutdown	\$25,000
Increased Realty Tax Assessment	\$25,000
Ingress or Egress	\$50,000
Newly Acquired Locations - Business Income	\$250,000
Pollutant Clean-up and Removal - Business Income	\$25,000
Project R & D Documentation and Prototypes Business Income	Included in BI Limit
Transit Business Income	\$25,000
Unnamed Premises - Business Income	\$10,000
Utility Services - Time Element	\$25,000
Violent Event Extra Expense ▲	\$50,000 Any One Policy Year
Business Personal Property Seasonal Increase	10%
Change of Temperature and Humidity	Included
Claim Expenses	\$25,000
Consequential Loss to Stock	Included in Valuation
Debris Removal - Additional Limit	\$250,000
Deductible (waiver of multiple property deductibles and disappearing deductible) ▲	Included
Deferred Payments	\$25,000
Fire Department Service Charge	<b>\$25,000</b>
Fire Extinguishing Equipment	Actual Loss Sustained
Harvested Crops ▲	\$25,000
Inland Marine Related Coverages:	
Accounts Receivable	\$100,000
Communication Equipment ▲	\$100,000
Electronic Information Systems (aka Computer Equipment and Electronic Data)	<b>\$100,000</b>
Fine Arts	\$25,000
Installation Property	\$25,000
Mobile Equipment	\$25,000

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## Schools Property Extension

Coverage	Limit [1]
Personal Effects - Within the Coverage Territory	\$5,000 Per Person \$25,000 Occurrence
Personal Effects - Outside the Coverage Territory	\$5,000 Per Person \$25,000 Occurrence
Property in Transit - Within the Coverage Territory	<b>\$100,000</b>
Property in Transit - Outside the Coverage Territory	\$10,000
Refrigerated Property - In Transit	\$25,000
Salesperson's Samples - Within the Coverage Territory	\$25,000
Salesperson's Samples - Outside the Coverage Territory	\$10,000
Tools and Equipment	\$10,000
Valuable Papers and Records	\$100,000
Lock Replacement	\$10,000
Marring and Scratching	Included
Members and Guests Property	\$1,000 Per Person \$25,000 Occurrence
Newly Acquired or Constructed Property - Building Per Location	\$1,000,000
Newly Acquired or Constructed Property - Business Personal Property Per Location	\$500,000
Non-Owned Detached Trailers	\$10,000
Ordinance or Law Coverage:	
Coverage A - Undamaged Parts of a Building	Included in Bldg Limit
Coverage B - Demolition Cost	\$500,000
Coverage C - Increased Cost of Construction	\$500,000
Coverage D - Tenants Improvements and Betterments	\$25,000
Outdoor Property	<b>\$350,000</b>
Outdoor Trees, Shrubs and Plants (\$2,500 any one item)	\$25,000 Occurrence \$100,000 Policy Year
Personal Effects of Students ▲	\$5,000 Per Student \$100,000 Occurrence
Personal Property At Unnamed Premises - Within The Coverage Territory	<b>\$100,000</b>
Personal Property At Unnamed Premises - Outside The Coverage Territory	\$10,000
Personal Property of Others	Included in BPP Limit
Pollutant Clean-up and Removal	<b>\$50,000</b>
Premises Boundary Increased Distance	<b>1,500 Feet</b>

## Schools Property Extension

Coverage	Limit [1]
Preservation of Property	<b>90 Days</b>
Replacement Cost Valuation for Personal Property of Others	Included
Roof Protection ▲	\$500 Per Roof \$1,000 Policy Year
Selling Price Valuation	Included
Specified Appurtenant Structures ▲	\$100,000 - Public Use \$1,000 BPP
Spoilage (formerly Refrigerated Property)	<b>\$50,000</b>
Tenant Building and Business Personal Property Coverage Required By Lease	\$25,000
Tenant's Building Glass Liability	Included in BPP Limit
Tenant Lease Assessment	\$5,000
Tenant Leasehold Improvements	\$25,000
Theft Damage to Building	Included in BPP Limit
Theft Limitation Amendments:	
Furs	\$5,000
Patterns, Dies, Molds and Forms	Included in BPP Limit
Precious Metals	\$10,000
Underground Fiber Optic Cable ▲	\$10,000 Occurrence \$50,000 Policy Year
Utility Service - Direct Damage	<b>\$50,000</b>
Voluntary Parting by Trick, Scheme or Device	Included

[1] Bolded limits are market segment specific increased limits.

\*Results are based on performance and not guaranteed. Participation subject to eligibility requirements.

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## Schools Crime ElitePac® Endorsement

Selective’s Education market segment targets public and private schools grades K-12, including Montessori, faith-based, charter and vocational schools. We will also consider private secondary schools with dormitories and community colleges. We offer Property, General Liability, Automobile and School Board Legal Liability coverages that are tailored for public and private schools. Selective also offers a participating (dividend) plan\* to private schools.

Coverage	Limit
Schools Crime ElitePac® Endorsement CR 7930 <b>[1]</b>	
Inside The Premises – Theft of Money and Securities	\$25,000
Inside The Premises – Robbery Or Safe Burglary of Other Property	\$25,000
Outside The Premises	\$25,000

**[1]** When the Schools Property Extension Coverage is purchased, the Schools Crime ElitePac® Endorsement is available under the Crime Coverage Part. The Crime ElitePac® is not available if the Schools Property Extension Coverage is not purchased.

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## Schools General Liability Extension

Selective’s Schools market segment targets public and private schools grades K-12, including Montessori, faith-based, charter and vocational schools. We will also consider private secondary schools with dormitories and community colleges. We offer Property, General Liability, Automobile and School Board Legal Liability coverages that are tailored for public and private schools. Selective also offers a participating (dividend) plan\* to private schools.

The following forms are included:

- CG 73 00 (or CG 73 00NY, CG 73 00FL) ElitePac® General Liability Extension Endorsement
- CG 73 08 (or CG 73 08NY, CG 73 08FL) Schools ElitePac® General Liability Extension Endorsement  
▲ (symbol indicates unique coverages)
- CG 79 35 (or CG 79 35NY, CG 79 35FL) Product Recall Expense Coverage Endorsement - \$25,000 Limit
- \$20,000 Increased Limit for Medical Payments

Coverage	Limit
Additional Insured – Primary and Non-Contributory Provision	Included
Additional Insured – Safety Patrols ▲	Included
Blanket Additional Insureds – As Required By Contract	Included
Broad Form Vendors Coverage	Included
Damage To Premises Rented To You (Including Fire, Lightning or Explosion)	\$1,000,000 ▲ (Limit to be shown on Dec Page)
Electronic Data Liability	\$100,000
Employee Definition Amended	Included
Employees As Insureds Modified	Included
Employer’s Liability Exclusion Amendment (N/A in NY) ▲	Included
Fellow Employee Provision ▲	Included
Functional Additional Insureds ▲	Included
Golf or Tennis Pros As Additional Insureds ▲	Included
Incidental Broadcasting and Publishing ▲	Included
Incidental Medical Malpractice Modified ▲	Included
Knowledge of Occurrence, Claim, Suit or Loss	Included
Liberalization Clause	Included
Limited Legal Expense For Innocent Insureds (N/A in NY) ▲	\$25,000 Occurrence/ \$25,000 Aggregate

## Schools General Liability Extension

Coverage	Limit
Limited Property Damage – Golf Ball Damage ▲	\$2,500
Medical Payments Amendments	Included
Any Insured Amendment	Included
Products Amendment	Included
Mental Anguish Amendment (N/A in NY)	Included
Newly Formed or Acquired Organizations	Included
Non-Accumulation of Limits (N/A in NY or WI)	Included
Non-Owned Aircraft	Included
Non-Owned Watercraft (under 60 feet)	Included
Not-For-Profit Organization Members as Additional Insureds	Included
Personal and Advertising Injury	
Discrimination Amendment (N/A in NY)	Included
Civil Rights Exclusion ▲	N/A
Religious Act(s) and Communication(s) ▲ (For faith based schools and religious institutions)	Included
Pollution – Exception For Classroom Activities ▲	\$50,000
Supplementary Payments Amended	Included
Bail Bonds	\$5,000
Loss of Earnings	\$1,000
Temporary Liquor Liability ▲	Included
Unintentional Failure To Disclose Hazards	Included
Waiver of Transfer of Rights of Recovery (subrogation)	Included
Waiver of Transfer of Rights of Recovery – Golfing Facility ▲	Included

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## Schools Auto Extension

Selective’s Schools market segment targets public and private schools grades K-12, including Montessori, faith-based, charter and vocational schools. We will also consider private secondary schools with dormitories and community colleges. We offer Property, General Liability, Automobile and School Board Legal Liability coverages that are tailored for public and private schools. Selective also offers a participating dividend plan\* to private schools.

The following forms are included:

- CA 7809 ElitePac<sup>®</sup> Commercial Automobile Extension
- CA 7811 ElitePac<sup>®</sup> Commercial Automobile Extension Schools ▲ (symbol indicates unique coverages)
- CA 7820 Schedule ElitePac<sup>®</sup> Commercial Automobile Extension Schools

Coverage	Limit
<b>Amendments To Section II - Liability Coverage</b>	
Newly Acquired Or Formed Organizations – qualify as named insured if majority owned with no similar insurance available	Included
Limited Liability Companies – members and managers are insureds while using an auto not owned or hired by named insured	Included
Employees As Insureds – while using an auto not owned or hired by named insured in named insured’s business	Included
Blanket Additional Insureds	Included
Expenses For Bail Bonds And Loss Of Earnings	
Bail Bonds	\$3,000 Per Accident
Loss Of Earnings	\$1,000 Per Day
Employee Indemnification and Employer’s Liability Amendment – exclusion does not apply to volunteer workers not entitled to Workers Compensation coverage	Included
Fellow Employee Coverage – the exclusion is deleted	Included
Care, Custody Or Control Amendment – exclusion does not apply to property owned by anyone other than an insured	\$1,000 Per Accident; \$500 Deductible Per Accident
Non-Ownership Extension – Educational Institutions – board member, elected official, student-teacher, authorized “volunteer” worker are insured while using an auto not owned or hired by named insured ▲	Included
Expected or Intended Injury Amendment – exclusion does not apply while an employee is performing their duties and within scope of employment, with certain conditions ▲	Included
<b>Amendments To Section III - Physical Damage Coverage</b>	
Towing And Labor	
Private Passenger Auto, Social Service Van or Bus, Light Truck Medium, Heavy and Extra Heavy Trucks	\$75 Per Tow \$150 Per Tow
Glass Breakage Deductible – waived when glass is repaired	Included

## Schools Auto Extension

Coverage	Limit
Additional Transportation Expenses	\$60 Per Day, \$1,800 Max
Hired Auto Physical Damage Coverage	\$75,000 Per "Loss"
Auto Loan/Lease Gap Coverage (N/A in New York)	Unpaid amount due on lease or loan, with exceptions
Personal Effects Coverage – for covered personal items in a covered auto at time of theft, no deductible applies	\$500 Per "Accident"
Airbag Coverage	Included
Expanded Audio, Visual and Data Electronic Equipment Coverage	Included
Comprehensive Deductible - Location Tracking Device - 50% reduction of deductible if tracking device aids in recovery of the auto	Included
Physical Damage Limit Of Insurance – removes restriction related to betterment and sublimit of \$1,000 for electronic equipment	Included
Newly Acquired Owned Autos - coverage equal to broadest coverage available to any covered auto on DEC, with certain conditions ▲	Lesser of \$1,000,000, ACV or cost to repair
Deductible Reimbursement - Employees or Volunteer Workers ▲	Lesser of \$1,000 or deductible
Hired Auto Physical Damage - Loss of Use Expenses – Schools ▲	\$50 Per Day up to a maximum of \$1,500
<b>Amendments To Section IV - Business Auto Conditions</b>	
Duties In The Event Of Accident, Claim, Suit Or Loss – this condition does not apply unless certain persons have knowledge of the accident, claim, suit or loss	Included
Waiver of Subrogation – blanket waiver when liability has been assumed under an insured contract	Included
Multiple Deductibles – if two or more covered autos involved in loss, only highest deductible applies	Included
Concealment, Misrepresentation Or Fraud – coverage not denied if named insured unintentionally fails to disclose existing hazard	Included
Policy Period, Coverage Territory – covers any type of covered auto hired for 30 days or less anywhere in the world	Included
Two Or More Coverage Forms Or Policies Issued By Us - Deductibles - only the highest applicable deductible will apply	Included
<b>Amendments To Section V – Definitions</b>	
Bodily Injury Including Mental Anguish (N/A in New York)	Included

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# INLAND MARINE PACS

## INLAND MARINE PAC COVERAGE LEVELS

For Electronic Information Systems, Contractors Equipment, Installation Floater and/or Miscellaneous Property

Coverage Level	CM 7197 IM Primary Pac	CM 7198 IM Plus Pac	CM 7199 IM PremierPac®
Blanket Limit	\$25,000 any single occurrence	\$60,000 any single occurrence	\$100,000 any single occurrence
Sublimits	\$5,000 any one item, other than employees' tools	\$15,000 any one item, other than employees' tools	\$25,000 any one item, other than employees' tools
	\$2,500 any one employee tool	\$2,500 any one employee tool	\$2,500 any one employee tool

You can apply the blanket limit of insurance among the three coverages listed above as you desire.  
Includes owned or like property of others in your care, custody or control (e.g., leased or rented property)

### COVERAGE EXTENSIONS:

Theft Rewards (Not Applicable in NY)	\$1,000	\$1,000	\$1,000
Vandalism Rewards (Not Applicable in NY)	\$1,000	\$1,000	\$1,000
Trees, Shrubs, Lawns, Plants	\$2,500 (\$500 per item)	\$2,500 (\$500 per item)	\$2,500 (\$500 per item)
Pollutant Clean Up & Removal	\$5,000	\$7,500	\$10,000
Rental Reimbursement	\$2,500	\$5,000	\$7,500
Valuable Papers – Cost of Research	\$2,500	\$5,000	\$7,500
Accounts Receivable	\$2,500	\$5,000	\$7,500
Lock Replacement	\$2,500 (\$50 deductible)	\$5,000 (\$50 deductible)	\$7,500 (\$50 deductible)
Emergency Removal	\$2,500	\$5,000	\$7,500
Debris Removal	\$5,000	\$7,500	\$10,000
Virus or Harmful Code	\$5,000 per occurrence \$15,000 per policy year	\$5,000 per occurrence \$15,000 per policy year	\$5,000 per occurrence \$15,000 per policy year
Replacement Cost	For contractors equipment purchased new within 5 years from date of loss and leased or rented contractors equipment if required in written lease or rental contract		
Deductible Waiver	For theft losses involving contractors equipment registered with the National Equipment Register (NER), or contractors equipment with an operational GPS or similar tracking device		
Deductible	\$500	\$500	\$1,000

# PRAESIDIUM

## PREVENTING ABUSE TOGETHER

### **PRAESIDIUM'S MISSION: TO HELP YOU PROTECT THOSE IN YOUR CARE FROM ABUSE AND TO HELP PRESERVE TRUST IN YOUR ORGANIZATION.**

An incident of abuse can be detrimental to an organization. That's why Selective Insurance has partnered with Praesidium to provide policy holders access to targeted solutions to help your organization strengthen its abuse prevention efforts.

#### **Selective insureds can access (at no additional cost):**

Praesidium Model Policies, Screening and Selection Toolkit, and Praesidium Armatus® online training. Insureds can also take advantage of discounted Background Screening services.

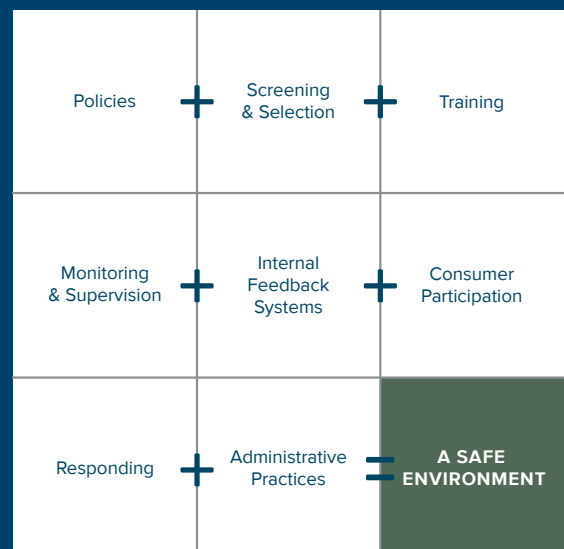
### **WHO IS PRAESIDIUM?**

Praesidium is a mission driven risk management firm that helps organizations reduce the risk of sexual abuse as well as the risk of false allegations. With over 25 years of experience and serving thousands of clients in the United States and 11 other countries, our dedicated team of researchers, psychologists, attorneys, social workers, and human resource professionals have analyzed thousands of cases of abuse in organizations and synthesized the latest scientific research.

*We know how abuse happens in organizations... and more importantly, how to prevent it.*

### **PRAESIDIUM'S SCIENTIFIC METHODOLOGY**

Using current research and root cause analysis, Praesidium developed its own abuse risk management model, The Praesidium Safety Equation.® Root-cause analysis of several thousand incidents of abuse across industries demonstrated that risks fell into eight organizational operations: Policies, Screening and Selection, Training, Monitoring and Supervision, Internal Feedback Systems, Consumer Participation, Responding, and Administrative Practices. By implementing best practices in each of these operations, Praesidium determined that risks could be reduced or eliminated.



# PRAESIDIUM

## FEATURED SERVICES

### Products and services offered to Selective Insureds:



#### MODEL POLICIES

Clear policies set the stage for safe environments by defining acceptable and unacceptable employee and volunteer conduct. Policies also facilitate effective monitoring and supervision by helping others to recognize and take action when they see policy violations. Praesidium can provide model policies, review and revise existing policies, or help your organization draft policies that address the protection of your consumers.



#### SCREENING AND SELECTION TOOLKIT

The most comprehensive package of its kind, Praesidium's Screening and Selection Tool Kit comes complete with everything your organization needs to effectively screen employees and caregivers, including more than 80 "red flag" indicators for identifying high-risk applicants and hundreds of examples of high- and low-risk applicant responses.



#### ARMATUS® LEARN TO PROTECT SYSTEM

Armatus® overcomes the limitations of traditional online training by including, an Action Plan to help learners apply what they're learning, a Discussion Guide to be used in a group setting, and a Coaching Playbook for supervisors, with each course. Your staff and volunteers get just the right training—at just the right time! And our on site instructor-led and train-the-trainer training is perfect for large groups or specialized content.



#### DISCOUNTED BACKGROUND SCREENING

Adopting a solid screening and selection process is your first line of defense in creating a safe environment. A thorough, consistent screening process may also discourage would-be offenders from targeting your organization. Failure to discover a known offender can affect those in your care and your organization's reputation, financial stability and trust within the community. Praesidium offers several standard and customizable criminal background screening packages plus other a la carte background screening services.

*Sign up for our complimentary tip of the month emails by going to:*

<http://bit.ly/2MQeLqg>

# PRAESIDIUM

## BACKGROUND SCREENING

### WHAT YOU DON'T KNOW CAN HURT THOSE IN YOUR CARE AND YOUR ORGANIZATION.

Adopting a solid screening and selection process is your first line of defense in creating a safe environment. A thorough, consistent screening process may also discourage would-be offenders from targeting your organization. Failure to discover a known offender can affect those in your care and the organization's reputation, financial stability, and trust within the community. Who you should screen can depend on many factors, such as if the person is a new full-time hire, a season hire, or even a current employee. In determining the types of checks to utilize, organizations should follow all state, federal, and licensing regulations and consider an individual's level of access. Level of access may be influenced by:

- **Frequency:** How frequently does the individual work around or interact with consumers? Is it a one-time event or every day?
- **Duration:** What is the duration of the individual's interactions? Is it a one-time, one-hour event or an entire summer?
- **Level of Supervision:** Are the individual's interactions always supervised by another adult or are they one-on-one with consumers?
- **Nature of the Relationship:** What is the nature of the relationship between the individual and the consumers in the program? Does the individual merely supervise an area during an event that has consumers, or are they getting to know individual consumers and families while counseling, tutoring, or providing personal care services?

### WHO IS PRAESIDIUM?

Praesidium is the national leader in abuse risk management. With more than two decades of experience, and serving thousands of clients, our dedicated team of researchers, psychologists, attorneys, social workers, and human resource professionals have analyzed thousands of cases of abuse in organizations and synthesized the latest scientific research. We know how abuse happens in organizations...and how to prevent it.

Selective Insurance has partnered with Praesidium to offer you discounted background screening services for your organization.

# PRAESIDIUM

## FOUR ELEMENTS FOR A THOROUGH BUT COST EFFECTIVE BACKGROUND CHECK:

- **Check Facts:** Aliases, DOBs, and address history all drive research and help to paint a complete picture.
- **Search Wide:** Multi State criminal and national sex offender databases will identify the unexpected.
- **Search Deep:** Targeted county level searches will give real-time information where records are most likely to be found.
- **Ask Questions:** References can provide insights on behavior and clues to non-criminal boundary issues.

## WHO SHOULD YOU SCREEN, AND HOW OFTEN?

- **New Hires/Volunteers:** A thorough, consistently applied background screening process at the time of hire is your first and best opportunity to identify the problem.
- **Seasonal Hires/Volunteers:** Seasonal staff present a unique risk because you don't see them for months at a time, but it's often not practical to complete a full new hire process each season. An annual check-in plan is key.
- **Re-Screening:** Conducting targeted checks on your full-time employees at least every 3 years helps you identify issues before they impact your organization.

## BACKGROUND SCREENING FOR SELECTIVE INSURED

Praesidium offers a selection of background screening packages plus a la carte services to empower your organization to conduct right-sized research. Praesidium's team can help contextualize the screening process as part of an overall culture of safety and discuss how screening works in hand with other abuse prevention efforts. Praesidium's team can also help you understand who to screen, how often, and the importance of re-screening.

In addition to Background Screening - you can now access **Praesidium's Armatus Learn to Protect System®** to add further training on abuse prevention. The Armatus Learn to Protect System® includes supporting tools that enhance both the short and long term effectiveness of the training experience and produce sustainable changes in employee and volunteer behavior. **Access to this system is free to Selective Insureds.**

	LOW ACCESS VOLUNTEERS	HIGH ACCESS VOLUNTEERS	EMPLOYEES	FINANCIAL ACCESS	A LA CARTE
	STARTING AT \$ 16	STARTING AT \$ 16	STARTING AT \$ 16	STARTING AT \$ 37	INDIVIDUAL COST PER SERVICE
Employment Credit (\$60 one-time set up fee required)				✓	\$10.00
Confidence Multi State Criminal & Sex Offender Database w/Alias**	✓	✓	✓	✓	\$9.00
7 Yr County Criminal Records Search: Current County of Residence*	✓	✓	✓	✓	\$7.00
Add'l Counties Added As Needed Based on 7yr Address History*		✓	✓	✓	\$5.50
County Civil Records Search (upper): 1 County*				✓	\$11.00
Motor Vehicle Records Search*					\$5.00
Employment Verification: 1 Position*					\$8.00
Education Verification: 1 Degree*					\$7.00
Personal Reference: 1 Reference					\$11.00
Professional Reference: 1 Reference					\$12.00
International Criminal Search 1 Jurisdiction*					\$50.00

\*3<sup>rd</sup> Party keeper fees may apply and will be passed on at cost when incurred.

\*\* Criminal records found in the Multi State database check are subject to verification at the source and additional costs may apply.

# PRAESIDIUM

## PROTECTING VULNERABLE POPULATIONS WITH TRAINING

### PRAESIDIUM'S ARMATUS® LEARN TO PROTECT SYSTEM

The Armatus® Learn to Protect System is far more than a check-the-box collection of e-learning courses. Instead, it is a comprehensive system based on learning theory and best practices in adult learning. It helps build and sustain a culture of safety in your organization, and it helps meet the training requirements included in Praesidium's Safety Equation®, a scientifically-based framework for preventing abuse in organizations.

At the core of the Armatus Learn to Protect System is a continually expanding library of engaging courses, each with clearly defined outcomes. In fact, volunteers, employees, and executives from a diverse range of organizations have completed more than one million Armatus courses! Courses include research-based content, highly interactive multimedia activities, application scenarios, and a content mastery quiz.

The Armatus Learn to Protect System includes supporting tools that enhance both the short and long term effectiveness of the training experience and produce sustainable changes in employee and volunteer behavior.

Armatus can also be streamlined with our background screening services to provide a one-stop solution for both training and your screening prevention efforts. These screening services are available at a discount to Selective Insureds.



Action Plans are printed and used with the online course. Action Plans summarize the key learning points and prompt learners to take notes throughout the course. They provide a great reference after the course.



Coaching Playbooks provide supervisors a high-level summary of the course, including learning objectives and key learning points. The Coaching Playbooks give supervisors practical steps they can take to reinforce the learning.



Discussion Guides are developed for small group and classroom discussions. A facilitator is able to reinforce important content and remind learners of what they learned in the online course.

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### COMPLIMENTARY ARMATUS ACCESS FOR SELECTIVE INSURED

Selective Insurance has partnered with Praesidium to provide policyholders access to targeted solutions to help your organization strengthen its abuse prevention efforts.

Selective insureds can access (at no additional cost) Praesidium's Model Policies, the Praesidium Screening and Selection Toolkit, and online training. Insureds can also take advantage of discounted Background Screening.

Visit [selective.com/praesidium](https://selective.com/praesidium) to access your complimentary Praesidium resources.

**CYBER LIABILITY AND DATA BREACH RESPONSE  
INSURANCE APPLICATION**

**CLAIMS MADE POLICY FORM**

**ALL QUESTIONS MUST BE COMPLETED IN ORDER TO REVIEW FOR QUOTATION. THIS POLICY IS NOT AN AUTOMATIC RENEWAL. AN APPLICATION MUST BE SUBMITTED PRIOR TO THE EXPIRATION DATE OF THIS POLICY.**

Today's Date:	
Requested Effective date for coverage:	
Named Insured:	
Mailing Address:	
Website Address(es):	
Breach Response Contact1: Telephone No: E-Mail Address:	
Description of Operations:	

Insured's Gross Sales, Total Operating Expenditures or Enrollment (for schools) Most Recent 12 months:	
Previous Year:	
Estimated Next Year:	

**A. Coverage**

<b>Policy Annual Aggregate Limit Requested:</b>	
\$50,000*	<input type="checkbox"/>
\$100,000	<input type="checkbox"/>
\$250,000	<input type="checkbox"/>
\$500,000	<input type="checkbox"/>
\$1,000,000	<input type="checkbox"/>
Other:	<input type="checkbox"/>

\*Not available in New Hampshire

1 The employee of the Applicant that is designated to manage a response, including customer notification, in response to a data breach event.

**Optional Coverages:** (Not available with \$50,000 Policy Aggregate Limit)

Consequential Reputational Loss	<input type="checkbox"/>
Telephone Fraud	<input type="checkbox"/>
Criminal Reward	<input type="checkbox"/>
Increased Sublimits*	<input type="checkbox"/>

\* Not available with Policy Aggregate Limit > \$1,000,000)

Retroactive Date:

If prior to the effective date above (earlier Retro Date), complete the following:

**PRIOR ACTS COVERAGE WARRANTY (fill out if requesting earlier Retroactive Date):**

- a. Attach copy of expiring policy declarations confirming continuous coverage back to requested retro date.
- b. Are you or any other insured aware of any facts, circumstances, situations, events, or acts that reasonably could give rise to a claim against them under the insurance for which you are applying?  
 Yes  No  If yes, please attach details of each matter.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

All of the information above is true and correct to the best of my knowledge. Any and all acts, incidents, and/or circumstances of which I am aware, and might reasonably be expected to result in a claim have been disclosed here.

Signature of Applicant: \_\_\_\_\_  
 (Signature required if requesting earlier retroactive date)

Date: \_\_\_\_\_

**B. Eligibility Questions**

	YES	NO	N/A	Explanation (if necessary)
1. Is anti-virus software installed and regularly updated on all computer systems?	<input type="checkbox"/>	<input type="checkbox"/>		
2. Are firewalls installed and configured?	<input type="checkbox"/>	<input type="checkbox"/>		
3. What format does the Applicant utilize for back-up and storage of computer system data? . None . Tape or Other Media . Online Back-up Service . Other (Please describe):	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
4. Are tapes or other portable media containing back-up materials encrypted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Are tapes or other portable media stored offsite? If stored offsite: a. Is secured transportation used? b. Are transportation logs maintained? c. Are secured storage facilities used? If not stored offsite, please describe physical security controls for onsite Storage.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

	YES	NO	N/A	Explanation (if necessary)
6. Does the Applicant have and enforce policies concerning the encryption of internal and external communication? a. Are users able to store data to the hard drive of portable computers or portable media devices such as USB drives? b. Does the Applicant encrypt data stored on laptop computers and portable media? c. Please describe any additional controls the Applicant has implemented to protect data stored on portable devices:	<input type="checkbox"/>	<input type="checkbox"/>		
7. Does the insured have a website or social media presence? If Yes, does it contain any of the following? a. Content directed to children b. Entertainment/gaming c. Product or service comparisons d. Recommendations on health or financial issues e. Political or social advocacy	<input type="checkbox"/>	<input type="checkbox"/>		
8. Does the insured share or sell any personal information of its customers or visitors to its website to 3rd parties?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Does the insured obtain permission before using or publishing content of others on its website?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Does the insured have a written privacy policy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Are "Terms of Usage" including a privacy policy or terms of usage and a privacy policy posted on the insured's website?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Are yearly audits of systems and information systems security procedures performed?	<input type="checkbox"/>	<input type="checkbox"/>		
13. Is there a disaster recovery or crisis management plan in place that includes recovery following a cyber event?	<input type="checkbox"/>	<input type="checkbox"/>		
14. Is there a formal employee internet usage policy in place?	<input type="checkbox"/>	<input type="checkbox"/>		
15. Is Applicant a municipality?  If Yes, does it contain any of the following operations? a. Hospital/Healthcare facility b. Nursing/Assisted Living facility c. Foster Care/Adoption	<input type="checkbox"/>	<input type="checkbox"/>		

**C. Website Profile** – what category best describes the insured’s web site

<b>Insured’s website</b>	<b>Select one</b>	<b>Explain (if necessary)</b>
No website or informational / passive website; Information web site characteristics: <ul style="list-style-type: none"> <li>• No collection of data from website visitors</li> <li>• no on-line transactions (sales, donations)</li> <li>• no chat rooms, blogs or bulletin boards</li> <li>• only non-passive feature is the ability to communicate via email link</li> </ul>	<input type="checkbox"/>	
Website: <ul style="list-style-type: none"> <li>• collects data from visitors but not information protected by privacy laws;</li> <li>• website is the venue for processing transactions (purchases, donations) but no personal, confidential or proprietary information is retained after the transaction</li> <li>• No chat rooms, blogs or message boards</li> </ul>	<input type="checkbox"/>	
Website has any of the following characteristics: <ul style="list-style-type: none"> <li>• Chat rooms, blogs or message boards;</li> <li>• On-line transactions exceeding 35% of sales</li> <li>• Retains personal information after transaction is processed;</li> <li>• Retains personal information on visitors</li> </ul>	<input type="checkbox"/>	

**D. Historical Information:**

In the last 3 years, have any of the following incidents taken place?

	<b>YES</b>	<b>NO</b>	<b>If yes, describe</b>
1. A breach of personal, confidential or proprietary data in the insured’s care, custody or control?	<input type="checkbox"/>	<input type="checkbox"/>	
2. Actual or threatened legal action because of content on the insured’s web site or social media?	<input type="checkbox"/>	<input type="checkbox"/>	
3. The transmission of malware (virus, worm, Trojan horse, spyware, etc.) from the insured’s computer systems, network or website to another party resulting in a 3rd party loss or claim?	<input type="checkbox"/>	<input type="checkbox"/>	
4. Any other loss reported or paid on a policy purchased to cover 1st party or 3rd cyber or privacy loss?	<input type="checkbox"/>	<input type="checkbox"/>	
5. Experienced an actual or attempted extortion demand with respect to its computer systems?	<input type="checkbox"/>	<input type="checkbox"/>	

## **FRAUD WARNING**

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any false information or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act which is a crime.

### **APPLICABLE IN AL, AR, DC, LA, MD, NM, RI and WV:**

Any person who knowingly (or willingly)\* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)\* presents false information in an application for insurance, is guilty of a crime and may be subject to fines and confinement in prison. \*Applies in MD only.

### **APPLICABLE IN CO:**

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

### **APPLICABLE IN FL and OK:**

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information, is guilty of a felony (of the third degree)\*.

\* Applies in FL only.

### **APPLICABLE IN KS:**

Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written electronic, electronic impulse, facsimile, magnetic, oral, or telephonic communication or statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.

### **APPLICABLE IN KY and OH:**

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

### **APPLICABLE IN ME, TN, VA and WA:**

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties (may)\* include imprisonment, fines, and denial of insurance benefits. \*Applies in ME only.

### **APPLICABLE IN NJ:**

Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

### **APPLICABLE IN OR:**

Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

### **APPLICABLE IN PA:**

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

**This Application and any supplements thereto shall be incorporated into any policy that may be issued and the Underwriters are relying on the truth of the statements set forth herein in making a determination to issue any policy.**

**The signing of this Application does not bind the undersigned to purchase the insurance, nor does the review of this Application bind the Insurance Company to issue a policy.**

**The undersigned represents to the best of his or her belief and knowledge, after reasonable inquiry and due diligence, the statements set forth in this application and any supplements thereto are true and correct.**

**The undersigned further declares that any claim, incident or event taking place prior to the effective date of the insurance applied for which may render inaccurate, untrue, or incomplete any statement made will immediately be reported in writing to the insurer. As a result, the insured may withdraw or modify any outstanding quotations and/or authorization or agreement to bind the insurance.**

The official designated to receive any and all notices from the Insurer to the Insured concerning any policy issued as a result of this application shall be (please type or print):

Name:

Title:

The authorized signer of this application represents to the best of his/her knowledge that statements set forth herein are true; that no fact, circumstances, or situation indicating the probability of a claim or action now known to you, your officers, managers, partners, directors or employees has not been declared; and it is agreed by all concerned that any intentional omission of such information shall exclude any such claim and signing of this application does not bind the signer to purchase the insurance, but it is agreed this form shall be the basis of the contract should a policy be issued.

**APPLICABLE IN NY:**

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

\_\_\_\_\_  
Authorized signatory for insured

\_\_\_\_\_  
Date

Title

( )

Phone Number

Insurance Agent

Date

# HERE'S WHAT YOU CAN EXPECT AS A BUSINESS CUSTOMER WITH SELECTIVE.

## PRIOR TO POLICY ISSUED



Top Quality Agent



Safety Management Survey<sup>1</sup>

- Comprehensive Risk Advice
- Help Identify Unknown Risks
- A local team from Selective working in partnership with your agent

## AS A SELECTIVE CUSTOMER



Welcome Email



Digital Policy



Mobile App & Web Portal

- Sign up for [Online Access](#)
- View Policies, Bills, Auto ID Cards<sup>2</sup>
- Manage Account 24/7



Safety Management Evaluation



Safety Management Service Visit



License Verification with Atlas Certified

- Review Risk Mitigation Efforts
- [Online Tools & Videos](#)
- Validate Credentials and Increase Compliance



Electronic Billing Alerts



Automatic Payment Options

- Via Email, Text<sup>3</sup>, [Mobile App](#)<sup>3</sup>
- Checking/Savings Account, Credit/Debit Cards
- Various Flexible Payment Plans
- Pay as You Go<sup>4</sup>



Extended Hours Contact Center



Instant Customer Recognition

- Pay via Phone 24/7
- Communication via Phone, Email, Chat



Selective<sup>®</sup> Drive

- [Selective<sup>®</sup> Drive Mobile App](#)
- Reduce Distracted/Careless Driving
- Track Driver Locations
- Fleet Route Optimization



Customer Preferences



Proactive Messages



Recall Alerts

- Choice of Communication Channel
- Billing, Claims & Policy Notifications
- Customized Weather Alerts
- Product & Auto Recalls



Accident Claim



Upload Claim Photos with EZ Write



48-Hour Payment with SWIFTClaim<sup>SM</sup>

- Multiple Claim Reporting Options
- Unlimited Photo Upload
- Payment Within Two Days<sup>5</sup>



Proof of Insurance via Mobile App

- Instant Access to Proof of Insurance
- Locate Key Service Providers



Automatic Renewal Options

- Convenient Automatic Renewals
- Multi-Line Product Discount Opportunities

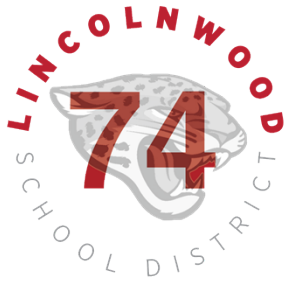
<sup>1</sup> Available for selected Commercial Lines Customers

<sup>2</sup> Where Allowable by State

<sup>3</sup> Coming in 2019

<sup>4</sup> With PaySync<sup>®</sup> Products

<sup>5</sup> Only for SWIFTClaim<sup>SM</sup>



## Executive Summary Finance Committee Meeting

DATE: January 21, 2021

TOPIC: Additional Cyber Liability Coverage Offering from CLIC

PREPARED BY: Courtney Whited

### **Recommended for:**

- Action
- Discussion
- Information

### **Purpose/Background:**

SD74 currently has \$2,000,000 in Cyber Liability coverage through the CLIC program.

Additional Cyber Liability Coverage, as described in the attached document, is now offered by CLIC.

\$1,000,000 Excess Cyber Liability Limit – \$686

\$3,000,000 Excess Cyber Liability Limit – \$2,680

To bind coverage on either of the above Excess Cyber Liability options for your district you will just need to complete the last page of the Proposal Letter you received in a prior email and return it to: [cliteam@ajg.com](mailto:cliteam@ajg.com).

### **Fiscal Impact:**

\$0 if no additional coverage is requested

\$686 for an additional \$1,000,000 of Cyber Liability Coverage

\$2,680 for an additional \$3,000,000 of Cyber Liability Coverage

### **Recommendation:**

This is for informational purposes. The Administration requests direction from the Finance Committee on whether or not to purchase additional Cyber Liability coverage for the District.



Insurance | Risk Management | Consulting

December 18, 2020

CLIC Member District

Re: Excess \$1,000,000 OR \$3,000,000 in Cyber Liability Limits  
Policy # B1262F11688020  
Policy Effective: 12/31/2020 to 7/1/2021

Dear CLIC Member,

Thank you for the opportunity to provide your district with a quotation for an additional \$1,000,000 or \$3,000,000 in Cyber Liability Limits.

We are not aware of any changes in your exposures to loss, nor are we aware of any changes in your business operations that would necessitate additional coverage options. Please notify us immediately if you are planning any new business operations.

We would like to outline the following notable points for your consideration:

- Any entity not named in this proposal, may not be an insured entity. This may include affiliates, subsidiaries, LLC's, partnerships and joint ventures.
- The insurance carrier is Lloyd's of London (Pfarmigan Underwriting).
- The premium you will receive in a separate email is based upon the district's student count and reported operating budget. This is not subject to annual audit.
- Defense limitations are within policy limit (expenses erode policy limit).
- Significant policy exclusions include but are not limited to the following:
  - Fraudulent or Criminal Acts, Errors, or Omissions of the Insured Organization (with Final Adjudication)
  - Bodily Injury/Property Damage
  - Employment-Related Claims
- Immediately report all claims:  
Phelps Dunbar LLP  
Canal Place  
365 Canal Street, Suite 2000  
New Orleans, LA 70130, USA  
cyber.notice@phelps.com  
Via The 24/7 toll-free Phelps Cyber Claim Hotline – (833) 229-1647

**To bind this policy, please refer to the 'Client Authorization to Bind Coverage' page attached.**

1. Note any changes you desire to be made.
2. Date and sign.
3. Return prior to the effective date of coverage.

We appreciate your business and look forward to working with you in the coming year. Please contact us if you have any questions.



Insurance | Risk Management | Consulting

Sincerely,

Michael J. McHugh  
Area Senior Executive Vice President

Byron Given, CLCS  
Area Vice President



Insurance | Risk Management | Consulting

### Compensation Disclosure Schedule

Coverage(s)	Carrier Name(s)	Wholesaler, MGA, or Intermediary Name 1	Estimated Annual Premium 2	Comm % or Fee 3	Gallagher U.S. owned Wholesaler, MGA or Intermediary %
Cyber Liability	Underwriters at Lloyd's London (Ptarmigan Underwriting)	Gallagher London	See separate Email	15.5%	9.5%

1. We were able to obtain more advantageous terms and conditions for you through an intermediary/wholesaler.
2. If the premium is shown as an indication: The premium indicated is an estimate provided by the market. The actual premium and acceptance of the coverage requested will be determined by the market after a thorough review of the completed application.
  - \* A verbal quotation was received from this carrier. We are awaiting a quotation in writing.
3. The commission rate is a percentage of annual premium excluding taxes & fees.
  - \* Gallagher is receiving 15.5% commission on this policy.



Insurance | Risk Management | Consulting

## Important Disclosures

**IMPORTANT:** The proposal and/or any executive summaries outline certain terms and conditions of the insurance proposed by the insurers, based on the information provided by your company. The insurance policies themselves must be read to fully understand the terms, coverages, exclusions, limitations and/or conditions of the actual policy contract of insurance. Policy forms will be made available upon request. We make no warranties with respect to policy limits or coverage considerations of the carrier.

**TRIA/TRIPRA Disclaimer** – If this proposal contains options to purchase TRIA/TRIPRA coverage, the proposed TRIA/TRIPRA program may not cover all terrorism losses. While the amendments to TRIA eliminated the distinction between foreign and domestic acts of terrorism, a number of lines of coverage excluded under the amendments passed in 2005 remain excluded including commercial automobile, burglary and theft insurance; surety insurance, farm owners multiple perils and professional liability (although directors and officers liability is specifically included). If such excluded coverages are required, we recommend that you consider purchasing a separate terrorism policy. Please note that a separate terrorism policy for these excluded coverages may be necessary to satisfy loan covenants or other contractual obligations. TRIPRA includes a \$100 billion cap on insurers' aggregate liability.

The TRIPRA program increases the amount needed in total losses by \$20 million each calendar year before the TRIPRA program responds from the 2015 trigger of \$100 million to \$200 million by the year 2020.

TRIPRA is set to expire on December 31, 2020. There is no certainty of extension, thus the coverage provided by your insurers may or may not extend beyond December 31, 2020. In the event you have loan covenants or other contractual obligations requiring that TRIA/TRIPRA be maintained throughout the duration of your policy period, we recommend that a separate "Stand Alone" terrorism policy be purchased to satisfy those obligations.



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## Compensation Disclosure

1. Gallagher Companies are primarily compensated from the usual and customary commissions, fees or, where permitted, a combination of both, for brokerage and servicing of insurance policies, annuity contracts, guarantee contracts and surety bonds (collectively “insurance coverages”) handled for a client’s account, which may vary based on market conditions and the insurance product placed for the client.
2. In placing, renewing, consulting on or servicing your insurance coverages, Gallagher companies may participate in contingent and supplemental commission arrangements with intermediaries and insurance companies that provide for additional compensation if certain underwriting, profitability, volume or retention goals are achieved. Such goals are typically based on the total amount of certain insurance coverages placed by Gallagher with the insurance company, not on an individual policy basis. As a result, Gallagher may be considered to have an incentive to place your insurance coverages with a particular insurance company. If you do not wish to have your commercial insurance placement included in consideration for additional compensation, contact your producer or service team for an Opt-out form.
3. Gallagher Companies may receive investment income on fiduciary funds temporarily held by them, or from obtaining or generating premium finance quotes, unless prohibited by law.
4. Gallagher Companies may also access or have an ownership interest in other facilities, including wholesalers, reinsurance intermediaries, captive managers, underwriting managers and others that act as intermediaries for both Gallagher and other brokers in the insurance marketplace some of which may earn and retain customary brokerage commission and fees for their work.

If you have specific questions about any compensation received by Gallagher and its affiliates in relation to your insurance placements, please contact your Gallagher representative for more details.

In the event you wish to register a formal complaint regarding compensation Gallagher receives from insurers or third-parties, please contact Gallagher via e-mail at [Compensation\\_Complaints@ajg.com](mailto:Compensation_Complaints@ajg.com) or by regular mail at:

Chief Compliance Officer  
Gallagher Global Brokerage  
Arthur J. Gallagher & Co.  
2850 Golf Rd.  
Rolling Meadows, IL 60008



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### CARRIER RATINGS AND ADMITTED STATUS

Proposed Insurance Companies	A.M. Best's Rating & Financial Size Category *	Admitted/Non-Admitted **
Lloyd's of London (Ptarmigan Underwriting)	A XV	Admitted

\*Gallagher companies use A.M. Best rated insurers and the rating listed above was verified on the date the proposal document was created.

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A Best's Financial Strength Rating is an independent opinion of an insurer's financial strength and ability to meet its ongoing insurance policy and contract obligations. It is not a warranty of a company's financial strength and ability to meet its obligations to policyholders. Best's Credit Ratings™ are under continuous review and subject to change and/or affirmation. For the latest Best's Credit Ratings™ and Guide to Best's Credit Ratings, visit the A.M. Best website at <http://www.ambest.com/ratings>

\*\*If coverage placed with a non-admitted carrier, it is doing business in the state as a surplus lines or non-admitted carrier, and is neither subject to the same regulations as an admitted carrier nor do they participate in any state insurance guarantee fund.

Gallagher companies make no representations and warranties concerning the solvency of any carrier, nor does it make any representation or warranty concerning the rating of the carrier which may change.

**COLLECTIVE LIABILITY INSURANCE COOPERATIVE  
CLIENT AUTHORIZATION TO BIND COVERAGE**

After careful consideration of Gallagher’s proposal dated **December 18, 2020**, we accept the following coverage(s). Please check the desired coverage(s) and note any coverage amendments below:

**POLICY OPTIONS:**

YES	NO	OPTION DESCRIPTION
		<b>Bind All Policies As Shown Below:</b>
		Option #1 - Additional \$1,000,000 in Cyber Liability Limit
		Option #2 - Additional \$3,000,000 in Cyber Liability Limit
		<b>Bind TRIA Terrorism Coverage As Quoted Except For the Following Policies</b>
		<b>Provide Quotations or Additional Information on the following Coverage Considerations</b>

The above coverage may not necessarily represent the entirety of available insurance products. If you are interested in pursuing additional coverages other than those addressed in the coverage considerations included in this proposal, please list below:

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**EXPOSURES AND VALUES**

We confirm the payroll, values, schedules, and other data contained in the proposal, and submitted to the underwriters, are compiled from our records and we acknowledge it is our responsibility to see that they are maintained accurately. If no updates were provided to Gallagher, the values, exposures and operations used were based on the expiring policies.

Gallagher’s liability to Client arising from any acts or omissions of Gallagher shall not exceed \$20 million in the aggregate. Gallagher shall only be liable for actual damages incurred by Client, and shall not be liable for any indirect, consequential or punitive damages or attorneys’ fees. No claim or cause of action, regardless of form (tort, contract, statutory, or otherwise), arising out of, relating to or in any way connected with this Agreement or any Services provided hereunder may be brought by either party any later than two (2) years after the accrual of such claim or cause of action.

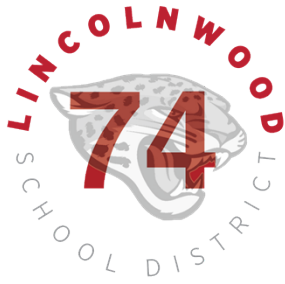
Gallagher has established security controls to protect Client confidential information from unauthorized use or disclosure. For additional information, please review Gallagher’s Privacy Policy located at <https://www.ajg.com/privacy-policy/>

I have read, understand and agree that the above-information is correct and has been disclosed to us prior to authorizing Gallagher to bind coverage and/or provide services to us.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
District Name

\_\_\_\_\_  
Dated



## Executive Summary Finance Committee Meeting

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DATE: January 21, 2021

TOPIC: Post-Issuance Tax Compliance Reports

PREPARED BY: Courtney Whited

**Recommended for:**

- Action
- Discussion
- Information

**Purpose/Background:**

Annually, the Compliance Officer of Lincolnwood School District 74 must provide the Board of Education with certain obligations under the Federal Tax and Securities laws related to the bonds. The Compliance Officer has reviewed the bond documents. The documents include Post-Issuance Compliance Checklists and the attached Post-Issuance Tax Compliance Reports. The District currently has three outstanding bond issues that require annual review. The bonds were issued in late 2015, early 2016, and mid-2018.

**Fiscal Impact:**

There is no financial impact associated with providing these documents to the Board of Education.

**Recommendation:**

It is the Administrative recommendation that the Finance Committee concurs to recommend to the Board of Education to accept the findings contained in the Post-Issuance Tax Compliance Reports. Based upon the support of the Finance Committee, the Post-Issuance Tax Compliance Report will be placed on the Board of Education agenda for approval at the February 4, 2021 meeting.

POST-ISSUANCE TAX COMPLIANCE REPORT

SCHOOL DISTRICT NUMBER 74, COOK COUNTY, ILLINOIS (THE "DISTRICT")  
\$8,505,000 GENERAL OBLIGATION LIMITED TAX SCHOOL BONDS,  
SERIES 2015 (THE "BONDS")

POST ISSUANCE COMPLIANCE MATTERS

STATE OF ILLINOIS     )  
                                  ) SS  
COUNTY OF COOK     )

**POST-ISSUANCE TAX COMPLIANCE REPORT**

To: Board of Education of School District Number 74, Cook County, Illinois

Pursuant to my responsibilities as the Compliance Officer as set forth in a Bond Record Keeping Policy (the "*Policy*") adopted by the Board of Education (the "*Board*") of School District Number 74, Cook County, Illinois (the "*District*"), on the 9th day of December, 2015, I have prepared a report reviewing the District's contracts and records to determine whether the Tax Advantaged Obligations (as defined in the Policy), comply with the applicable federal tax requirements. In accordance with the proceedings and agreements under which the Tax Advantaged Obligations were issued, the District has covenanted generally to take all action necessary to comply with the applicable federal tax rules and regulations relating to the Tax Advantaged Obligations, including covenants necessary to preserve the excludability of interest on the Tax Advantaged Obligations from gross income for federal income taxation purposes. The following sets forth a summary demonstrating the District's compliance with such covenants and expectations.

(a) *Records*. I have in my possession all of the records required under the Policy.

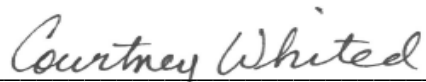
(b) *Arbitrage Rebate Liability*. I have reviewed the agreements of the District with respect to each issue of the Tax Advantaged Obligations. At this time, the District does not have any rebate liability to the U.S. Treasury.

(c) *Contract Review.* I have reviewed copies of all contracts and agreements of the District, including any leases, with respect to the use of any property owned by the District and acquired, constructed or otherwise financed or refinanced with the proceeds of the Tax Advantaged Obligations and other records. At this time, each issue of the Tax Advantaged Obligations complies with the federal tax requirements applicable to such issue, including restrictions on private business use, private payments and private loans.

(d) *IRS Examinations or Inquiries.* The Internal Revenue Service (the “IRS”) has not commenced an examination of any issue of the Tax Advantaged Obligations. The IRS has not requested a response to a compliance check, questionnaire or other inquiry.

Based upon the foregoing, I believe that the District is currently in compliance with the applicable tax law requirements and no further action is necessary at this time. This report will be entered into the records of the District and made available to all members of the Board at the next regular meeting thereof.

Respectfully submitted this 4<sup>th</sup> day of February, 2021.

By   
Compliance Officer

POST-ISSUANCE TAX COMPLIANCE REPORT

SCHOOL DISTRICT 74, COOK COUNTY, ILLINOIS (THE "DISTRICT")  
\$4,235,000 GENERAL OBLIGATION LIMITED TAX SCHOOL BONDS,  
SERIES 2016 (THE "BONDS")

POST ISSUANCE COMPLIANCE MATTERS

STATE OF ILLINOIS     )  
                                  ) SS  
COUNTY OF COOK     )

**POST-ISSUANCE TAX COMPLIANCE REPORT**

To: Board of Education of School District Number 74, Cook County, Illinois

Pursuant to my responsibilities as the Compliance Officer as set forth in a Bond Record Keeping Policy (the "Policy") adopted by the Board of Education (the "Board") of School District Number 74, Cook County, Illinois (the "District"), on the 9th day of December, 2015, I have prepared a report reviewing the District's contracts and records to determine whether the Tax Advantaged Obligations (as defined in the Policy), comply with the applicable federal tax requirements. In accordance with the proceedings and agreements under which the Tax Advantaged Obligations were issued, the District has covenanted generally to take all action necessary to comply with the applicable federal tax rules and regulations relating to the Tax Advantaged Obligations, including covenants necessary to preserve the excludability of interest on the Tax Advantaged Obligations from gross income for federal income taxation purposes. The following sets forth a summary demonstrating the District's compliance with such covenants and expectations.

(a) *Records.* I have in my possession all of the records required under the Policy.

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(c) *Contract Review.* I have reviewed copies of all contracts and agreements of the District, including any leases, with respect to the use of any property owned by the District and acquired, constructed or otherwise financed or refinanced with the proceeds of the Tax Advantaged Obligations and other records. At this time, each issue of the Tax Advantaged Obligations complies with the federal tax requirements applicable to such issue, including restrictions on private business use, private payments and private loans.

(d) *IRS Examinations or Inquiries.* The Internal Revenue Service (the “IRS”) has not commenced an examination of any issue of the Tax Advantaged Obligations. The IRS has not requested a response to a compliance check, questionnaire or other inquiry.

Based upon the foregoing, I believe that the District is currently in compliance with the applicable tax law requirements and no further action is necessary at this time. This report will be entered into the records of the District and made available to all members of the Board at the next regular meeting thereof.

Respectfully submitted this 4<sup>th</sup> day of February, 2021.

By Courtney Whited  
Compliance Officer

POST-ISSUANCE TAX COMPLIANCE REPORT

SCHOOL DISTRICT NUMBER 74, COOK COUNTY, ILLINOIS (THE "DISTRICT")  
\$5,910,000 GENERAL OBLIGATION LIMITED TAX SCHOOL BONDS,  
SERIES 2018 (THE "BONDS")

POST ISSUANCE COMPLIANCE MATTERS

STATE OF ILLINOIS     )  
                                  ) SS  
COUNTY OF COOK     )

**POST-ISSUANCE TAX COMPLIANCE REPORT**

To: Board of Education of School District Number 74, Cook County, Illinois

Pursuant to my responsibilities as the Compliance Officer as set forth in a Bond Record Keeping Policy (the "*Policy*") adopted by the Board of Education (the "*Board*") of School District Number 74, Cook County, Illinois (the "*District*"), on the 9th day of December, 2015, I have prepared a report reviewing the District's contracts and records to determine whether the Tax Advantaged Obligations (as defined in the Policy), comply with the applicable federal tax requirements. In accordance with the proceedings and agreements under which the Tax Advantaged Obligations were issued, the District has covenanted generally to take all action necessary to comply with the applicable federal tax rules and regulations relating to the Tax Advantaged Obligations, including covenants necessary to preserve the excludability of interest on the Tax Advantaged Obligations from gross income for federal income taxation purposes. The following sets forth a summary demonstrating the District's compliance with such covenants and expectations.

(a) *Records*. I have in my possession all of the records required under the Policy.

(b) *Arbitrage Rebate Liability*. I have reviewed the agreements of the District with respect to each issue of the Tax Advantaged Obligations. At this time, the District does not have any rebate liability to the U.S. Treasury.

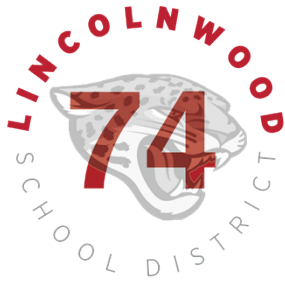
(c) *Contract Review.* I have reviewed copies of all contracts and agreements of the District, including any leases, with respect to the use of any property owned by the District and acquired, constructed or otherwise financed or refinanced with the proceeds of the Tax Advantaged Obligations and other records. At this time, each issue of the Tax Advantaged Obligations complies with the federal tax requirements applicable to such issue, including restrictions on private business use, private payments and private loans.

(d) *IRS Examinations or Inquiries.* The Internal Revenue Service (the “IRS”) has not commenced an examination of any issue of the Tax Advantaged Obligations. The IRS has not requested a response to a compliance check, questionnaire or other inquiry.

Based upon the foregoing, I believe that the District is currently in compliance with the applicable tax law requirements and no further action is necessary at this time. This report will be entered into the records of the District and made available to all members of the Board at the next regular meeting thereof.

Respectfully submitted this 4<sup>th</sup> day of February 2021.

By Courtney Whited  
Compliance Officer



Executive Summary  
Finance Committee Meeting

DATE: January 21, 2021

TOPIC: Proposed 2021-22 School Fees Draft

PREPARED BY: Courtney Whited

**Recommended for:**

- Action
- Discussion
- Information

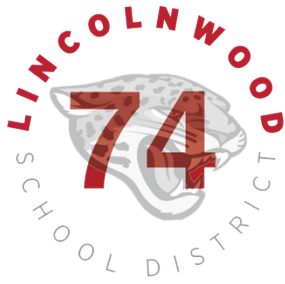
**Purpose/Background:**

To recommend no changes to the School Fee schedule for the 2021-22 fiscal year.

Description	2019-20 Fees	2020-21 Fees	2021-22 Proposed
K-5 Registration	\$145	\$160	\$160
Gr. 6-8 Registration	\$245	\$260	\$260
Registration for Child #4 and Beyond in Family	\$0	\$0	\$0
Pre-K Tuition	\$3,000	\$3,200	\$3,200
Bus Fees	\$0	\$0	\$0
Lunch Program	\$2.50 per meal	\$2.50 per meal	\$2.50 per meal

**Recommendation:**

It is the Administrative recommendation that the Finance Committee concurs to recommend to the Board of Education to approve the 2021-22 School Fee Schedule, as presented.



## Executive Summary Finance Committee Meeting

DATE: January 21, 2021

TOPIC: Children's Care and Development Center (CCDC) Lease Agreement

PREPARED BY: Courtney Whited

### **Recommended for:**

- Action
- Discussion
- Information

### **Purpose/Background:**

The two-year extension on the Children's Care and Development Center (CCDC) five-year lease agreement ends on June 30, 2021. On October 27, 2020, CCDC submitted a letter to the District expressing an interest to discuss a new lease and its terms. The District values its partnership with CCDC. This tenant has exclusive access to classrooms 404, 405, 406, 407, 409 and the office/lounge in the western wing of Todd Hall. Other areas of the building are occupied by CCDC on a non-exclusive basis that does not interfere with the Landlord's space requirements. Legal counsel is in possession of the previous contract in order to develop a new five-year lease contract with the option to extend for two additional years. The following page contains a draft of the potential payout schedule.

**Fiscal Impact:**

If the two parties were to continue the established model of a 5-year term including a 2-year extension with 3.0% increases, the first table would indicate the fiscal impact:

<b>New Lease</b>	<b>Annual Rate</b>	<b>% Increase</b>
<b>2027-28</b>	\$99,106.34	3.0%
<b>2026-27</b>	\$96,219.75	3.0%
<b>2025-26</b>	\$93,417.23	3.0%
<b>2024-25</b>	\$90,696.34	3.0%
<b>2023-24</b>	\$88,054.70	3.0%
<b>2022-23</b>	\$85,490.00	3.0%
<b>2021-22</b>	\$83,017.00	Initial 5-Yr
<b>\$636,001 total for 7-year duration</b>		

<b>Original</b>	<b>Annual Rate</b>	<b>% Increase</b>
<b>2020-21</b>	\$80,598.53	3.0%
<b>2019-20</b>	\$78,251.00	3.0%
<b>2018-19</b>	\$75,971.84	3.0%
<b>2017-18</b>	\$73,759.07	3.0%
<b>2016-17</b>	\$71,610.75	3.0%
<b>2015-16</b>	\$69,525.00	3.0%
<b>2014-15</b>	\$67,500.00	Initial 5-Yr
<b>\$517,216 total for 7-year duration</b>		

**Recommendation:**

It is the Administrative recommendation that the Finance Committee concurs to recommend to the Board of Education to enter into a new 5-year lease term at the initial annual rate of \$83,017 with 3.0% increases each fiscal year, and include an option to execute a 2-year extension with 3.0% increases.

**LEASE AGREEMENT BY AND BETWEEN  
LINCOLNWOOD SCHOOL DISTRICT NO 74, COOK COUNTY, ILLINOIS  
AND CHILDREN’S CARE & DEVELOPMENTAL CENTER**

THIS LEASE, made as of this \_\_\_\_ day of \_\_\_\_\_, 2021, by and between Lincolnwood School District No. 74, Cook County, Illinois (hereinafter called “Landlord”) and Children’s Care & Development Center, an Illinois not-for-profit corporation (hereinafter called “Tenant”).

WITNESSETH

WHEREAS, Landlord is the legal titleholder to the facility and adjoining grounds, commonly known as Todd Hall School located at 3925 Lunt Avenue, Lincolnwood, Illinois (hereinafter referred to as the “Premises”); and

WHEREAS, Landlord has the authority, pursuant to Section 10-22.11 of The School Code (105 ILCS 10-22.11) to lease buildings, rooms, grounds, and appurtenances for appropriate purposes, when such facilities are not required for its own educational programs; and

WHEREAS, Landlord has determined that certain portions of the Premises are temporarily and occasionally unnecessary for its educational programs; and

WHEREAS, Tenant has expressed its interest in leasing a portion of the Premises from Landlord to operate an Early Childhood program.

NOW, THEREFORE, in consideration of the mutual covenants contained herein and in consideration of the rents, covenants and agreements hereinafter reserved and contained on the part of Tenant to be observed and performed, Landlord hereby leases to Tenant, and Tenant hereby leases from Landlord, that portion of the Premises more specifically described in Exhibit A attached hereto and incorporated herein by reference, on either an exclusive or occasional and

intermittent basis and upon the terms and conditions and agreements hereinafter set forth, and Landlord and Tenant hereby agree as follows:

1. LEASE TERM. The term of this Lease shall commence on the 1st day of July, 2021 (the “Commencement Date”) and end on the 30th day of June, 2026, which period shall be referred to herein as the “Lease Term”. This Lease shall remain in effect for the Lease Term, unless earlier terminated or extended in the manner specified in subsequent Sections of this Lease. The Landlord and Tenant may mutually agree to extend the Lease for a period up to two (2) years, through June 30, 2028, by executing an extension substantially in the form of the attached Exhibit B. If extended, such term shall be referred to herein as the “Extended Term.”

2. USE. The Premises shall be used by Tenant for the operation of an early childhood preschool program by Tenant's employees for children age six weeks through grade five, which program shall be licensed by the Illinois Department of Children and Family Services (the “Permitted Use”) and no other use of the Premises shall be permitted, unless otherwise specifically addressed herein or authorized by Landlord.

3. OCCUPANCY AND RENT. Tenant shall be permitted to occupy and utilize those portions of the Premises described in Exhibit A. In general, Tenant shall be permitted to occupy and use the designated classroom areas of the Premises on an exclusive basis and certain other designated common areas of the Premises between the hours of 6:00 a.m. and 6:00 p.m., Monday through Friday on days when Landlord shall also be operating its own public educational program on the Premises. In addition, Tenant may be permitted to utilize other classrooms and common areas of the Premises on a limited basis when such areas are not otherwise required by Landlord for its own exclusive use, when adequate prior notice is provided to Landlord, and Landlord specifically consents to such use. The specific details of such occupancy may be renegotiated

between the parties during the Lease Term and Exhibit A to the Lease may be revised and amended accordingly upon mutual agreement of the parties.

During the initial year of the Lease Term, Tenant agrees to pay Landlord an annual rental fee of Eighty-Three Thousand Seventeen Dollars (\$83,017) for its use of the designated areas of the Premises. Such rental fee shall be paid to Landlord in twelve equal monthly installments commencing on or before the commencement of the Lease Term and by the first day of each month thereafter during the Lease Term. During each subsequent year of the Lease Term, the annual rental fee shall increase by three percent (3.0%). The same increase percentage shall be applied to each year of the Extended Term unless the Landlord and Tenant agree to a different amount.

4. **CONDITION OF PREMISES.** Tenant acknowledges that neither Landlord nor any agent or employee of Landlord has made any representation or warranty concerning the designated areas of the Premises, with respect to the suitability, condition, or repair thereof, and Tenant accepts possession of the designated areas of the Premises in “as is” condition. No promise of Landlord to alter, remodel, improve or repair Premises, or any part thereof has been made. Any modifications to the Premises, which may be required by applicable federal or state law or local ordinance to permit Tenant to conduct its programs, as more specifically identified above as the Permitted Use, shall be undertaken at Tenant's sole expense. All damage or injury to the Premises caused by the acts or negligence of Tenant, its agents, employees, licensees, invitees, permittees, students, or visitors, shall be promptly repaired, to the satisfaction of the Landlord, by Tenant or at Tenant's election, by employees of the Landlord with the Tenant paying all direct labor, material and overhead costs within thirty (30) days of Tenant's receipt of an appropriate invoice from Landlord.

5. ALTERATIONS AND IMPROVEMENTS. Tenant shall not have the right, at any time during the term hereof, except with the prior written consent of the Landlord, to make additions, alterations, changes or improvements to the Premises or any part thereof. All improvements resulting from such work shall, upon completion thereof, become the property of the Landlord unless the written consent of the Landlord contains an express provision to the contrary. Tenant agrees, as a condition of its occupancy of the Premises, to pay all expenses applicable to any necessary modifications to the existing School security system, installation of new locks and keypad systems, which may result from Tenant's occupancy of certain portions of the Premises pursuant to the Lease.

6. TENANT'S IMPROVEMENTS. Before commencement of any work or delivery of any materials onto the Premises, Tenant shall furnish Landlord with plans and specifications, names and addresses of contractors, copies of contracts, necessary permits and indemnification in form and amounts satisfactory to Landlord and waivers of lien against any and all claims, costs, damages, liabilities and expenses which may arise in connection with the additions, alterations, changes and improvements.

Before commencing any work by an outside contractor Tenant shall furnish Landlord with general comprehensive liability insurance satisfactory to Landlord. The coverage and limits under the policies of insurance shall be subject to Landlord's decision and approval, and shall name Landlord, its agents, officers and employees, their successors and assigns, as named insureds. Additionally, Tenant shall furnish Landlord with certificates of insurance from all outside contractors performing labor or furnishing materials that insure Landlord against any and all liabilities which may arise out of or be connected in any way with said additions, alterations, changes and improvements. If work is to be performed when students may be present on school

grounds, Landlord may require proof of fingerprint-based criminal history record checks, checks of the Statewide Child Murderer and Violent Offender Against Youth Database, and/or checks of the Illinois State Police Sex Offender Registry for any individual who may be present, without cost or charge to the Landlord.

7. MAINTENANCE, CUSTODIAL AND FOOD SERVICE. During the term of this Lease, Tenant agrees to maintain those portions of the Premises that it shall utilize as more fully described in Exhibit A, in a clean, safe and orderly manner and in full compliance with all State and local laws and regulations. Tenant agrees to provide custodial services in connection with its use of the designated classrooms of the Premises and timely repair all equipment or appurtenances placed upon the Premises by Tenant. In addition, Tenant agrees to lock the designated classrooms of the Premises when they are not in use by Tenant and to lock all exterior doors of the Premises if Tenant's use of the Premises extends beyond the normal working hours of Landlord's employees. Finally, Tenant shall be responsible for all food service for and related to the operation of its program.

Landlord shall be responsible for providing custodial services for the remainder of the Premises as well as all landscaping and snow removal. In addition, Landlord shall be responsible for all maintenance and repair of roof, windows, exterior, plumbing, and mechanical systems of the Premises as well as the playground equipment and parking area.

8. UTILITIES. Landlord shall be responsible for all water, sewer, electricity, natural gas and refuse disposal charges (“Utility Charges”) for the Property, including the Premises, during the Lease Term. The rental fee paid by Tenant shall include an amount equal to Landlord's estimated cost of paying those Utility Charges applicable to that portion of the Premises occupied and used by Tenant.

Tenant shall be solely responsible for all charges and costs of installation for telephone and technology hardware, wiring and service charges applicable to the Premises and Tenant's use of the Premises.

9. **LIABILITY INSURANCE.** Tenant agrees during the term hereof to carry general comprehensive liability insurance or public liability insurance, in the joint names of Landlord and Tenant, covering the Premises for injury or death to any person or persons, and property damage, in such amounts and with such insurance companies licensed to do business in Illinois as are satisfactory to Landlord, and with policy limits not less than those specified on Tenant's Certificate of Insurance, attached hereto and incorporated herein as Exhibit B, and to pay the premiums therefore and to deliver said policies or certificates thereof to Landlord. Each insurer under the policies required hereunder shall agree by endorsement on the policy issued by it, or by independent instrument furnished to Landlord, that it will give Landlord thirty (30) days prior written notice before the policy or policies in question shall be altered or canceled.

10. **FIRE AND EXTENDED COVERAGE INSURANCE.** Landlord shall secure and provide adequate fire and extended coverage insurance for the Premises. Such fire and extended coverage insurance shall not cover any items of personality, other than permanent fixtures, which Tenant or its employees, licensees, permittees, or invitees may install on the Premises. Furthermore, Landlord shall have no liability for, nor any responsibility to insure against, the loss, theft, damage or destruction of any personal property brought onto the Premises by Tenant or its employees, licensees, permittees or invitees.

11. **INDEMNIFICATION.** Tenant will defend, indemnify and hold harmless Landlord and its officers, the board, members of the Board of Education, employees, and agents or their successors or assigns, and save them harmless from and against any and all claims, actions,

damages, liability and expense in connection with the occupancy or use by Tenant of the Premises or any part thereof, or occasioned wholly or in part by any act or omission of Tenant, its agents, contractors, employees, servants, or their successors or assigns. In case Landlord or its officers, employees or agents or their successors or assigns shall, without fault on their part, be made a party to any litigation commenced by or against Tenant or its officers, employees, agents, or students, or their successors or assigns, then Tenant shall protect and hold Landlord and its officers, employees and agents or their successors or assigns harmless and shall pay all costs, expenses and reasonable attorney's fees incurred or paid by them in connection with such litigation.

12. UNTENANTABILITY. If the Premises or Todd Hall School are rendered untenable by fire or other casualty, Landlord may elect (a) to terminate the Lease as of the date of the fire or casualty by notice to Tenant within thirty (30) days after that date, or (b) to repair, restore or rehabilitate the Premises at Landlord's expense within forty-five (45) days after Landlord is able to take possession of the damaged Premises and undertake reconstruction or repairs, in which latter event the Lease shall not terminate but Rent payments shall be abated on a per diem basis while the Premises are untenable. If Landlord elects so to repair, restore, or rehabilitate the Premises and does not substantially complete the work within the forty-five (45) day period, either party can terminate the Lease as of the date of the fire or casualty by notice to the other party not later than ninety (90) days after Landlord is able to take possession of the damaged Premises and undertake reconstruction or repairs. In the event of termination of the Lease pursuant to this Section 12, Lease payments shall be apportioned on a per diem basis and be paid to the date of the fire or casualty.

13. DEFAULT. Tenant agrees that any one or more of the following events shall be considered events of default as said term is used herein:

- (a) Tenant shall vacate the Premises or abandon the same during the term hereof; or
- (b) Tenant shall make default in any payment of Rent or any other payment required to be made by Tenant hereunder when due as herein provided; or
- (c) Tenant shall use or suffer the use of the Premises for other than the Permitted Use;  
or
- (d) Tenant shall attempt to sell, assign, sublet, hypothecate or transfer this Lease or its interests hereunder; or
- (e) Tenant shall suffer any mechanics lien or lien by any revenue or other government officer to be placed against the Premises; or
- (f) Tenant shall default in any of the other covenants and agreements herein contained to be kept, observed and performed by Tenant.

Upon the occurrence of any one or more of such events of default, it shall be lawful for Landlord, at its election, to declare the term of this Lease ended, and to reenter and expel, remove and put out Tenant and all persons occupying the Premises under Tenant, using such force as may be necessary in so doing, and again to repossess and enjoy the Premises, without such reentry and repossession working a forfeiture of any rental obligation to be paid and the covenants to be performed by Tenant during the full term of this Lease.

If Tenant shall default in the performance of any covenant required to be performed by it by virtue of any provision in this Lease, Landlord may, but is not required to, perform the same for the account and at the expense of Tenant. If Landlord at any time is compelled to pay, or elects to pay, any sums of money, or do any act which will require the payment of any sum of money,

by reason of the failure of Tenant to comply with any provision hereof or, if Landlord is compelled to incur any expense, including reasonable attorney's fees, in instituting, prosecuting or defending any action or proceeding instituted by reason of any default of Tenant hereunder, all sum or sums so paid by Landlord, with all interest, penalties, costs and damages, shall be due from Tenant to Landlord immediately, together with interest at the then statutorily permitted rate.

14. ASSIGNMENT. SUBLETTING OR DISASSOCIATION OF CURRENT DIRECTOR. Tenant shall not sell, assign, hypothecate, sublet, or transfer this Lease or Tenant's interest hereunder under any circumstances, without the prior written consent of the Landlord. Further, Tenant acknowledges that if the current Director/Owner of Tenant who is the signatory to this Lease shall, for any reason, cease operating Tenant's program on a direct daily basis or shall sell, assign, hypothecate, sublet or transfer her interest in Tenant's program, this Lease may be immediately terminated by Landlord, or at Landlord's sole option, be permitted to continue for such additional time and upon such additional condition as Landlord may, in its sole discretion, approve.

15. ADVERTISING. On any and all literature describing and/or advertising Tenant's program, it shall be clearly stated that Tenant is an Illinois not-for-profit corporation and that Tenant's organization and program are in no way connected to or related to Landlord. Subject to Landlord's prior written approval, Tenant may install, at its sole expense, a sign on the Premises identifying its program.

16. LAWS. ORDINANCES AND REGULATIONS. Tenant will, as required by law, comply with all applicable federal and state statutes and regulations, with all local village ordinances, with all applicable rules and orders of health officers, with the orders and requirements of the police department, and with the rules and orders of the fire department, with respect to any

matter coming within their jurisdiction. Tenant specifically acknowledges that smoking (including the use of e-cigarettes or vaping devices), or the possession, use and consumption of alcoholic beverages or controlled substances on the Premises or on school property generally is prohibited by law.

17. RIGHTS AND REMEDIES. The various rights and remedies herein granted to Landlord shall be cumulative and in addition to any other remedies Landlord may be entitled to by law, and the exercise of one or more rights or remedies shall not impair Landlord's right to exercise any other right or remedy.

18. NOTICES. Any notice required or permitted to be given hereunder shall be in writing and may be given personally or by registered or certified mail, postage prepaid, return receipt requested, addressed to Tenant or to Landlord at the address noted below the signature of the respective parties, as the case may be. Either party may by written notice to the other specify a different address for notice purposes.

19. TAXES. If the Premises, or any part thereof, are determined to be used for non-exempt purposes and become subject to taxation, Tenant shall be responsible for the payment of any taxes assessed for the Lease Term and said taxes shall constitute additional rent due hereunder and shall be payable at the time said taxes are due. Tenant and Landlord shall each have the right to challenge, at their own expenses, any loss of tax exempt status of the Premises.

20. TERMINATION. Notwithstanding any provisions herein to the contrary, Landlord may terminate this Lease on any anniversary of the Commencement Date, for any reason and without cause, by providing Tenant with prior written notice of such termination on or before November 1st of the then applicable Lease Year. In addition, Landlord may partially terminate

this Lease and reclaim a classroom or classrooms from Tenant's portion of the Premises, at any time, by providing Tenant one hundred and twenty (120) days prior written notice of such partial termination. If Landlord reclaims any portion of the Premises, the annual rental fee shall be reduced accordingly, in an amount mutually agreed upon by the parties. This Lease may also be terminated by Landlord for the reasons set forth in Section 12 above. Finally, Tenant may terminate the Lease upon five (5) days prior written notice to Landlord, in the event that the Illinois Department of Children and Family Services does not grant a permit to Tenant by August 15 of any year, to operate its program.

21. RENEWAL. At least one hundred and twenty (120) days prior to the expiration of the Lease Term, Landlord and Tenant shall meet to determine whether to renew the Lease for an extended period of up to two additional years and to establish the terms and conditions applicable to such renewed lease of the Premises.

22. PARTIAL INVALIDITY. Any provision of this Lease which shall prove to be invalid, void, or illegal shall in no way affect, impair, or invalidate any other provision hereof and such other provisions shall remain in full force and effect.

23. ENTIRE AGREEMENT. This Lease constitutes the entire agreement between the parties hereto with respect to the subject matter hereof and no prior agreement or understanding with regard to any such matter shall be effective for any purpose. No provision of this Lease may be amended or added to except by an agreement in writing signed by the parties hereto.

24. GOVERNING LAW AND VENUE. This Lease has been executed in Illinois and shall be governed in accordance with the laws of the State of Illinois in every respect. The parties agree that venue for all actions between the parties shall lie solely in the state court having

jurisdiction over Cook County, Illinois, and the Tenant hereby submits to the jurisdiction of that court.

25. COUNTERPARTS. This Lease, and any extension or amendment thereto, may be executed in multiple counterparts, and a set of counterparts bearing the signatures of both parties constitutes the Lease as if the parties had signed a single document..

IN WITNESS WHEREOF, the parties hereto have signed and sealed this Lease on the date first above written.

**LANDLORD**

**TENANT**

BOARD OF EDUCATION OF  
LINCOLNWOOD SCHOOL DISTRICT  
NO. 74, Cook County, Illinois

CHILDREN’S CARE & DEVELOPMENTAL  
CENTER, an Illinois not-for-profit corporation

By: \_\_\_\_\_  
Its President

By: \_\_\_\_\_  
Its Director

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Attest:: \_\_\_\_\_  
Its Secretary

Attest:: \_\_\_\_\_  
Its

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Address:

Address:

Lincolnwood School District No. 74  
6950 East Prairie Road  
Lincolnwood, IL 60712  
ATTN: Dr. Kimberly Nasshan

Children’s Care & Developmental Center  
3925 W. Lunt Avenue  
Lincolnwood, IL 60712  
ATTN: Susan Fahey

## EXHIBIT A

### DESCRIPTION OF PREMISES

Tenant shall have exclusive use of Rooms 404, 405, 406, 407, 409 and the Office/Lounge in the West Wing of the Todd Hall School facility. In addition, Tenant shall be authorized to utilize on a shared basis with Landlord the West corridor hallway and the custodial closet located in that hallway.

Tenant shall also be authorized to utilize the following areas of the School facility and grounds on a non-exclusive basis:

1. The playground equipment West of the School and other play areas during school days when they are not in use by Landlord.
2. The multi-purpose room between the hours of 6:30 a.m. and 8:45 a.m. and at such other time agreed upon in advance by the School principal.
3. The gymnasium between the hours of 3:00 p.m. and 6:00 p.m.
4. Additional classrooms (art room, music room and two classrooms) between the hours of 3:00 p.m. and 6:00 p.m., subject to the Landlord's approval when available and when not reserved for use by Landlord.
5. The computer lab 1 day per week for 1 hour per day between the hours of 3:00 p.m. and 6:00 p.m. when not reserved for use by Landlord.

**EXHIBIT B**  
**TWO-YEAR LEASE EXTENSION**

This amendment is made and entered into as of \_\_\_\_\_, 2026, by and between Lincolnwood School District No. 74, (herein “Landlord”), and Children's Care & Developmental Center, an Illinois not-for-profit corporation (herein “Tenant”) and modifies the lease agreement dated \_\_\_\_\_, 2021, (herein the “Lease”) as set forth herein. Landlord and Tenant agree as follows:

**A. Two-year Extension.** The term of the Lease as referenced in Section 1 shall be extended for two (2) additional years, beginning July 1, 2026, and ending June 30, 2028 (the “Extended Term”).

**B. Rent.** The annual rental fees shall be \$\_\_\_\_\_ in the first year of the Extended Term and \$\_\_\_\_\_ in the second year of the Extended Term, to be paid in accordance with Section 3 of the Lease.

All other terms of the Lease which are not inconsistent with this amendment remain in full force and effect.

BOARD OF EDUCATION OF  
LINCOLNWOOD SCHOOL DISTRICT  
NO. 74, Cook County, Illinois

CHILDREN’S CARE & DEVELOPMENTAL  
CENTER, an Illinois not-for-profit corporation

By: \_\_\_\_\_  
Its President

By: \_\_\_\_\_  
Its Director

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Attest:: \_\_\_\_\_  
Its Secretary

Attest:: \_\_\_\_\_  
Its

Date: \_\_\_\_\_

Date: \_\_\_\_\_