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# TASB Risk Management Fund

1-800-4-TASB-RM

DENTON ISD

## Contribution and Coverage Summary

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This is a package renewal that includes those coverages, limits, and deductibles as indicated. If you would like a quote for specific lines of coverage, other than on a package basis, please call us at 800-482-7276 to discuss other options that may be available.

Participation Period: January 1, 2011 12:01 A.M. to January 1, 2012 12:01 A.M.

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*I have received and accepted the values stated in the Building and Contents Schedule attached. \_\_\_\_\_ Initials*

### PROPERTY

Deductible  
Per Occurrence      Annual  
Contribution

\$862,275,654 Blanket Replacement Cost Limit on  
Buildings, Personal Property and Auxiliary Structures  
EXCLUDES HOUSE AT 1122 CRESCENT

RISK OF DIRECT PHYSICAL LOSS  
INCLUDES WIND, HURRICANE, AND HAIL  
COVERAGE WITH A \$250,000 DEDUCTIBLE

\$50,000      \$258,683

### EQUIPMENT BREAKDOWN

Deductible  
Per Occurrence      Annual  
Contribution

\$100,000,000 Limit

\$1,000      \$50,598

### MISCELLANEOUS PROPERTY

(Property Wind, Hurricane, and Hail Deductible applies)

Deductible  
Per Occurrence      Annual  
Contribution

RISK OF DIRECT PHYSICAL LOSS, REPLACEMENT COST  
BAND EQUIPMENT

\$2,986,846 Limit

\$1,000      \$3,584

RISK OF DIRECT PHYSICAL LOSS, REPLACEMENT COST  
EDP EQUIPMENT, DATA & MEDIA,  
EDP EXTRA EXPENSE

\$23,038,702 Limit

\$5,000      \$32,254

LIABILITY	Deductible Per Occurrence	Annual Contribution
<b>GENERAL LIABILITY</b>		
INCLUDING PERSONAL INJURY AND LIABILITY COVERAGE FOR ITEMS CONSIDERED MOBILE EQUIPMENT		
\$1,000,000 Per Occurrence Limit	\$1,000	\$18,244
EMPLOYEE BENEFITS LIABILITY (\$100,000 Per Occurrence Limit)		
<b>SCHOOL PROFESSIONAL LEGAL LIABILITY</b>		
\$5,000,000 Per Occurrence Limit/ \$5,000,000 Annual Aggregate	\$10,000	\$141,751
(Subject to the sublimits as stated in the Sexual Misconduct Claims Endorsement)		
<b>INCREASE SUBLIMITS TO SEXUAL MISCONDUCT CLAIMS ENDORSEMENT</b>		
\$1,000,000 Per Occurrence Limit/ \$1,000,000 Annual Aggregate	\$10,000	\$5,408
<b>VEHICLE COVERAGE</b>		
<b>FLEET LIABILITY</b>		
	Deductible Per Occurrence	Annual Contribution
\$100,000 per person Bodily Injury limits, \$300,000 per occurrence Bodily Injury limits, \$100,000 per occurrence Property Damage limits	\$1,000	\$76,462
<b>PHYSICAL DAMAGE- Actual Cash Value</b>		
<b>PRIVATE PASSENGER</b>		
COMPREHENSIVE	\$250	\$0
COLLISION	\$250	\$0
<b>ALL OTHER VEHICLES</b> (Buses, Trucks, Trailers, and Vans)		
SPECIFIED PERILS	\$1,000	\$11,581
COLLISION	\$1,000	\$11,593

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**CRIME**

Deductible  
Per Occurrence      Annual  
Contribution

\$50,000 Limit

\$1,000

\$3,386

**TOTAL CONTRIBUTION**

\$613,544

The signed Contribution and Coverage Summary is due by January 1, 2011.

Participation Period: January 1, 2011 12:01 A.M. to January 1, 2012 12:01 A.M.

The Fund may purchase excess coverage for the Fund to ensure the Fund's fiscal integrity. The Fund may also act on behalf of individual Program Participants to obtain excess loss coverage, bill the Program Participant, and remit the amount to the appropriate party. In the event of a substantial change in terms or cost of excess coverage during the term of this Agreement, the Fund reserves the right to make adjustments to the terms of this Agreement, or to terminate this Agreement, with 60 days notice to the Program Participant. The Program Participant will have the right to terminate this Agreement prior to the effective date of the adjustment.

I understand the District is required to appoint a property/casualty coordinator that has express authority to represent and bind the District in all property/casualty program matters as outlined in the Interlocal Participation Agreement (Agreement), in the section titled "General Provisions."

I hereby appoint the property/casualty Coordinator as follows:

<u>Debbie Monschke</u> Name of appointed Coordinator	<u>Executive Director Administrative Services</u> Coordinator title
<u>1307 North Locust</u> Coordinator address	<u>Denton, Texas 76201</u> City, state, and zip
<u>( 940 ) 369-0010</u> Coordinator phone	<u>( 949 ) 369-4981</u> Coordinator fax
	<u>dmonschke@dentonisd.org</u> Internet and/or E-mail address

Through the execution of my signature below, I hereby warrant that I am duly authorized to sign this Contribution and Coverage Summary and affirm the named Fund Member's participation for the time period shown above unless program participation is sooner terminated in accordance with the provisions in the Agreement. Furthermore, I certify that I have read and understand the entire Agreement.

**Program Participant:**

Denton Independent School District  
District name

\_\_\_\_\_  
Authorized signature

\_\_\_\_\_  
Printed name and title

\_\_\_\_\_  
Date

**TASB Risk Management Fund:**

By: James B. Crow, Secretary

\_\_\_\_\_  
Date





October 20, 2010

Mrs. Debbie Monschke  
Denton ISD  
PO Box 2387  
Denton, TX 76202-2387

Dear Mrs. Monschke:

The TASB Risk Management Fund (the Fund) has had another outstanding year and it is due to members such as Denton ISD! Because of Denton ISD's positive loss experience, longevity, and loyalty to the Fund's Property/Casualty program, we are pleased to offer you a Membership Experience Renewal Reward (MERR) to continue this partnership through 2011-12.

Your Membership Experience Renewal Reward of **\$10,000** is the Fund's way of recognizing Denton ISD's contributions to the Fund's continued success. The MERR is being offered only to members that meet certain criteria, such as excellent loss experience and long term membership in the Fund's programs. Eligible members must renew their membership **within 30 days of 11/2/10**. Signing this letter will indicate your commitment to renew your participation in the Fund's Property/Casualty program for another year effective 1/1/2011.

It is only because of members such as Denton ISD that the Fund is recognized as one of the most successful public entity pools in the nation. We value the relationship we have with Denton ISD and thank you for your many positive contributions to the TASB Risk Management Fund. If you have any questions or comments concerning the Membership Experience Renewal Reward, please contact your risk management consultant at 800-4-TASB-RM (800-482-7276).

Sincerely,

Dubravka Romano  
Associate Executive Director, Risk Management Services  
Texas Association of School Boards, Inc.

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Denton ISD agrees to renew its participation in the Fund's Property/Casualty program for the 2011-12 coverage period beginning on 1/1/2011. Denton ISD also agrees to waive all rights to not renew participation for the 2011-12 coverage period, as described in the Interlocal Participation Agreement (IPA), Terms & Conditions, 4.b. Termination by Program Participant. Denton ISD agrees to execute the IPA, the Contribution and Coverage Summary (CCS), and other Fund documents as required for participation in the Fund. The individual signing below is duly authorized to bind the Denton ISD to execute the terms of the participation documents. The acceptance of the Membership Experience Renewal Reward is conditioned on the Denton ISD's continued participation in the Property/Casualty program for the 2011-12 year.

By: \_\_\_\_\_  
Authorized Signature of Fund Member

Date: \_\_\_\_\_

\_\_\_\_\_  
Printed Name and Title

**DENTON ISD**  
**Non-Audit Agreement**

The TASB Risk Management Fund extends to Denton ISD a Non-Audit agreement beginning January 1, 2011 through January 1, 2012. This agreement stipulates that there will be no annual audit of the District's auto liability or physical damage coverage. The District agrees to provide the TASB Risk Management Fund (Fund) with a new vehicle log prior to the renewal of coverage, on the day requested by the Fund.

There will be no debiting or crediting the District for any vehicles sold or acquired during the coverage period. This non-audit agreement does not apply to any other line of coverage. This agreement is only valid if signed below.

\_\_\_\_\_  
James B. Crow, Secretary  
TASB Risk Management Fund

\_\_\_\_\_  
Date

\_\_\_\_\_  
District Representative

\_\_\_\_\_  
Date