

Safety National Casualty Corporation
1832 Schuetz Road
St. Louis, MO 63146

PHONE # (314) 995-5300

FAX # (314) 995-3843

TO:	MARSH USA INC.	ATTN:	Mr. Jim Poggio
PHONE:	(713) 276-8000	FAX:	(713) 273-8777
FROM:	Len Eslinger	DATE:	05/21/2012

EXCESS WORKERS' COMPENSATION INSURANCE QUOTATION

Name of Risk: DENTON INDEPENDENT SCHOOL DISTRICT
Account: 6008969 Previous Policy Number: AGC4042188
Specific & Aggregate Excess

Contract Terms	Option 263161955	Option 261823949
Liability Period	07/01/2012 - 07/01/2013	07/01/2012 - 07/01/2013
Payroll Reporting Period	07/01/2012 - 07/01/2013	07/01/2012 - 07/01/2013
Payroll	\$ 174,913,840	\$ 174,913,840
Manual Premium	\$ 1,949,471	\$ 1,949,471
Experience Modification Factor	1.000	1.000
Standard Premium	\$ 1,949,471	\$ 1,949,471
Self-Insured Retention	\$ 500,000	\$ 450,000
Specific Limit	Statutory	Statutory
Employers Liability Limit	Per Occ \$ 1,000,000	Per Occ \$ 1,000,000
Loss Fund Rate	Rate % Std Premium 95.00 %	Rate % Std Premium 90.00 %
Estimated Loss Fund	\$ 1,851,997	\$ 1,754,524
Minimum Loss Fund	Est. x 100.00 % \$ 1,851,997	Est. x 100.00 % \$ 1,754,524
Aggregate Excess Limit	\$ 1,000,000	\$ 1,000,000
Loss Limitation	\$ 500,000	\$ 450,000
Premium Rate	Rate % Std Premium 3.00 %	Rate % Std Premium 3.20 %
Deposit Premium	\$ 58,484	\$ 62,383
Minimum Premium	\$ 55,560	\$ 59,264
Commission	Net 0.00 %	Net 0.00 %
Pay Plan	ANNUAL PAYMENT	ANNUAL PAYMENT

*Quote expires 1 day after Payroll Reporting Period effective date for each Quote Option.

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Endorsements:

General Endorsements applicable to all quote options:

XWC 0276 02 0408 BROAD FORM ALL STATES FOR EMPLOYEE TRAVEL
XWC 0293 00 0906 FOREIGN VOLUNTARY WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY
XWC 0322 00 1291 90-DAYS NOTICE OF CANCELLATION
TEXAS MANDATORY ENDORSEMENT(S), IF APPLICABLE
XWC 1061 10 1207 POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

Contingencies:

The quote is subject to the following:

1. This Agreement will include coverage for Workers' Compensation loss caused by acts of terrorism as defined in the Agreement. Coverage for such losses will still be subject to all terms, definitions, exclusions, and conditions in the Agreement, & any applicable federal and/or state laws, rules, or regulations. Be advised that, under the Terrorism Risk Insurance Act of 2002 as amended, terrorism losses would be partially reimbursed by the U.S. Government under a formula established by the Act. Under this formula, the U.S. Government would generally reimburse 85% of covered terrorism losses exceeding a deductible paid by us. The Act contains \$100 billion cap that limits the reimbursement from the U.S. Government as well as from all insurers. If aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced. The portion of the EMPLOYER's annual premium attributable to coverage for losses caused by a certified act of terrorism is: 0.5%
2. Subject to receipt, review and acceptance of information contained in SNCC's Employee Concentration Supplemental Information (08/04) form prior to binding.

Comments:

1. Included in our quote are the MAP Client Services. These resources consist of both risk control and claim services including: Safety Essentials On-line; Workers' Comp Kit; Safety Training Source; and Best Doctors Catcare and Ask Best Doctors programs - which provide in-depth case review by world renowned doctors.
2. INCLUDED IN OUR QUOTE ARE THE RESOURCES OF THE BEST DOCTORS CATCARE PROGRAM, WHICH PROVIDES IN-DEPTH CASE REVIEW BY WORLD-RENOWNED DOCTORS.