
TASB Risk Management Fund

1-800-4-TASB-RM

DENTON ISD

Contribution and Coverage Summary

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, 2008 12:01 A.M. to January 1, 2009 12:01 A.M.

I have received and accepted the values stated in the Building and Contents Schedule attached. DM Initials

PROPERTY	Deductible Per Occurrence	Annual Contribution
\$676,750,626 Blanket Replacement Cost Limit on Buildings, Personal Property and Auxiliary Structures		
RISK OF DIRECT PHYSICAL LOSS INCLUDES WIND, HURRICANE, AND HAIL COVERAGE WITH A \$250,000 DEDUCTIBLE	\$50,000	\$432,444
EQUIPMENT BREAKDOWN	Deductible Per Occurrence	Annual Contribution
\$100,000,000 Limit	\$1,000	\$44,124
MISCELLANEOUS PROPERTY (Property Wind, Hurricane, and Hail Deductible applies)	Deductible Per Occurrence	Annual Contribution
RISK OF DIRECT PHYSICAL LOSS, REPLACEMENT COST BAND EQUIPMENT		
\$2,287,450 Limit	\$1,000	\$3,431
RISK OF DIRECT PHYSICAL LOSS, REPLACEMENT COST EDP EQUIPMENT, DATA & MEDIA, EDP EXTRA EXPENSE		
\$18,376,411 Limit	\$5,000	\$31,240
RISK OF DIRECT PHYSICAL LOSS, REPLACEMENT COST PROPERTY EXTRA EXPENSE		
\$100,000 Limit	Property Deductible Applies	Included in Property

LIABILITYDeductible
Per Occurrence Annual
Contribution**GENERAL LIABILITY**INCLUDING PERSONAL INJURY AND LIABILITY
COVERAGE FOR ITEMS CONSIDERED MOBILE
EQUIPMENT

\$1,000,000 Per Occurrence Limit

\$1,000

\$16,505

EMPLOYEE BENEFITS LIABILITY
(\$100,000 Per Occurrence Limit)**SCHOOL PROFESSIONAL LEGAL LIABILITY**\$5,000,000 Per Occurrence Limit/
\$5,000,000 Annual Aggregate

\$10,000

\$92,854

(Subject to the sublimits as stated in the
Sexual Misconduct Claims Endorsement)**INCREASE SUBLIMITS TO SEXUAL MISCONDUCT
CLAIMS ENDORSEMENT**\$1,000,000 Per Occurrence Limit/
\$1,000,000 Annual Aggregate

\$10,000

\$8,500

VEHICLE COVERAGE**FLEET LIABILITY**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

\$73,126

PHYSICAL DAMAGE- Actual Cash ValueDeductible
Per Vehicle Annual
Contribution**PRIVATE PASSENGER**

COMPREHENSIVE

\$250

\$152

COLLISION

\$250

\$828

ALL OTHER VEHICLES

(Buses, Trucks, Trailers, and Vans)

SPECIFIED PERILS

\$1,000

\$8,904

COLLISION

\$1,000

\$9,474

CRIME

Deductible
Per Occurrence Annual
Contribution

\$50,000 Limit

\$1,000

\$2,203

TOTAL CONTRIBUTION

\$723,785

The signed Contribution and Coverage Summary is due by January 1, 2008.

Participation Period: January 1, 2008 12:01 A.M. to January 1, 2009 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>	<u>Executive Director Budget & Finance</u>
Name of appointed Coordinator	Coordinator title
<u>P.O. Box 2387</u>	<u>Denton, Texas 76202-2387</u>
Coordinator address	City, state, and zip
<u>(940) 369-0010</u>	<u>dmonschke@dentonisd.org</u>
Coordinator phone	Internet and/or E-mail address
<u>(940) 369-4981</u>	
Coordinator fax	

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 24, 2007

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 2008-2009.

Your Membership Experience Renewal Reward of **\$10,000.00** 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** 11/8/07. Signing this letter will indicate your commitment to renew your participation in the Fund's "Property/Casualty" program for another year effective 1/1/2008.

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

Denton ISD agrees to renew its participation in the Fund's "Property/Casualty" program effective 1/1/2008, and to waive all rights to terminate participation 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 District to execute the terms of the participation documents. The acceptance of the Membership Experience Renewal Reward is conditioned on the District's continued participation in the "Property/Casualty" program. **The Membership Experience Renewal Reward is void and the Member is no longer eligible to receive the MERR check if the Member goes out to bid, requests or accept other quotes.**

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, 2008 through January 1, 2009. 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