

Workers' Compensation and Employer's Liability Policy

Schedule of Operations

Item 4: Premium Calculation

Agent copy

Policy number 0002023142 Issue date 11/5/21 Policy period 11/6/21 to 11/6/22

Class codes for primary named insured

State	Location	Code	Classification	Premium basis total estimated annual remuneration	Rate per \$100 of remuneration	Estimated annual premium
11/6/21 to 11/6/22						
42	00001	9014	Janitor Service By Contract	20,000.00	3.350	670.00
42	00001	9079	Caterer	20,000.00	1.600	320.00
			Estimated manual premium			\$990.00
		9812	Increased Limits Factor 1,000,000/1,000,000/1,000,000		0.014	14.00
		9848	Increased Limits Balance to Minimum Premium (\$150)		1.000	136.00
		9898	Experience Modifier of 0.97		0.970	(34.00)
		9887	Schedule Modifier		0.780	(243.00)
		9874	Healthcare Network Option		0.120	(104.00)
		0900	Expense Constant		1.000	150.00
			Total payroll and Texas total premium	\$40,000.00		\$909.00

This endorsement changes the policy to which it is attached effective on the inception date of the policy unless a different date is indicated below.
(The following "attaching clause" need be completed only when this endorsement is issued subsequent to preparation of the policy.)

This endorsement, effective on 11/6/21 at 12:01 a.m. standard time, forms a part of:

Policy no. 0002023142 of Texas Mutual Insurance Company effective on 11/6/21

Issued to: BARBARA DOMINGUEZ

This is not a bill



Authorized representative

NCCI Carrier Code: 29939

11/5/21