

**Howe Independent School District
105 W. Tutt St. ▪ Howe, Texas 75459
Administration Office ▪ Telephone (903) 532-3228 ▪ Fax (903) 532-3205**

**REQUEST FOR PROPOSAL #1819-02
Property/Casualty Insurance & Risk Management Services**

July 21, 2019

The Howe Independent School District is accepting proposals by mail or in person at the Administration Office, 105 W. Tutt St., Howe, Texas 75459 for property/casual insurance and risk management services. Information regarding **RFP #1819-02, Property/Casualty Insurance & Risk Management Services** may be obtained by calling the Howe ISD Business Office at 903-532-3206 or via the website <https://www.howeisd.net/Page/243>.

Proposals will be received for **RFP #1819-02 until Monday, August 5, 2019 at 11:00 a.m.** Proposals will be opened and read Monday, August 5, 2019 at 11:00 a.m. Proposals will be made public information no later than the seventh day after the Board of Trustees awards a contract.

Proposal envelopes must be plainly marked with the RFP number and description, to the attention of Julie Snapp, Business Manager. The Business Office may open unmarked submissions to properly identify them. Bidders are therefore advised to correctly mark their submissions in order to protect the integrity of their bid and to fully avail themselves to the request for proposal process.

Bidders accept all responsibility for forwarding the proposal to the address above within the specified time or it will be returned unopened. If the envelope does not reflect a return address, it will be opened for the sole purpose of obtaining the return address.

The Howe Independent School District reserves the right to accept or reject any or all proposals in the best interest of the district and to waive any informalities or irregularities in the RFP process.

Contact: Julie Snapp – 903-532-3206

RFP # 1819-02
Property/Casualty Insurance & Risk Management Services

RETURN IMMEDIATELY

to
Julie Snapp
Fax (903) 532-3207 or
snapp.julie@howeisd.net

The Howe Independent School District Business Office bids and proposals are available on line. If you downloaded a bid you are required to return the following information back via fax to **(903) 532-3207** or email, snapp.julie@howeisd.net as soon as you print this document so that you may be added to the vendor list to receive addendums to this bid/proposal.

If you have any questions, please contact Julie Snapp at (903) 532-3206 or email at snapp.julie@howeisd.net

Name _____

Title _____

Organization _____

Street Address _____

Mailing Address _____

City _____

State _____

Zip/Postal Code _____

Work Phone _____

Fax _____

E-mail _____

GENERAL INSTRUCTIONS

RFP # 1819-02

Property/Casualty Insurance & Risk Management Services

Please be advised the District's Annual Budget is approximately 15.6 million dollars. Our average daily attendance (ADA) is 1178.

Proposers must submit sealed proposals in the form specified in the Request for Proposal (RFP) with any information required by any addendum to this RFP by the time and date specified. The following instructions are intended to afford all Proposers an equal opportunity to participate in the RFP. Any explanation desired by a Proposer regarding the meaning or interpretation of these instruction or any other RFP document must be requested in writing from the District. (See Inquiry Section of the General Terms and Conditions for a more complete explanation)

SPECIFICATIONS

Proposers are expected to examine the specifications, standard provisions, and all instructions. Failure to do so will be at the Proposer's risk. Proposals submitted on other than authorized forms or with different terms or provisions may not be considered as responsive proposals unless written authorization is obtained from the School prior to submitting the proposal. A copy of the authorization must be included with the proposal. The Proposers shall abide by and comply with the true intent of the specifications and not take advantage of any unintentional error or omission.

INVITATION

The District is inviting competitive sealed proposals for the selection of the property/casualty insurance and risk management needs as detailed in the Request for Proposal. Proposals will be received until 11:00 a.m. local time on Monday, August 5, 2019. Any proposal received after this time and date will not be considered.

SUBMITTAL OF PROPOSALS

Proposals shall be delivered or mailed with any required data. Display the words "PROPERTY/CASUALTY INSURANCE & RISK MANAGEMENT PROPOSAL" along with the name and address of the Proposer.

Submit proposals to:

Julie Snapp, Business Manager
Howe Independent School District
105 W. Tutt St.
Howe, TX 75459

Proposals must be submitted in sufficient time to be received and time-stamped at the above location on or before the published proposal date and time shown in this RFP. Faxed or emailed proposals will not be accepted by Howe Independent School District since the process does not provide for the delivery of a sealed bid.

BIDS SHALL BE SUBMITTED ON THESE FORMS

Proposals must be submitted on the Proposal Response Form included herein in order to be considered. Sample Policies, with any applicable endorsements, of all proposed coverages must accompany the Proposal Response Form. Proposers are welcome to attach additional material to fully detail the proposal.

PROPOSAL LONGEVITY

No Proposer may withdraw or cancel a proposal for a period of ninety (90) days following the closing time for acceptance, nor shall the successful Proposer withdraw, cancel or modify the proposal after having been notified that the proposal has been accepted by the District, except at the request of the District or with the District's consent.

EVALUATION OF PROPOSAL

Proposals will be evaluated upon the Proposer's ability to provide services which meet the requirements set forth in the accompanying documents. The District reserves the right to make such investigation as it deems necessary to determine the ability of the Proposers to provide services meeting a satisfactory level of performance in accordance with the District's requirements. Proposers shall furnish such information and data for this purpose as the District may request. Interviews and presentations by one, several, or all of the Proposers may be requested by evaluators if deemed necessary to fully understand and compare the Proposer's capabilities and qualifications.

DISTRICT PEROGATIVES

The District reserves the right to award to the responsible Proposer whose proposal is evaluated to offer the most advantages to the District, with the District being the sole judge thereof; to negotiate with any or all Proposers; to reject any or all proposals, in whole or in any part thereof, and to re-solicit for proposals in such an event; and to waive any minor technicalities or informalities in accordance with the District's determination of its own best interest.

PROPOSER'S CONDITIONS

Any conditions or exceptions on the part of the Proposer for performance by the District must be set forth in the proposal. The District is not obligated to consider the Proposer's post-submittal terms and conditions.

VENUE

The agreement resulting here from must contain language stating that the Request for Proposal is performable in Grayson County, Texas, and shall be construed in accordance with the laws of the State of Texas; if any legal action is brought in connection with enforcement of the Request for Proposal, exclusive venue shall lie in Grayson County, Texas.

PROPOSER'S PREPARATION COSTS

It shall be clearly understood that any costs incurred by the Proposer in responding to the Request for Proposal is at the Proposer's own risk and expense as a cost of doing business, and the District is not liable for reimbursement to the Proposer for any expense so incurred, regardless of whether or not the proposal is accepted.

INQUIRIES

Any inquiries or requests for explanation in regard to the District's requirements should be made promptly. No oral interpretation or clarifications will be given as to the meaning of any part of the Request for Proposal documents. Prospective proposers desiring further information or interpretations must make requests in writing no later than one (1) week prior to the proposal due date and time in order for a response to be issued to all prospective proposers well in advance of the date for the submittal of proposals. Answers to all inquiries or requests involving substantive matters will be given to all proposers of record in addendum form and such information will be taken into account in the preparation of proposals.

Requests for information should be emailed to snapp.julie@howeisd.net.

RESERVATION OF RIGHTS

The District expressly reserves the right to:

1. Reject or cancel any or all proposals;
2. Waive any defect, irregularity or informality in any proposal or proposal procedure;
3. Waive as an informality, minor deviation from specifications as identified in the Request for Proposal if it is determined that the District insurance program is improved or not impaired;
4. Extend the proposal opening time and date;
5. Reissue a proposal invitation;
6. Consider and accept an alternate proposal as provided herein when most advantageous to the District;
7. Procure any insurance coverage or service by other means.

TERMINATION

The District shall have the right to terminate for default all or part of its RFP if proposer breaches any of the terms hereof or if proposer becomes insolvent or files any petition in bankruptcy. Such right of termination is in addition to and not in lieu of any remedies with the District may have in law or equity, specifically including but not limited to the right to sue for damages or demand specific performance. The District additionally has the right to terminate this RFP with cause by delivery to the proposer of a "Notice of Termination" specifying the extent to which performance hereunder is terminated and the date upon which such termination becomes effective.

SCOPE OF WORK

RFP # 1819-02

Property/Casualty Insurance & Risk Management Services

While the exact range and extent of services is subject to specific coverage needs, it is anticipated that for the duration of the successful proposer shall provide, as a minimum, professional services and dedicated personnel necessary to perform the following:

1. Develop a complete understanding of the School's area of exposures and consult with District representative about short and long term solutions.
2. Evaluate existing insurance contracts and claims history and make recommendations concerning any changes, modifications, and/or additions in the terms, conditions, and coverage limits needed to yield a comprehensive risk management program to protect the interests of the District.
3. Verify the compliance of prospective carriers and/or organizations with the Texas Department of Insurance rules and regulations as well as any other pertinent State or Federal legislation and/or regulations.
4. Negotiate on the District's behalf the details of insurance contracts with selected Carriers. Audit resulting policies for accuracy of coverage, terms, and conditions, and compliance with financial arrangements and administrative procedures acceptable to the District.
5. Perform policy administration services to properly maintain coverage on various items such as scheduled properties, vehicles, etc.
6. Perform claims administrative services including, but not limited to:
 1. Properly route new reports and other claims information;
 2. Compile dates and report on losses monthly;
 3. Report claims status, description of losses, amounts paid, and subrogation recovery.

Carrier's loss runs will be sufficient if they are available and contain at a minimum the information indicated above and/or the information required in the District's Insurance Requirements Specifications.

7. Provide verification of coverage as needed by the District to satisfy lessors, contractors, and other parties from whom the District seeks services or uses equipment and/or facilities.
8. Provide assistance in the form of advisory services or written reports as is customarily expected from a professional insurance agent.
9. Provide presentations as needed, or upon request by the District, at times and places designated by the District.

10. Maintain an up-to-date copy of the District's Insurance Requirements and Specifications to facilitate obtaining insurance quotes to meet the District's insurance needs.
11. Provide Property Appraisals of the District's buildings.
12. Provide Facility Survey Reports highlighting potentially hazardous situations.

TERM OF AGREEMENT

RFP # 1819-02

Property/Casualty Insurance & Risk Management Services

The initial term of this Agreement shall be for a period of one (1) year. This Agreement shall be renewable for individual services, or in total, by mutual consent on an annual basis thereafter, subject to funding. This Agreement may be terminated by either party by giving the other party written notice of such intent not less than ninety (90) days prior to the effective date of termination.

GENERAL CONDITIONS

RFP # 1819-01

Property/Casualty Insurance & Risk Management Services

LEGAL COMPLIANCE

The proposer is responsible for full and complete compliance with all applicable laws, rules, regulations, and licensing requirements imposed by any public authority having jurisdiction.

PROPOSER'S INSURANCE AND IDEMNIFICATION

Prior to approval of the proposal by the District, the proposer must furnish a completed original Certificate of Insurance, of the Proposer's own insurance, to the District which shall be completed by an agent authorized to bind the named underwriter(s) and their company to the coverages, limit, and termination provisions shown thereon, and which shall contain all required information referenced or indicated thereon. The District shall have no duty to accept a proposal or perform under this Agreement until such certificate is delivered to the District and no officer or employee of the District shall have the authority to waive this requirement.

The Proposer must obtain and maintain in full force at all times during the term of the Agreement and any extension hereof, at the Proposer's sole expense, insurance coverage written by companies authorized or approved to do business in the State of Texas and otherwise acceptable to the District, in at least the following types and amounts:

<u>TYPE</u>	<u>AMOUNT</u>
1. Worker's Compensation	Statutory \$100,000/\$500,000/\$100,000
2. Commercial General Liability Insurance to include coverage for the following: a. Premises Operations b. Independent Contractors c. Products/Completed Operations d. Personal Injury e. Contractual Liability	Combined Single Limit for Bodily Injury and Property Damage of the \$1,000,000 per occurrence or its equivalent.
3. Comprehensive Automobile Liability	Combined Single Limit for Bodily Injury and Property Damage of \$1,000,000 per occurrence or its Equivalent
4. Insurance Agents Error and Omissions	\$1,000,000 per occurrence

INDEMNIFICATION

The Agent, in performing its obligations under this Agreement, is acting independently and the District shall agree to indemnify and hold harmless the District, its officers and employees from any and all claims, lawsuits, judgments, costs and expenses for which

recovery of damages is sought, suffered by and person or person, that may arise out of or be occasioned by the Agent's breach of the terms or provisions of the contract, or any negligent act or omission of the Agent, its officers, agents, employees, or invitees, in the performance of this contract; except that the indemnity specified in this paragraph shall not apply to any liability resulting from the sole negligence of the District, its officers, or employees. The Agent agrees to waive any and all subrogation rights it might have now and in the future against the District during its Agreement. This paragraph is solely for the benefit of the Agent and the District and is not intended to create or grant any rights, contractual or otherwise, to any other person or entity.

INDEPENDENT CONTRACTOR

The successful Agent will operate as an independent contractor, and shall not be considered an employee, agent, or authorized representative of the District unless explicitly stated and agreed to in writing or in a separate contract, agreement, or authorization.

APPROVAL OF AGENT

The District reserved the right to require the successful Agent to replace the assigned agent or staff with another agent or staff of the same company if, in the opinion of the District, the agent or staff is not rendering the quality of service and cooperation required.

AUDITABLE RECORDS

The successful Agent shall maintain such accounts and records in connection with its performance or services for the District as may reasonable be required by the District. The Agent shall, at any reasonable time during the Agreement and for a period of at least one year following the completion of work under the Agreement, afford the District's agents and auditors reasonable facilities and access for the examination and audit of its records pertaining to its performance and shall, upon request by the District, produce and exhibit all such records.

NON-DISCRIMINATION

The Agent shall not discriminate or permit discrimination in its operations or employment practices against any person or group of persons on the grounds of race, color, creed, national origin, gender, or handicaps, and shall furnish evidence of compliance with this provision when so requested by the District.

REFERENCES

The Agent will submit a list of at least five (5) references of school districts for whom property/casualty insurance and risk management services are currently rendered by the Agent, not the insurance company. The District will contact the above references at its discretion.

COMPETITIVE SELECTION

Evaluation factors outlined in the section, Proposal Evaluation Factors, shall be applied to all eligible, responsive Agents in comparing proposals and selecting successful Agent(s) for inclusion in the Agreement. While the District reserved the right to interview any or all Agents, the awarding of the proposal may be made without discussion with Agent(s) after proposals are received. Proposals should, therefore, be submitted on the most favorable terms available.

PROPOSERS AND/OR INSURERS ELIGIBILITY

Insurance Companies: It is preferred that insurance companies have a policyholder's rating of A or better and financial size category of VIII or better as published by A.M. Best Company. If an insurance company has a lower rating or is not rated, evidence supporting the financial stability and servicing capabilities of the company must be submitted.

Inter-Governmental Pools: Proposals submitted on behalf of "inter-governmental pools" must provide audited financial statements (complete with auditor's notes) due to the absence of an A.M. Best rating. All pools must identify their reinsurers, the limits and term of coverage, and the amount of risk retained by the pool by line of coverage.

The insurance company or pool must be authorized to do business in the State of Texas.

PROPOSAL EVALUATION FACTORS

The evaluation criteria will include, but not limited to, the items listed below:

1. Documented qualifications and experience of the Agent and the firm's top management staff;
2. Demonstrated ability to provide access to all desirable insurance markets capable of providing the types of coverage being sought by the District;
3. Concept and proposed solutions, including responsiveness to terms and conditions, completeness and thoroughness of documentation;
4. Demonstration of successful prior performance of comparable services in other public schools;
5. Adequacy and technical depth of personnel assigned to the account;
6. Evidence of good organization and management practices;
7. Depth and breadth of services available;
8. Any other item(s) or factor(s) considered by the District to be important, beneficial or have a significant impact on the District's insurance and risk management needs.

**PROPOSAL RESPONSE FORM
(MANDATORY)**

RFP # 1819-02

Property/Casualty Insurance & Risk Management Services

Proposer's Name: _____

Proposer's Address: _____

Proposer's Phone #: _____

Professional Errors & Omissions Carrier: _____

Errors & Omissions Limit/Deductible: _____

Are Sample Policies attached for all proposed lines of coverage? _____

Are at least five (5) school district references attached? _____

We the Proposer, having examined the specifications and being familiar with all conditions in the specifications, hereby propose to provide the services/coverage in accordance with this Request for Proposal. Having reviewed the specifications, we have complied with the requirements and conditions with the noted exceptions on the attached "Itemized List of Deviations and Proposal Conditions."

Printed Name of Proposer

Date

Signature of Proposer

THIS PAGE MUST BE SIGNED AND RETURNED WITH YOUR PROPOSAL

FELONY CONVICTION NOTICE

RFP # 1819-02

Property/Casualty Insurance & Risk Management Services

State of Texas Legislative Senate Bill No. 1, Section 44.034, Notification of Criminal History, Subsection (a), state “a person or business entity that enters into a contract with a school district must give advance notice to the district if the person or an owner or operator of the business entity has been convicted of a felony. The notice must include a general description of the conduct resulting in the conviction of a felony”.

Subsection (b) states “a school district may terminate a contract with a person or business entity if the district determines that the person or business entity failed to give notice as required by Subsection (a) or misrepresented the conduct resulting in the conviction. The district must compensate the person or business entity for services performed before the termination of the contract”.

THIS NOTICE IS NOT REQUIRED OF A PUBLICLY-HELD CORPORATION

I, the undersigned agent for the firm named below, certify that the information concerning notification of felony convictions has been reviewed by me and the following information furnished is true to the best of my knowledge.

Company Name: _____

Printed Name/Title of Authorized Official: _____

Check only one of the following:

- My firm is a publicly-held corporation, therefore, this reporting requirement is not applicable.
- My firm is **NOT** owned nor operated by anyone who has been convicted of a felony.
- My firm **IS** owned or operated by the following individual(s) who has/have been convicted of a felony.

Name of Felon(s): _____
(attach additional sheet if necessary)

Details of Conviction(s): _____
(attach additional sheet if necessary)

Signature of Company Official: _____

THIS PAGE MUST BE SIGNED AND RETURNED WITH YOUR PROPOSAL

**AFFIDAVIT OF NON-COLLUSION, NON-CONFLICT
OF INTEREST & ANTI-LOBBYING**

RFP # 1819-02

Property/Casualty Insurance & Risk Management Services

By submission of this bid, the undersigned certifies that:

1. Neither the bidder nor any of bidder's officers, partners, owners, agents, representatives, employees, or parties in interest, has in any way colluded, conspired, or agreed, directly or indirectly with any person, firm, corporation or other bidder or potential bidder any money or other valuable consideration for assistance in procuring or attempting to procure a contract or fix the prices in the attached bid or the bid of any other bidder, and further states that no such money or other reward will be hereinafter paid.

2. No attempt has been or will be made by this company's officers, employees, or agents to lobby, directly or indirectly the Howe Independent School District Board of Trustees between bid submission date and award by the Howe Independent School District Board of Trustees.

3. No officer, or stockholder of the bidder is a member of the staff, or related to any employee of the Howe Independent School District except as noted herein below:

4. The undersigned certifies that he/she is fully informed regarding the accuracy of the statements contained in this certification, and that the penalties herein are applicable to the bidder as well as to any person signing on his/her behalf.

Signature/Title: _____

Printed Name: _____

Date: _____

THIS PAGE MUST BE SIGNED AND RETURNED WITH YOUR PROPOSAL

REFERENCES

RFP # 1819-02

Property/Casualty Insurance & Risk Management Services

Proposal must include five (5) references for whom your firm has provided similar products/services within the last three (3) years. Please include company name, name of contact person and telephone number of reference.

COMPANY NAME	CONTACT PERSON/TITLE PHONE NUMBER
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Company Name: _____

Signature/Title: _____

Printed Name: _____

Date: _____

THIS PAGE MUST BE SIGNED AND RETURNED WITH YOUR PROPOSAL

ITEMIZED LIST OF DEVIATIONS & PROPOSAL CONDITIONS

RFP # 1819-02

Property/Casualty Insurance & Risk Management Services

Deviations from the required specifications must be fully documented and explained on this proposal form; otherwise, it is presumed the insurance policies and/or coverage documents proposed meet all specification entirely.

PROPOSAL SPECIFICATIONS

RFP # 1819-02

Property/Casualty Insurance & Risk Management Services

	Deductible Per Occurrence	Annual Contribution
PROPERTY		
Risk of Direct Physical Loss to Buildings, Personal Property, and Other Structures – 70 million Blanket Replacement Cost Limit		
All Perils except Wind, Hurricane and Hail	\$ 5,000	
Wind, Hurricane, and Hail	\$250,000	
Flood - \$2,000,000 per occurrence limit	\$ 50,000	
Earthquake - \$2,000,000 per occurrence limit	\$ 50,000	
Crime - \$100,000 per occurrence limit	\$ 5,000	
EQUIPMENT BRAKDOWN		
Property Limit not to exceed \$100,000,000	\$ 5,000	
SCHOOL LIABILITY		
Professional Legal Liability	\$ 2,500	
\$1,000,000 Maximum Annual Aggregate \$1,000,000 per Occurrence Limit		
General Liability	\$ 0.00	
\$1,000,000 per Occurrence Limit		
Employee Benefits Liability	\$ 0.00	
\$100,000 per Occurrence Limit		
PRIVACY & INFORMATION SECURITY		
\$100,000 per Limit for Privacy Liability		
\$100,000 Limit for Claim/Event Response Services		
Notification costs for up to 10,000 individuals	\$ 0.00	
AUTOMOBILE		
Automobile Liability	\$ 1,000	
\$100,000 per Person Bodily Injury Limits \$300,000 per Occurrence Bodily Injury Limits		

\$100,000 per Occurrence Property
Damage Limits

Automobile Physical Damage

Comprehensive – Actual Cash Value \$ 1,000

Collision – Actual Cash Value \$ 1,000

TOTAL CONTRIBUTION

\$ _____

LOSS RUNS

RFP # 1819-02

Property/Casualty Insurance & Risk Management Services

See Attached



Auto, Liability, and Property
Detailed Claims Report as of June 20, 2019

* Estimate of damage reserves pending

Howe ISD

Coverage Period from September 01, 2017 thru September 01, 2019

Event Number	Claim Ref. #	Claimant Name	Date of Loss	Status	Total Incurred	Fund Paid	Recoveries	Member Paid	Total Outstanding	Accident Description
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Auto Liability Contract Number P091905-2017-1 Coverage Period: 09/01/2017 to 09/01/2018

No claims reported for this coverage term.

Auto Liability Contract Number P091905-2018-1 Coverage Period: 09/01/2018 to 09/01/2019

2019074740	384	Taylor*Amanda	2/28/19	Close	1,952	952	0	1,000	0	see attached police report	
Totals : 09/01/2018 to 09/01/2019					1,952	952	0	1,000	0	COUNT OF CLAIMS	1
Totals for Auto Liability :					1,952	952	0	1,000	0	COUNT OF CLAIMS	1



Auto, Liability, and Property
Detailed Claims Report as of June 20, 2019

* Estimate of damage reserves pending

Howe ISD

Coverage Period from September 01, 2017 thru September 01, 2019

Event Number	Claim Ref. #	Claimant Name	Date of Loss	Status	Total Incurred	Fund Paid	Recoveries	Member Paid	Total Outstanding	Accident Description
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Auto Physical Damage

Contract Number P091905-2017-1 Coverage Period: 09/01/2017 to 09/01/2018

No claims reported for this coverage term.

Auto Physical Damage

Contract Number P091905-2018-1 Coverage Period: 09/01/2018 to 09/01/2019

2019074589	220		3/13/19	Open	6,300	3,343	0	1,000	1,957	High winds and heavy rain damaged the roof of the high school. Knocked over the band trailer.
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Totals : 09/01/2018 to 09/01/2019

6,300	3,343	0	1,000	1,957
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COUNT OF CLAIMS

1

Totals for Auto Physical Damage :

6,300	3,343	0	1,000	1,957
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COUNT OF CLAIMS

1



**Auto, Liability, and Property
Detailed Claims Report as of June 20, 2019**

* Estimate of damage reserves pending

Howe ISD

Coverage Period from September 01, 2017 thru September 01, 2019

Event Number	Claim Ref. #	Claimant Name	Date of Loss	Status	Total Incurred	Fund Paid	Recoveries	Member Paid	Total Outstanding	Accident Description
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Crime

Contract Number P091905-2017-1 Coverage Period: 09/01/2017 to 09/01/2018

No claims reported for this coverage term.

Crime

Contract Number P091905-2018-1 Coverage Period: 09/01/2018 to 09/01/2019

No claims reported for this coverage term.



Auto, Liability, and Property

Detailed Claims Report as of June 20, 2019

* Estimate of damage reserves pending

Howe ISD

Coverage Period from September 01, 2017 thru September 01, 2019

Event Number	Claim Ref. #	Claimant Name	Date of Loss	Status	Total Incurred	Fund Paid	Recoveries	Member Paid	Total Outstanding	Accident Description
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Equipment Breakdown

Contract Number P091905-2017-1 Coverage Period: 09/01/2017 to 09/01/2018

No claims reported for this coverage term.

Equipment Breakdown

Contract Number P091905-2018-1 Coverage Period: 09/01/2018 to 09/01/2019

No claims reported for this coverage term.



Auto, Liability, and Property

Detailed Claims Report as of June 20, 2019

* Estimate of damage reserves pending

Howe ISD

Coverage Period from September 01, 2017 thru September 01, 2019

Event Number	Claim Ref. #	Claimant Name	Date of Loss	Status	Total Incurred	Fund Paid	Recoveries	Member Paid	Total Outstanding	Accident Description
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General Liability

Contract Number P091905-2017-1 Coverage Period: 09/01/2017 to 09/01/2018

No claims reported for this coverage term.

General Liability

Contract Number P091905-2018-1 Coverage Period: 09/01/2018 to 09/01/2019

No claims reported for this coverage term.



Auto, Liability, and Property

Detailed Claims Report as of June 20, 2019

* Estimate of damage reserves pending

Howe ISD

Coverage Period from September 01, 2017 thru September 01, 2019

Event Number	Claim Ref. #	Claimant Name	Date of Loss	Status	Total Incurred	Fund Paid	Recoveries	Member Paid	Total Outstanding	Accident Description
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Privacy & Information Security

Contract Number P091905-2017-1 Coverage Period: 09/01/2017 to 09/01/2018

No claims reported for this coverage term.

Privacy & Information Security

Contract Number P091905-2018-1 Coverage Period: 09/01/2018 to 09/01/2019

No claims reported for this coverage term.



Auto, Liability, and Property
Detailed Claims Report as of June 20, 2019

* Estimate of damage reserves pending

Howe ISD

Coverage Period from September 01, 2017 thru September 01, 2019

Event Number	Claim Ref. #	Claimant Name	Date of Loss	Status	Total Incurred	Fund Paid	Recoveries	Member Paid	Total Outstanding	Accident Description
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Property

Contract Number P091905-2017-1 Coverage Period: 09/01/2017 to 09/01/2018

No claims reported for this coverage term.

Property

Contract Number P091905-2018-1 Coverage Period: 09/01/2018 to 09/01/2019

2019074589	190	Howe ISD	3/13/19	Close	1,557	1,557	0	0	0	High winds and heavy rain damaged the roof of the high school. Knocked over the band trailer.
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Totals : 09/01/2018 to 09/01/2019

1,557	1,557	0	0	0
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COUNT OF CLAIMS

1

Totals for Property :

1,557	1,557	0	0	0
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COUNT OF CLAIMS

1



Auto, Liability, and Property

Detailed Claims Report as of June 20, 2019

* Estimate of damage reserves pending

Howe ISD

Coverage Period from September 01, 2017 thru September 01, 2019

Event Number	Claim Ref. #	Claimant Name	Date of Loss	Status	Total Incurred	Fund Paid	Recoveries	Member Paid	Total Outstanding	Accident Description
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Property - Flood and Earthquake

Contract Number P091905-2017-1 Coverage Period: 09/01/2017 to 09/01/2018

No claims reported for this coverage term.

Property - Flood and Earthquake

Contract Number P091905-2018-1 Coverage Period: 09/01/2018 to 09/01/2019

No claims reported for this coverage term.



Auto, Liability, and Property
Detailed Claims Report as of June 20, 2019

* Estimate of damage reserves pending

Howe ISD

Coverage Period from September 01, 2017 thru September 01, 2019

Event Number	Claim Ref. #	Claimant Name	Date of Loss	Status	Total Incurred	Fund Paid	Recoveries	Member Paid	Total Outstanding	Accident Description
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SP Legal Liability

Contract Number P091905-2017-1 Coverage Period: 09/01/2017 to 09/01/2018

No claims reported for this coverage term.

SP Legal Liability

Contract Number P091905-2018-1 Coverage Period: 09/01/2018 to 09/01/2019

No claims reported for this coverage term.

Grand Total:	9,809	5,852	0	2,000	1,957	COUNT OF CLAIMS	3
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Claim Experience Report

Member: Howe ISD
As Of: 13-Mar-2017

Fund Year: 2016 September 1, 2016 - August 31, 2017

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Claim #	Date of Loss	Claimant	Status	Description	Incurred	Paid	Recoveries	Outstanding Reseves	Deductible Incurred
Crime									
No claims reported for this line of coverage					0.00	0.00	0.00	0.00	0.00
Totals	Claim Count		0		0.00	0.00	0.00	0.00	0.00
Educators' Legal Liability									
No claims reported for this line of coverage					0.00	0.00	0.00	0.00	0.00
Totals	Claim Count		0		0.00	0.00	0.00	0.00	0.00
General Liability									
No claims reported for this line of coverage					0.00	0.00	0.00	0.00	0.00
Totals	Claim Count		0		0.00	0.00	0.00	0.00	0.00
Property									
No claims reported for this line of coverage					0.00	0.00	0.00	0.00	0.00
Totals	Claim Count		0		0.00	0.00	0.00	0.00	0.00
Property-Equipment Breakdown									
No claims reported for this line of coverage					0.00	0.00	0.00	0.00	0.00
Totals	Claim Count		0		0.00	0.00	0.00	0.00	0.00
Vehicle Liability									
No claims reported for this line of coverage					0.00	0.00	0.00	0.00	0.00
Totals	Claim Count		0		0.00	0.00	0.00	0.00	0.00
Vehicle Physical Damage									
No claims reported for this line of coverage					0.00	0.00	0.00	0.00	0.00
Totals	Claim Count		0		0.00	0.00	0.00	0.00	0.00



Claim Experience Report

Member: Howe ISD
As Of: 13-Mar-2017

Fund Year: 2015 September 1, 2015 - August 31, 2016

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Claim #	Date of Loss	Claimant	Status	Description	Incurred	Paid	Recoveries	Outstanding Reserves	Deductible Incurred
Crime									
No claims reported for this line of coverage					0.00	0.00	0.00	0.00	0.00
Totals	Claim Count		0		0.00	0.00	0.00	0.00	0.00
Educators' Legal Liability									
No claims reported for this line of coverage					0.00	0.00	0.00	0.00	0.00
Totals	Claim Count		0		0.00	0.00	0.00	0.00	0.00
General Liability									
2840619	06/04/2016	Carin Sanford	Closed	Claimant fell off curb.	0.00	0.00	0.00	0.00	0.00
2932374	08/20/2016	Kailynn Fordham	Closed	Student fell on bleachers.	0.00	0.00	0.00	0.00	0.00
Totals	Claim Count		2		0.00	0.00	0.00	0.00	0.00
Property									
2811619	04/26/2016	Howe I.S.D.	Closed	Wind damage to building.	492,364.97	492,364.97	0.00	0.00	5,000.00
Totals	Claim Count		1		492,364.97	492,364.97	0.00	0.00	5,000.00
Property-Equipment Breakdown									
No claims reported for this line of coverage					0.00	0.00	0.00	0.00	0.00
Totals	Claim Count		0		0.00	0.00	0.00	0.00	0.00
Vehicle Liability									
2868945	07/29/2016	Tracy Blum	Closed	Member lost control and rolled vehicle.	0.00	0.00	0.00	0.00	0.00
Totals	Claim Count		1		0.00	0.00	0.00	0.00	0.00
Vehicle Physical Damage									
2868945	07/29/2016	Howe I.S.D.	Closed	Member lost control and rolled vehicle.	30,441.35	36,750.00	6,308.65	0.00	1,000.00
Totals	Claim Count		1		30,441.35	36,750.00	6,308.65	0.00	1,000.00



Claim Experience Report

Member: Howe ISD
As Of: 13-Mar-2017

Fund Year: 2014 October 1, 2014 - August 31, 2015

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Table with 10 columns: Claim #, Date of Loss, Claimant, Status, Description, Incurred, Paid, Recoveries, Outstanding Reserves, Deductible Incurred. Rows include Crime, Educators' Legal Liability, General Liability, Property, Property-Equipment Breakdown, Vehicle Liability, and Vehicle Physical Damage, each with a 'Totals' row showing 0 claim counts and 0.00 values for financial metrics.