

# CONFIRMATION OF INSURANCE

Assigned No.: PPI G2727156A 002

This Confirmation of Insurance is evidence that, in accordance with your instructions and acting on your behalf, we have procured from certain Insurer(s) the coverage described hereinafter. This Confirmation is subject to all the terms and conditions of the Policy or Cover Note to be issued and shall be automatically terminated and voided by delivery of said Policy or Cover Note. In the event of any inconsistency, the terms and conditions of the Policy or Cover Note prevail.

1. Name of Assured: **WEBB COUNTY**
  2. Mailing Address: 1110 Washington Street, Suite 204  
Laredo, TX 78040
  3. Insurer(s): **Illinois Union Insurance Company**  
A.M. Best's Rating: **A++ XV**
  4. Confirmation Term: From: **October 1, 2014** To: Policy Issuance **12:01 AM** Local Standard Time
  5. Policy Term: From: **October 1, 2014** To: **October 1, 2015** **12:01 AM** Local Standard Time
  6. Coverage: **Premises Pollution Liability and Storage Tank Liability**
  7. Interest: **PER ATTACHED**
  8. Limits of Liability: **PER ATTACHED**
  9. Underlying Limit(s) and Deductible(s): **PER ATTACHED**
  10. Description of Location and Subject of Insurance: **PER ATTACHED**
  11. Service of Suit should be sent per General Conditions herein.
  12. Rate: **PER ATTACHED**
  13. Premium: \$ **16,800.00**  
Policy Fee: \$ **-**  
Tax Applicable Amount: \$ **16,800.00**  
Surplus Lines Tax: \$ **814.80**  
Stamping Fee: \$ **10.08**  
**TOTAL: \$17,624.88**
- PAYABLE TO:** McGriff, Seibels & Williams of Texas, Inc.  
818 Town & Country Blvd, Suite 500  
Houston, Texas 77024-4549

**FOR INFORMATION, OR  
TO MAKE A COMPLAINT, CALL:  
1-800-877-1449**

**PREMIUM DUE DATE TO MSW:** Upon receipt

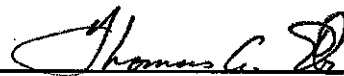
14. This Confirmation is made and accepted subject to the foregoing stipulations and General Conditions attached hereto, which are specially referred to and made a part of this Confirmation together with such other provisions, agreements or conditions as may be endorsed hereon or added hereto; and no officer, agent or other representative of the Undersigned shall have power to waive or be deemed to have waived any provisions or condition of this Confirmation unless such waiver, if any shall be written upon or attached hereto, nor shall any privilege or permission affecting this Confirmation exist or be claimed by the Assured unless so written or attached.

Issued at: HOUSTON, Texas

**McGRIFF, SEIBELS & WILLIAMS OF TEXAS, INC.**

On: October 14, 2014  
rmb

BY: \_\_\_\_\_



Authorized Representative

# CONFIRMATION OF INSURANCE

Assigned No.: 01-593-92-57

This Confirmation of Insurance is evidence that, in accordance with your instructions and acting on your behalf, we have procured from certain Insurer(s) the coverage described hereinafter. This Confirmation is subject to all the terms and conditions of the Policy or Cover Note to be issued and shall be automatically terminated and voided by delivery of said Policy or Cover Note. In the event of any inconsistency, the terms and conditions of the Policy or Cover Note prevail.

1. Name of Assured: **WEBB COUNTY JUVENILE JUSTICE ALTERNATIVE EDUCATION PROGRAM**
2. Mailing Address: 1110 Washington Street, Suite 204  
Laredo, TX 78040
3. Insurer(s): **National Union Fire Insurance Company of Pittsburg, PA**  
A.M. Best's Rating: **A XV**
4. Confirmation Term: From: **October 1, 2014** To: Policy Issuance **12:01 AM** Local Standard Time
5. Policy Term: From: **October 1, 2014** To: **October 1, 2015** **12:01 AM** Local Standard Time
6. Coverage: **School Leaders Risk Protector**
7. Interest: **PER DECLARATIONS**
8. Limits of Liability: **PER DECLARATIONS**
9. Underlying Limit(s) and Deductible(s): **PER DECLARATIONS**
10. Description of Location and Subject of Insurance: **PER DECLARATIONS**
11. Service of Suit should be sent per General Conditions herein.
12. Rate: **PER DECLARATIONS**
13. Premium: \$ **7,065.00**
- Policy Fee: **PAYABLE TO:** McGriff, Seibels & Williams of Texas, Inc.  
818 Town & Country Blvd, Suite 500  
Houston, Texas 77024-4549
- TOTAL: \$7,065.00**

FOR INFORMATION, OR  
TO MAKE A COMPLAINT, CALL  
1-800-877-1449

PREMIUM DUE DATE TO MSW: Upon receipt

14. This Confirmation is made and accepted subject to the foregoing stipulations and General Conditions attached hereto, which are specially referred to and made a part of this Confirmation together with such other provisions, agreements or conditions as may be endorsed hereon or added hereto; and no officer, agent or other representative of the Undersigned shall have power to waive or be deemed to have waived any provisions or condition of this Confirmation unless such waiver, if any shall be written upon or attached hereto, nor shall any privilege or permission affecting this Confirmation exist or be claimed by the Assured unless so written or attached.

Issued at: HOUSTON, Texas

**McGRIFF, SEIBELS & WILLIAMS OF TEXAS, INC.**

On: October 14, 2014  
mmb

BY:   
Authorized Representative