Scott, Rhonda

From: Williams, Kathy

Sent: Tuesday, September 16, 2025 2:53 PM

To:Reeves, MandeCc:Scott, RhondaSubject:FW: USI Proposal

Attachments: Lubbock County - 25-26 Renewal Propoosal.PDF; USI Insurance to Bind Signature Page

9.16.2025.pdf; Contract Coversheet USI Crime 9.16.2025.pdf; Contract Coversheet USI

WorkersComp 9.1+.pdf

Mande,

Please see the contract renewal for the Crime and Workers' Comp. insurance. I had Rhonda put these on the agenda for Sept. 29th. Please let me know if you have any questions.

Thanks, Kathy

Kathy Williams

County Auditor Lubbock County WK 806.775.1097 FAX 806.775.7917

Email kwilliams@lubbockcounty.gov

From: Cristy Urquidi < Cristy. Urquidi@usi.com> Sent: Tuesday, September 16, 2025 12:33 AM

To: Williams, Kathy <KWilliams@lubbockcounty.gov> **Cc:** Robb Pridemore <Robb.Pridemore@usi.com>

Subject: RE: USI Proposal

Kathy

Please find the requested proposal.

Let me know if you have any questions.

Thank You!

CRISTY URQUIDI, CISR

Partner | Commercial Lines Team Leader

USI Insurance Services 303 N. Oregon, Ste. 310

cristy.urquidi@usi.com | www.usi.com | in









USI ONE ADVANTAGE® | Our Approach to Client Solutions. Watch Video > **EXECUTIVE INSIGHTS** | Guidance on Top Issues from USI Experts. Access Insights > I'M WITH U | Advancing Our Commitment to Diversity, Equity & Inclusion. Learn More > **TOP INSURANCE EMPLOYER** | Multiple Industry Awards and Recognitions! View Awards >

From: Williams, Kathy < KWilliams@lubbockcounty.gov>

Sent: Monday, September 15, 2025 10:11 AM To: Cristy Urquidi <Cristy.Urquidi@usi.com> Cc: Robb Pridemore < Robb. Pridemore@usi.com>

Subject: USI Proposal

Good Morning Cristy,

Would it be possible to get a PDF of the Crime and Excess Workers Compensation Insurance Proposal? Robb has dropped of bound copies but I'd like email documentation.

Thank you, Kathy

Kathy Williams

County Auditor Lubbock County WK 806.775.1097 FAX 806.775.7917 Email kwilliams@lubbockcounty.gov

Please note that you may not rely on email communication to us to report a claim or to give us instructions to place, bind, change or terminate coverage unless we have subsequently confirmed to you in writing that we have received your message and will be taking the action you have requested. Confidentiality Notice: The information contained in this email message including any attachments is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient and have received this communication in error, please contact the sender by reply email and destroy all copies of the original message. Thank you. If you would like to manage your email preferences, click here.

Scott, Rhonda

From: Williams, Kathy

Sent: Monday, September 15, 2025 11:15 AM

To:Scott, RhondaSubject:USI for 29th Court

Rhonda,

Please put on the USI Crime and Excess Workers Compensation Insurance Proposal for the Judge to sign for the Court for the 29th. Also, we need to put on for that Court to pay outside the AP process b/c it's due on 10/10/25. Once they send me the electronic version, I forward to you for back up.

Thanks, Kathy

Kathy Williams

County Auditor Lubbock County WK 806.775.1097 FAX 806.775.7917

Email kwilliams@lubbockcounty.gov



LUBBOCK COUNTY CONTRACT COVERSHEET

TO BE COMPLETED BY THE DEPARTMENT:

Department: Auditor							
Department Contact Perso	on: Kat	hy Williams		Pho	ne Num	ber: <u></u>	806-775-1098
Vendor Name: _USI - T	rave	elers Insur	ance	; Ve	ndor Nui	mber	.: 130194
New ✓Renewal ☐M Are federal funds being ut	odifica	a <u>tio</u> n If con	tract is	part of a grai	nt is it:[N∈	ew Continuation
Synopsis of what this cont	ract w	vill do for your o	departr	ment (be specif	ic):		
Travelers Casualty ar	nd Su	rety - Crime	Policy	/ renewal			
Line item the contract will	be pa	id out of or fur	nds will	be receipted t	o: <u>011007</u>	'10-58	0100
Was this contract awarded awarded in Commissioner Was this contract exempt and date exemption was a	s Cour from	rt procurement ir	n any m	anner? ✓ Yes [No If Y		
Date submitted by Depart TO BE COMPLETED I				Signature: <u>K</u>		ıms	Digitally signed by Kathy Williams Date: 2025.09.16 14:42:54 -05'00
		110 1112 001		CI PROCES) .		
Contract Number:	(OIP Number:		Date COIP Recei		Dat	e COIP Acknowledged:
Contract Number:	(Dat	e COIP Acknowledged:
		COIP Number:		Date COIP Recei	ved:	Dat	e COIP Acknowledged:
Contract Number: Date Munis checked for Funding:	Da				ved:		e COIP Acknowledged:
Date Munis checked for	Da	COIP Number:		Date COIP Recei	ved:		-
Date Munis checked for Funding:	Da Coi	COIP Number:		Date COIP Recei	ved:		-
Date Munis checked for	Da Con	COIP Number:		Date COIP Recei	ved: al for :	or	-
Date Munis checked for Funding: Date and Person Sent to additional Review (e.g	Da Con	te Reviewed by ntract Manager: Date Returne		Date Sent to Leg Assignment Date Sent to	ved: al for :	or	Contract Assigned to: Date Returned by
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Date Munis checked for Funding: Date and Person Sent to additional Review (e.g	Da Con for -,	te Reviewed by ntract Manager: Date Returne	ed by	Date Sent to Leg Assignment Date Sent to	ved: al for : Vendor f or Signatu	or or re:	Contract Assigned to: Date Returned by

Contract Coversheet updated 8/2023



LUBBOCK COUNTY CONTRACT COVERSHEET

TO BE COMPLETED BY THE DEPARTMENT:

Department: Auditor						
Department Contact Perso	on: Kathy Williams		Pho	ne Numb	oer: <u>8</u>	06-775-1098
Vendor Name: USI - S □New ☑Renewal □M	odification If co	ntract i	s part of a gra	nt is it:	Nev	w Continuatior
Are federal funds being ut	ilized?YesNo	lf Yes, n	otify purchasing	g to run a	chec	k in SAM.
Synopsis of what this cont	ract will do for you	r depart	ment (be speci	fic):		
Safety National Casua	alty Insurance -	Excess	s Workers Co	mpensa	ation	l
Line item the contract will	be paid out of or f	unds wi	ll be receipted t	o: <u>011007</u>	10-580	1100
Was this contract awarded		ation?[Yes√No If Yes	s, list solic	itatio	on number and date
awarded in Commissioner Was this contract exempt		in any r	nanner?[√]Yes[□No If Ye	es, list	 t type of exemption
and date exemption was a						
Date submitted by Depart	ment: 9.16.2025		Signature: K	athy Willia	ms	Digitally signed by Kathy Williams Date: 2025.09.16 14:47:16 -05'00'
TO BE COMPLETED [)UKING THE CO	Juli Di	ICI DDIN LES			
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Contract Number: Date Munis checked for	Date Reviewed b Contract Manage	y er:	Date COIP Recei	al for :	Co	
Date Munis checked for Funding: Date and Person Sent to additional Review (e.g	Date Reviewed b Contract Manage	y er:	Date Sent to Leg Assignment Date Sent to	al for :	Co	ontract Assigned to: Date Returned by
Date Munis checked for Funding: Date and Person Sent to additional Review (e.g	Date Reviewed b Contract Manage	y er:	Date Sent to Leg Assignment Date Sent to	al for :	Co	ontract Assigned to: Date Returned by
Date Munis checked for Funding: Date and Person Sent to additional Review (e.g	Date Reviewed b Contract Manage	ned by	Date Sent to Leg Assignment Date Sent to	al for : Vendor for Signatur	or re:	ontract Assigned to: Date Returned by

Contract Coversheet updated 8/2023

Crime & Excess Workers Compensation Insurance Proposal

Lubbock County



Robb Pridemore, CRM, CSRM, CIC, AAI Cristy Urquidi, CISR

Date Prepared: Septamber 04, 2025



Table of Contents

About USI Insurance Services	3
Service Team	
Premium Summary	
Travelers Casualty and Surety Company	
Safety National Casualty	
Agency Bill Payment Options	
USI Disclosures	
InsurLink Client Portal	
CertVault SM for Certificate Delivery	
USI Privacy Notice	
Insurance Carrier Ratings	
Required Signature Pages	



About USI Insurance Services

USI is one of the largest insurance brokerage and consulting firms in the world, delivering property and casualty, employee benefits, personal risk, program and retirement solutions to large risk management clients, middle market companies, smaller firms and individuals. Headquartered in Valhalla, New York, USI connects together over 10,500 industry leading professionals across ~200 offices to serve clients' local, national and international needs. USI has become a premier insurance brokerage and consulting firm by leveraging the USI ONE Advantage®, an interactive platform that integrates proprietary and innovative client solutions, networked local resources and expertise, and enterprise-wide collaboration to deliver customized results with positive, bottom line impact. USI attracts best-in-class industry talent with a long history of deep and continuing investment in our local communities. For more information, visit usi.com.

The USI ONE Advantage

What truly distinguishes USI as a leading insurance brokerage and consulting firm is the USI ONE Advantage, a game-changing value proposition that delivers clients a robust set of risk management and benefit solutions and exclusive resources with financial impact. USI ONE® represents **Omni, Network, Enterprise**—the three key elements that create the USI ONE Advantage and set us apart from the competition.

Omni – USI's Proprietary Analytics

Omni, which means "all," is USI's one-of-a-kind solutions platform—real time, interactive, dynamic and evolving, and customized for each client. Built in-house by USI subject matter experts, Omni captures the

experience of more than 500,000 clients, thousands of professionals and over 150 years of business activity through our acquired agencies into targeted, actionable solutions across property & casualty, employee benefits, personal risk and retirement. Omni features over a thousand solutions, case studies, work products and detailed analysis across industry verticals in a single dashboard. USI consultants input the client's personalized data into Omni – highlighting their business, employees, and risks. The results feature client specific recommendations with quantified financial impact and the ability to analyze alternative scenarios with the touch of a button.

USI ONE

Advantage⁶

Network - USI's Local and National Resources

USI has made a very large investment in local resources and technical expertise, with more than 10,000 professionals networked nationally to build strong vertical capabilities and integrated account teams. Our local and regional experts ensure account team availability, hands-on service, and ongoing diligent follow-through so we can deliver on the solutions we customize for our clients.

Enterprise - USI's Team Based Strategic Planning

USI's enterprise planning is a disciplined, focused, analysis centered on our client's issues and challenges. Highly consultative meetings integrate USI's Omni analytics with our broad resource network to build a risk management strategy aligned with client business needs. Our enterprise process is a proven method for identifying, quantifying and minimizing client risk exposures.

The USI ONE Advantage—our Omni knowledge engine, with our Network of local and national resources, delivered to our clients through our Enterprise planning process gives USI fundamentally different solutions, the resources to deliver, and a process to bring superior results to our clients.



Service Team

USI Southwest Inc., El Paso

303 N. Oregon, Ste 310, El Paso, TX 79901

(915) 544-3111 www.usi.com

Producers

Your Producer is Robb Pridemore

Direct Number: (915) 534-9710

E-Mail: Robb.Pridemore@usi.com

Account Management Team

Your Account Manager is Cristina Urquidi

Direct Number: (915) 534-9456

E-Mail: Cristy.Urquidi@usi.com

Your Account Representative is Anapaula Rodriguez

Direct Number: (915) 534-9424

E-Mail: Anapaula.Rodriguez@usi.com

Additional USI Contacts

Your Claims Specialist contact is Kyna Santiago

Direct Number: (915) 534-9476

E-Mail: Kyna.Santiago@usi.com



Premium Summary

Coverage	Expiring Term Premium	Proposed Term Premium
Crime	\$6,963.00	\$7,027.00
Excess Workers Compensation	\$253,804.00	\$284,362.00
TOTAL ESTIMATED ANNUAL PREMIUM	\$260,767.00	\$291,389.00

Workers Compensation:

- 22-23 Payroll \$53,833,795 (premium rate \$0.374)
- 23-24 Payroll \$58,137,842 (premium rate \$0.4003)
- 24-25 Payroll \$74,648,168 (premium rate \$0.34)
- 25-26 Payroll \$81,995,992 (premium rate \$0.3468)

Binding Requirements:

"Client Authorization to Bind" Signed by the insured

Billing:

- Travelers (Agency Bill) Full Premium due by 10/10
- Safety National (Agency Bill) Premium due by 10/10

Note

In evaluating your exposure to loss, we have been dependent upon information provided by you. If there are other areas that need to be evaluated prior to binding of coverage, please bring these areas to our attention. Should any of your exposures change after coverage is bound, such as your beginning new operation, hiring employees in new states, buying additional property, etc., please let us know so proper coverage(s) can be discussed.

Higher limits may be available. Please contact us if you would like a quote for higher limits.



Travelers Casualty and Surety Company



Travelers Casualty and Surety Company of America QUOTE OPTION #1

CRIME COVERAGES:

Crime Insuring Agreements	Single Loss Limit of Insurance	Single Loss Retention	Crime Insuring Agreements	Single Loss Limit of Insurance	Single Loss Retention
A - Fidelity			F - Computer Crime		
1. Employee Theft	See Endorsement		Computer Fraud	\$1,000,000	\$25,000
2. ERISA Fidelity	Not Covered		Computer Program and Electronic	Not Covered	
Employee Theft of Client Property	Not Covered		Data Restoration Expense		
B - Forgery or Alteration	\$1,000,000	\$25,000	G - Funds Transfer Fraud	\$1,000,000	\$25,000
C - On Premises	\$1,000,000	\$25,000	H - Personal Accounts Protection		
			Personal Accounts Forgery or Alteration	Not Covered	
			2. Identity Fraud Expense Reimbursement	Not Covered	
D - In Transit	\$1,000,000	\$25,000	I - Claim Expense	\$5,000	\$0
E - Money Orders and Counterfeit Money	\$1,000,000	\$25,000			

Insured's Premises Covered: Worldwide, except

TOTAL ANNUAL PREMIUM - \$7,027.00

(Other term options listed below, if available)

LIMIT DETAIL:

Shared Additional Defense Limit of Liability: N/A

Crime Policy Aggregate Limit of Insurance: N/A

PREMIUM DETAIL:

Term	Payment Type	Premium	Taxes	Surcharges	Total Premium	Total Term Premium
1 Year	Prepaid	\$7,027.00	\$0.00	\$0.00	\$7,027.00	\$7,027.00

POLICY FORMS APPLICABLE TO QUOTE OPTION # 1:

CRI-2001-0109 Crime Declarations Page CRI-3001-0109 Crime Policy Form

ENDORSEMENTS APPLICABLE TO QUOTE OPTION #1:

ACF-7006-0511 Removal of Short-Rate Cancellation Endorsement

CRI-10073-0311 Government Entity Crime Coverage Without Individual Exclusion Endorsement

Employee Theft Per Loss Coverage - \$1,000,000

Limit

Employee Theft Per Loss Coverage - \$25,000

Retention

CRI-19072-0315 Global Coverage Compliance Endorsement – Adding Financial Interest Coverage and

Sanctions Condition and Amending Territory Condition

CRI-19085-0919 Social Engineering Fraud Insuring Agreement Endorsement

CRI-19095-0517 Replace Insuring Agreement E. Money Orders And Counterfeit Money Endorsement

CRI-19096-0517 Amend Discovery And Amend Termination As To An Employee Endorsement

CRI-19101-1117 Amendatory Endorsement for Certain ERISA Considerations
CRI-19115-0519 Telecommunication Fraud Insuring Agreement Endorsement

CRI-19122-1120	Delete Exclusion For Prior Losses Involving Subsidiaries Endorsement
CRI-19134-0623	Replace Consolidation, Merger Or Purchase Of Assets And Acquisitions General Agreements Endorsement
CRI-4019-0911	Texas Changes Endorsement
CRI-5044-0613	Texas Cancellation or Termination Endorsement
CRI-7002-0109	Exclude Designated Persons or Classes of Persons or Employees Endorsement
CRI-7053-0109	Extend Premises to Entire Plot of Ground Under Insured's Control Endorsement
CRI-7059-0109	Amend Definition of Employee Endorsement
CRI-7101-0109	Amend Definition of Employee to Include Independent Contractor Endorsement
CRI-7126-0109	Government Entity Crime Endorsement - Faithful Performance of Duty
CRI-7224-0517	Tax Liability Endorsement

CONTINGENCIES APPLICABLE TO QUOTE OPTION # 1:

This quote is contingent on the acceptable underwriting review of the following information prior to the quote expiration date.

1 None

Safety National Casualty



PRICING & CONDITIONS:

Created for: LUBBOCK COUNTY, TEXAS

Line(s) of Coverage: Excess Workers' Compensation

	and the second second decision of the second decision of	
CONTRACT TERMS		OPTION 19167903529
Liability Period		10/01/2025 - 10/01/2026
Payroll Reporting Period		10/01/2025 - 10/01/2026
Payroll		\$ 81,995,991
Manual Premium		\$ 543,253
Experience Modification Factor		1.000
Standard Premium		\$ 543,253
Self-Insured Retention		\$ 1,000,000
Specific Limit		Statutory
Employers Liability Limit	Per Occ & Agg	\$ 1,000,000 / \$ 1,000,000
Premium Rate	Rate \$100 Payroll	\$ 0.3468
Deposit Premium		\$ 284,362
Minimum Premium		\$ 284,362
Pay Plan		ANNUAL PAYMENT
Audit Type		Voluntary

Previous Policy #: SP 4067384 **Account #:** 6018462

Quote expires one day after payroll reporting period effective date for each quote option.



ENDORSEMENTS

Option 19167903529					
TEXAS MANDATORY	ENDORSEMENT(S), IF APPLICABLE				
0288 00 0908 (XWC)	EMPLOYERS' LIABILITY PER OCCURRENCE & AGGREGATE MAXIMUM LIMITS OF LIABILITY				
0467 02 1105 (XWC)	EMPLOYERS' LIABILITY MAXIMUM LIMIT AND AGGREGATE MAXIMUM LIMIT OF INDEMNITY				
6000 00 0121 (XWC)	TERRORISM RISK INSURANCE PROGRAM REAUTHORIZATION ACT ENDORSEMENT				

CONTINGENCIES:

The quote is subject to the following:

Option 19167903529

- The Excess Workers Compensation program quoted is contingent upon also binding any other lines quoted with Safety National. Safety National may consider providing revised or additional quote options for individual lines of coverage subject to further underwriting review and approval.
- 2 Commission shall be fully earned by the Broker of Record at the inception of the Payroll Reporting Period as identified on the bound Excess Workers Compensation Insurance Quotation.
- 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, extended, and/or re-authorized (the Act), terrorism loses 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 80% 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%
- Subject to receipt, review and acceptance of information contained in SNCC's Employee Concentration Supplemental Information (08/04) form prior to binding.

COMMENTS:

- Included in our quote: MAP Client Services. These resources consist of both risk control and claim services, including resources like Safety Essentials Online, Workers' Comp Kit, Safety Training Source, and Office Ergonomics Solution. Medical Management Program: These services help facilitate complicated claims towards the best-possible outcome. Available services include Catastrophic Claims Consulting, Impartial Medical Review, Long-Term Claims Evaluation, and Chronic Pain & Opioid Dependency Programs.
- 2 Endorsements mandated by the coverage state(s) will automatically be added to your policy regardless of whether they are shown in the above schedule. In addition, a change in an endorsement form number may occur as a result of state filing requirements/updates arising subsequent to this quote.



RISK CONTROL RESOURCES:

Safety National understands the challenges that employers face to maintain a healthy workforce and has developed a suite of online risk control resources to help improve their safety and compliance programs. Collectively called MAP Client Services®, these tools are provided on a complimentary basis to help improve program management, analysis and prevention efforts. Our clients can actively utilize them 24/7 to build and maintain a best practice culture to keep their employees safe and help minimize their workers' compensation costs. View the attached brochure for more details.

MEDICAL MANAGEMENT PROGRAM:

Safety National provides a team of expert nurses and medical management analysts to help provide oversight of medical treatment to injured workers, mitigate medical exposure and maximize medical outcomes.

Policyholders receive resources to assist with the following:

- Pharmacy benefit management
- Large bill review
- Home modifications
- Administration of MSAs



Agency Bill Payment Options

We sincerely appreciate the opportunity to service your insurance needs. We believe good credit relationships are established by making our clients aware in advance of the terms of our payment procedures.

OUR BASIC PAYMENT PLAN IS THAT ALL PAYMENTS ARE DUE ON OR BEFORE THE EFFECTIVE DATE OF COVERAGE. THERE ARE THREE METHODS OF PAYMENT AVAILABLE:

-CASH ON EFFECTIVE DATE
-PREMIUM FINANCING BY A PREMIUM FINANCE COMPANY
-INSURANCE COMPANY PAYMENT PLAN, IF AVAILABLE

Please note that USI Insurance Services LLC and its subsidiaries and affiliates do not provide customer financing.

In some instances, you will receive invoices covering additions or changes to your coverage, endorsements. These invoices are payable upon receipt. You will receive a monthly statement of your account as a reminder as we realize that it is occasionally possible to miss a payment through oversight. Accounts with payments past due are subject to cancellation for non-payment. This is a serious situation as your insurer may refuse to reinstate coverage even if payment is made later. Accounts are subject, but not limited to, reasonable attorney fees, interest, collection fees and/or court costs incurred in connection with collection of past due balances.

<u>PAYMENTS</u>: Please remember to return the remittance copy of the invoice with your payment in the

provided envelope. Otherwise, all payments will be applied to your oldest balance or left

as unapplied if we cannot identify the applicable invoice being paid.

<u>CREDITS</u>: Credit invoices may be applied against other invoices due us. Please indicate in your

remittance or contact us as to where to apply credit invoices on your account.

These payment procedures will apply for any and all policy renewals or future business written.

If you have any questions concerning our payment procedures or any other matters pertaining to account payments, please contact your insurance representative.



USI Disclosures

Direct Bill DISCLOSURE: The Insurance Company operates independently for the financing of your insurance premium. Your agreement to finance this premium is directly with the insurance company and not USI Insurance Services.

If payment is not received by the due date, the insurance company could cancel your insurance policy(s) for non-payment of premium. The insurance company has the right to honor the cancellation date and **NOT** offer reinstatement or rewrite the insurance coverage.

We are not in a position to make monthly reminders or verify that your payment was received. Please take the necessary action to avoid possible cancellation of your insurance policy(s) which you are paying directly to the insurance company.

Information Concerning Our Fees: As a licensed insurance producer, USI is authorized to confer with or advise our clients and prospective clients concerning substantive benefits, terms or conditions of insurance contracts, to sell insurance and to obtain insurance coverages for our clients. Our compensation for placement of insurance coverage, unless otherwise specifically negotiated and agreed to with our client, is customarily based on commission calculated as a percentage of the premium collected by the insurer and is paid to us by the insurer. We may also receive from insurers and insurance intermediaries (which may include USI affiliated companies) additional compensation (monetary and non-monetary) based in whole or in part on the insurance contract we sell, which is contingent on volume of business and/or profitability of insurance contracts we supply to them and/or other factors pursuant to agreements we may have with them relating to all or part of the business we place with those insurers or through those intermediaries. Some of these agreements with insurers and/or intermediaries include financial incentives for USI to grow its business or otherwise strengthen the distribution relationship with the insurer or intermediary. Such agreements may be in effect with one or more of the insurers with whom your insurance is placed, or with the insurance intermediary we use to place your insurance. You may obtain information about the nature and source of such compensation expected to be received by us, and, if applicable, compensation expected to be received on any alternative quotes pertinent to your placement upon your request.

Document Delivery DISCLOSURE: USI strives to make your interactions with us easy and efficient. Therefore, we intend to deliver your policy and all policy-related documents electronically through our InsurLink client portal or through email. If you do not wish to receive these documents electronically or if you would like a paper copy of any or all documents at no cost to you, please notify your client service representative in writing. If your email or electronic contact information changes, please notify your client service representative in writing.

Reviewing Client Contracts DISCLOSURE: As a service to our clients, upon their request, USI will review those portions of your contract regarding the insurance and indemnity requirements as they relate to your insurance program and provide comments and/or recommendations based upon such review. This service should not be taken as legal advice and it does not replace the need for review by the insured's own legal counsel.



InsurLink Client Portal

InsurLink, USI's secure, interactive portal for client collaboration and self- service resources, helps streamline the administration of your insurance program with efficient, environmentally friendly, paperless transactions.

InsurLink enables you to manage your program online in seamless collaboration with your USI service team 24 hours a day, 7 days a week.

With our user-friendly, intuitive software you can:



View and reprint Certificates of Insurance.



View policies, endorsements and other key documents.



Generate and issue Certificates of Insurance quickly and accurately.



Share documents with your USI service team



Reprint and replace Auto ID cards.*

For more information about InsurLink, contact your USI service representative.



Get our mobile app for Android or Apple and access your InsurLink client portal on the go!



^{*}Limitations in NY and NJ

CertVaultSM for Certificate Delivery

USI utilizes CertVaultSM, a cloud-based system for storage and secure delivery of certificates of insurance to your certificate holders.

Benefits of CertVaultSM

- Supports USI's go-green initiative by eliminating printed and mailed certificates.
- Provides faster delivery than standard printing and mailing.
- Reduces your contact with Holders by providing them with self-service access to obtain issued certificates.
- Provides USI with a reliable reporting mechanism to identify Holders that have taken delivery of certificates, as well as Holders that have not retrieved their issued certificates. (This data can be used to facilitate a review of the Holder list prior to renewal).
- Protects your information by delivering your certificates securely with Blockchain Technology to ensure authenticity.





Certificate Delivery Process for Holders

When USI issues a certificate for one of your Holders, they are sent a CertVaultSM registration letter via email or regular mail.

After registration is completed, the Holder representative can view only their certificate on the CertVaultSM platform.



Client Copies of Certificates

You will continue to receive copies of certificates issued on your behalf via the method requested (email or regular mail).



For More Information

If you have any questions, please contact your USI Account Management Team.

For more information about CertVaultSM, contact your USI service representative.

"Certvault $^{\rm SM"}$ is a service mark of Patra Corporation



USI Privacy Notice

Our Privacy Promise to You

USI provides this notice to you, our customer, so that you will know what we will do with the personal information, personal financial and health information (collectively referred to as the "protected information") that we may receive from you directly or receive from your health care provider or receive from another source that you have authorized to send us your protected information. We at USI are concerned about your privacy and assure you that we will do what is required of us to safeguard your protected information.

What types of information will we be collecting?

USI collects information from you required both for our business and pursuant to regulatory requirements. Without it, we cannot provide our products and services for you. We will be collected protected information about you from:

- Applications or other forms, such as name, address, Social Security number, assets and income, employment status and dependent information;
- Your transactions with us or your transactions with others, such as account activity, payment history, and products and services purchased;
- Consumer reporting agencies, such as credit relationships and credit history. These agencies may retain their reports and share them with others who use their services;
- Other individuals, businesses and agencies, such as medical and demographic information; and
- Visitors to our websites, such as information from on-line forms, site visitorship data and on-line information collection devices, commonly called "cookies."

What will we do with your protected information?

The information USI gathers is shared within our company to help us maximize the services we can provide to our customers. We will only disclose your protected information as is necessary for us to provide the insurance products and services you expect from us. USI does not sell your protected information to third parties, nor does it sell or share customer lists.

We may also disclose all of the information described above to third parties with which we contract for services. In addition, we may disclose your protected information to medical care institutions or medical professionals, insurance regulatory authorities, law enforcement or other government authorities, or to affiliated or nonaffiliated third parties as is reasonably necessary to conduct our business or as otherwise permitted by law.

Our Security Procedures

At USI, we have put in place the highest measures to ensure the security and confidentiality of customer information. We will handle the protected information we receive by restricting access to the protected information about you to those employees and agents of ours who need to know that information to provide you with our products or services or to otherwise conduct our business, including actuarial or research studies. Our computer database has multiple levels of security to protect against threats or hazards to the integrity of customer records, and to protect against unauthorized access to records that may harm or inconvenience our customers. We maintain physical, electronic, and procedural safeguards that comply with federal and state regulations to safeguard all of your protected information.

Our Legal Use of Information

We retain the right to use ideas, concepts, know-how, or techniques contained in any nonpublic personal information you provide to us for our own purposes, including developing and marketing products and services.

Your Right to Review Your Records

You have the right to review the protected information about you relating to any insurance or annuity product issued by us that we could reasonably locate and retrieve. You may also request that we correct, amend or delete any inaccurate information by writing to us at the above address.



Insurance Carrier Ratings

As a service to our clients, USI is furnishing an assessment by a financial rating service of the insurance companies included in our proposal. We are including the legends used by this service.

All ratings are subject to periodic review, therefore, it is important to obtain updated ratings from each service. Should you desire further information concerning the financial statements of any of the insurance companies being proposed, so that you can make your own assessment of the financial strength of the companies being offered, it is available from USI at your request.

USI has made no attempt to determine independently the financial capacity of the insurance companies that we are including in our proposal as we believe the nationally recognized services are better equipped to comment.

A. M. BEST RATINGS

A++ & A+	Superior	D	Poor
A & A-	Excellent	E	Under Regulatory Supervision
B++ & B+	Good	F	In Liquidation
B & B-	Fair	S	Rating Suspended
C++ & C+	Marginal	NR	Not Rated

FINANCIAL SIZE CATEGORY

(In \$ Thousands)

Class I	Less than		1,000
Class II	1,000	to	2,000
	•		,
Class III	2,000	to	5,000
Class IV	5,000	to	10,000
Class V	10,000	to	25,000
Class VI	25,000	to	50,000
Class VII	50,000	to	100,000
Class VIII	100,000	to	250,000
Class IX	250,000	to	500,000
Class X	500,000	to	750,000
Class XI	750,000	to	1,000,000
Class XII	1,000,000	to	1,250,000
Class XIII	1,250,000	to	1,500,000
Class XIV	1,500,000	to	2,000,000
Class XV	2,000,000	to	or greater

RATING "NOT ASSIGNED" CLASSIFICATIONS

NR-1 Insufficient Data NR-3 Rating Procedure Inapplicable NR-5 Not Formally Followed **NR-2** Insufficient Size and/or Operating Experience **NR-4** Company Request



Required Signature Pages

Client Authorization to Bind

Important Information - Coverage cannot be bound when severe weather is threatening regardless of the expiration date.

After careful consideration of your proposal dated September 4, 2025, we accept your insurance program as presented with the following exceptions, changes, and/or recommendations:

Travelers Insurance – Crime Coverage		
 Option 1 - \$7,027 	Please Bind	
afety National Casualty – Excess Workers Compe		
 Annual Option - \$284,362 	Please Bind	
	Data Chand	
Client Signature	Date Signed	
ubbock County		

