

September 23, 2008

Becky Van Wyk Fresno County Employees' Retirement Association as respects to Building Located at 1713 Tulare St., Fresno, CA 93721 1111 H Street Fresno, CA 93721

RE: Special Liability Insurance Program (SLIP) Allied World National Assurance Company September 29, 2008 to September 29, 2009

Dear Member:

We are pleased to announce that we have successfully replaced coverage for the SLIP program with Allied World National Assurance Company effective September 29, 2008. Like the expiring carrier Everest, Allied is a non-admitted insurer. Allied is rated as A Excellent, FSC XV (highest rating) with A.M. Best Company. The policy form, terms and conditions will remain as per the expiring coverage form. This year, we were able to obtain very favorable premium terms which allowed an overall decrease in premium.

During the year we found that Everest was becomingly increasingly restrictive in their willingness to add risks to the program. That coupled with a poor response time on renewal terms led us to seek alternate quotes from the market. Fortunately, we were successful in renewing coverage with no changes to the policy form, terms or conditions while still obtaining a decrease in premium.

Attached you will find:

- Proposal for the policy period September 29, 2008 to September 29, 2009
- Invoice
- Confirmation of Binding form
- Policyholder Disclosure Notice of Terrorism Insurance Coverage
- Strategic Human Resources flyer with information on services available to SLIP members

IMPORTANT!

In order to renew your coverage under the SLIP program, we will need the following information returned to us no later than October 29, 2008:

- 1. Payment of your premium by October 29, 2008
- 2. <u>Complete, signed</u> Confirmation of Binding

Completed, signed Policyholder Disclosure Notice of Terrorism Insurance Coverage Form

Fresno County Employees' Retirement Association as respects to Building Located at 1713 Tulare St., Fresno, CA 93721 Special Liability Insurance Program (SLIP) Page 2 September 23, 2008

We are pleased to continue to offer free membership in the SLIP Human Resources Membership Program. This program is one of a number of important SLIP benefits. Many of our smaller SLIP members do not have the necessary staffing to adequately manage Human Resources requirements and you may find that our Human Resources Management Program is a very attractive alternative to meet many of your HR consulting needs. This program is available to you at no cost and we would encourage you to review the attached Human Resources flyers. In addition, this year, our Strategic HR Department will be offering free on-line harassment training to meet the requirements of AB1825 as a part of the SLIP Human Resources Membership Program benefits package.

We wish to thank you for your patience and continued support of the Special Liability Insurance Program (SLIP) renewal this year. We shall continually look for the best market, coverage and pricing for our members.

As always, the entire SLIP team is available should you have any questions. Please feel free to call 800-821-9283 and ask for Sheryl Fitzgerald, Mary Ellen Ewert or myself.

Sincerely,

ALLIANT INSURANCE SERVICES, INC.

John Peterson Account Manager

Enc.



SPECIAL LIABILITY INSURANCE PROGRAM (SLIP) PROPOSAL SEPTEMBER 29, 2008 TO SEPTEMBER 29, 2009

| NAMED INSURED: | Fresno County Employees' Retirement Association as respects to Building Located at 1713 Tulare St., Fresno, CA 93721 |
|--------------------------|---|
| PROGRAM TERM: | 9/29/08 to 9/29/09 |
| INSURANCE COMPANY: | Allied World National Assurance Company |
| *AM BEST RATING: | A, Excellent Financial Size Category XV; \$2,000,000,000 or Greater |
| *STANDARD & POOR RATING: | A- |
| CALIFORNIA STATUS: | Non-Admitted |
| POLICY NUMBER: | TBD |
| COVERAGE: | Manuscript Liability Form on an Occurrence Basis. Coverage included for: |

| (Coverage applies only where checked) | | LIMIT | |
|--|---|-------------|---------|
| Maximum Per Occurrence Limit for all Coverages Combined \$ | | \$5,0 | 00,000 |
| | | LIMIT | DED/SIR |
| Х | Personal Injury (Including Bodily Injury and Property Damage) | \$5,000,000 | \$5,000 |
| | Broadcasters Liability | | |
| | | | 1 |

| Owned Automobile Liability | |
|--|--|
| Uninsured Motorist Coverage | |
| Non-Owned and Hired Automobile Liability | |

| Nonprofit Directors ar | nd Officers Liability | | |
|---------------------------------------|-----------------------|--|--|
| Public Officials Errors and Omissions | | | |
| Educators Legal Liability | | | |
| Employment Practices Liability | | | |
| Nose Coverage | Retro Date: | | |

| Annual Aggregate Limits | | LIMIT |
|-------------------------|--|-------------|
| Х | Products / Completed Operations | \$5,000,000 |
| | Public Officials E&O or Non-Profit D&O or Educators Legal Liability | |
| | Employment Practices Liability | |

*See last page for additional information.

Fresno County Employees' Retirement Association as respects to Building Located at 1713 Tulare St., Fresno, CA 93721 SLIP Proposal Page Two

SUBLIMITS:

| _ | (Coverage applies only where checked) | | LIMIT | DED/SIR |
|---|---------------------------------------|---|-------------|----------|
| | Х | Fire Damage Liability (Sublimit of Personal Injury/property Damage Coverage Limit) | \$1,000,000 | \$10,000 |

- Limits are exhausted by Indemnity and Defense Cost.
- Limits are Per Occurrence.
- There is no General Aggregate.
- If selected, Nose Coverage is applicable to Public Officials Error and Omissions, Non-Profit Directors and Officers Liability and/or Employment Practices Liability, whichever is checked.
- Limits apply to each entity in the program.

TERM PREMIUM:

* Taxes, surplus lines fee and brokerage fees are included.

| Premium: | \$6,851.00 |
|------------------|------------|
| Taxes: | \$205.53 |
| Stamp Fee: | \$8.56 |
| Other State Fee: | \$0.00 |
| Program Fee: | \$822.12 |
| Total Cost: | \$7,887.21 |

25% Minimum Earned Premium TRIA Option: 5% of premium plus applicable taxes and fees

Alliant embraces a policy of transparency with respect to its compensation from insurance transactions. Details on our compensation policy, including the types of income that Alliant may earn on a placement, are available on our website at <u>www.alliantinsurance.com</u>. For a copy of our policy or for any inquiries regarding compensation issues pertaining to your account you may also contact us at: Alliant Insurance Services, Inc., Attention: General Counsel, 701 B Street, 6th Floor, San Diego, CA 92101.

SUBJECT TO AUDIT:

Fresno County Employees' Retirement Association as respects to Building Located at 1713 Tulare St., Fresno, CA 93721 SLIP Proposal Page Three

MAJOR EXCLUSIONS:

- Workers' Compensation
- Asbestos
- Auto Liability (unless Owned Auto coverage provided)
- Uninsured Motorist coverage except if Auto Liability marked X'd above, or unless coverage specifically requested and in file
- Failure to Supply
- Pollution Except for Hostile Fire and Vehicle Upset / Overturn coverage
- Inverse Condemnation / Eminent Domain
- Care, Custody, and Control
- Medical Payment Coverage
- Dam Liability
- All Aircraft; Watercraft over 51 feet in length
- Airports
- Medical Malpractice (except incidental)
- Subsidence
- Nuclear Material
- ERISA
- Fungi or Bacteria
- War or Terrorism
- Securities and Financial Interest
- Mold
- Public Officials Errors & Omissions (if Directors & Officers applies)
- Directors & Officers (if Public Officials Errors & Omissions applies)
- Montrose Exclusion Prior knowledge of incident or loss
- Abuse & Molestation (Coverage can be added at an additional cost)
- Residential Construction
- Athletic Participants
- Transit Operations
- Bodily Injury of Tenants or Guests of Tenants for Habitational Risks
- Insurance Agent/Claims Administration/Mortgage Broker

Fresno County Employees' Retirement Association as respects to Building Located at 1713 Tulare St., Fresno, CA 93721 SLIP Proposal Page Four

| CLAIMS REPORTING: | Please contact Alliant to report claims. Program and Deductible loss adjustment will be provided by Carl Warren and Co. |
|-------------------|---|
| PROPOSAL DATE: | September 23, 2008 |
| BROKER: | ALLIANT INSURANCE SERVICES, INC. • NEWPORT BEACH, CA |
| | Gordon B. DesCombes, Senior Vice President Rick Steddom, Vice President Christine Tobin, Vice President John Peterson, Account Manager Sheryl Fitzgerald, Account Manager |

SUBJECT TO POLICY TERMS, CONDITIONS AND EXCLUSIONS

THIS SUMMARY IS FOR INFORMATION PURPOSES ONLY AND DOES NOT ALTER THE POLICY IN ANY WAY. PLEASE REFER TO THE POLICY FORM FOR COMPLETE COVERAGE, TERMS & CONDITIONS AND EXCLUSIONS.

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*Analyzing insurers' over-all performance and financial strength is a task that requires specialized skills and in-depth technical understanding of all aspects of insurance company finances and operations.

Insurance brokerages such as Alliant Insurance Services, Inc. typically rely upon rating agencies for this type of market analysis. Both A.M. Best and Standard and Poor have been industry leaders in this area for many decades, utilizing a combination of quantitative and qualitative analysis of the information available in formulating their ratings.

A.M. Best has an extensive database of nearly 6,000 Life/Health, Property Casualty and International companies. You can visit them at <u>www.ambest.com</u>

For additional information regarding insurer financial strength ratings visit Standard and Poor's website at <u>www.insure.com/ratings/profiles/</u>

To learn more about companies doing business in California, visit the California Department of Insurance website at <u>www.insurance.ca.gov</u>

| TO: | INVOICE NUMBER | INVOICE DATE |
|---|--|---|
| Fresno County Employees' Retirement Association as respects to Building Located at 1713 Tulare St., Fresno, CA 93721 | 17197 CUSTOMER NUMBER FR298355 | 09/23/08 PRODUCER 5810 |
| 1111 H Street Fresno, CA 93721 | | INVOICE TOTAL \$7,887.21 |
| | | |
| POLICY INFORMAT | ION | |
| TYPE OF POLICY: G/L - MUNICIPALITIES | | |
| INVOICE NO: 17197 | | |
| INSURANCE COMPANY: Allied World National Assurance | | |
| POLICY #: TBD | | 00701 |
| NAMED INSURED: Fresno County Employees' Retirement Association as respects to Building POLICY EXPIRATION DATE: 09/29/09 | Located at 1713 Tulare St., Fresno, CA | 93721 |
| TRANSACTION: RENEWAL POLICY | | |
| TRANSACTION EFFECTIVE DATE: 09/29/08 | | |
| TRANSACTION EFFECTIVE DATE. 09/29/00 | | |
| CHARGES | | AMOUNT |
| | | \$6,851.0 |
| G/L – MUNICIPALITIES | | \$0,851.0 |
| | | |
| G/L – MUNICIPALITIES STATE TAXES STAMPING FEE | | \$205.5 |
| STATE TAXES | | \$0,331.0 \$205.5 \$8.5 \$822.1 |
| STATE TAXES STAMPING FEE PROGRAM FEE | | \$205.5 \$8.5 |
| STATE TAXES STAMPING FEE | | \$205.5 \$8.5 |
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| STATE TAXES STAMPING FEE PROGRAM FEE | | \$205.5 \$8.5 |
| STATE TAXES STAMPING FEE PROGRAM FEE | | \$205.5 \$8.5 \$822.1 |
| STATE TAXES STAMPING FEE PROGRAM FEE PREMIUM FOR LIABILITY COVERAGE EFFECTIVE 9/29/08 TO 9/29/09 PREMIUM FOR LIABILITY COVERAGE EFFECTIVE 9/29/08 TO 9/29/09 | ΤΟΤΑΙ | \$205.5 \$8.5 \$822.1 |
| STATE TAXES STAMPING FEE PROGRAM FEE PREMIUM FOR LIABILITY COVERAGE EFFECTIVE 9/29/08 TO 9/29/09 PLEASE MAKE CHECK OUT TO ALLIANT INSURANCE SERVICES, INC. PLEASE RETURN A COPY OF INVOICE WITH YOUR PAYMENT. REMEME | BER | \$205.5 \$8.5 \$822.1 - \$7,887.2 (Inclusive of a |
| STATE TAXES STAMPING FEE PROGRAM FEE PREMIUM FOR LIABILITY COVERAGE EFFECTIVE 9/29/08 TO 9/29/09 PREMIUM FOR LIABILITY TO ALLIANT INSURANCE SERVICES, INC. | BER | \$205.5 \$8.5 \$822.1 \$7,887.2 |

NOTICE: Alliant embraces a policy of transparency with respect to its compensation from insurance transactions. Details on our compensation policy, including the types of income that Alliant may earn on a placement, are available on our website at <u>www.alliantinsurance.com</u>. For a copy of our policy or for any inquiries regarding compensation issues pertaining to your account you may also contact us at: Alliant Insurance Services, Inc., Attention: General Counsel, 701 B Street, 6th Floor, San Diego, CA 92101.

For service on this policy or information concerning your insurance, please contact: Sheryl Fitzgerald at Alliant Insurance Services, Inc. • 1-800-821-9283 Ext. 161

INVOICE

SLIP INVOICE



SPECIAL LIABILITY INSURANCE PROGRAM SEPTEMBER 29, 2008 TO SEPTEMBER 29, 2009

REQUEST TO BIND

Date

Dear Member:

The SLIP team would like to thank you for your participation in the Special Liability Insurance Program during the 2007-2008 policy term. Since your coverage is set to renew on September 29, 2008, please indicate if you will be renewing your coverage by checking one of the boxes below and then signing and returning the form to our office via mail, fax or email.

If we do not receive this form or your payment by October 29, 2008, a Notice of Cancellation will be sent. If we do not receive your premium by the due date shown on the Notice of Cancellation, your coverage will cease and you will not be reinstated. To regain your coverage you will have to submit a completed new business application and the underwriter is under no requirement to grant coverage or to honor the renewal pricing.

| Yes, please renew my policy. | |
|--|--|
| I would like to cancel my policy effective | |
| Reason: | |

Print Name and Title

Signature

(Your reason for cancellation is used to help us evaluate our performance as well as our product. While you are under no obligation to fill that in, we do request that you give us your feedback.)

| Mailing address: | Alliant Insurance Services 1301 Dove St., Ste. 200 Newport Beach, CA 92660 | Fax Number: | (949) 756-2713 or (949) 251-1663 |
|------------------|--|-------------|--|
| Email Address: | Sheryl Fitzgerald – <u>sfitzgerald@allianti</u> or John Peterson – jpeterson@alliantinsura | | |

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE DISCLOSURE OF PREMIUM

Date: September 27, 2008

Member: Fresno County Employees' Retirement Association as respects to Building Located at 1713 Tulare St., Fresno, CA 93721

We are required to send you this notice pursuant to federal legislation concerning terrorism insurance.

You are hereby notified that under the federal Terrorism Risk Insurance Act, as extended on December, 26 2007 by the enactment of the Terrorism Risk Insurance Program Reauthorization Act of 2007, you now have the right to purchase insurance coverage for losses arising out of an act of terrorism, which is defined in the Act as an act certified by the Secretary of the Treasury (i) to be an act of terrorism, (ii) to be a violent act or an act that is dangerous to (A) human life; (B) property or (C) infrastructure, (iii) to have resulted in damage within the United States, or outside of the United States in case of an air carrier or vessel or the premises of a U.S. mission and (iv) to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion. You should read the Act for a complete description of its coverage. The Secretary's decision to certify or not to certify an event as an Act of Terrorism and thus be covered by this law is final and not subject to review. There is a \$100 billion dollar annual cap on all losses resulting from Acts of Terrorism above which no coverage will be provided under this policy and under the Act unless Congress makes some other determination.

YOU SHOULD KNOW THAT TERRORISM COVERAGE REQUIRED TO BE OFFERED BY THE ACT FOR LOSSES CAUSED BY CERTIFIED ACTS OF TERRORISM IS PARTIALY REIMBURSED BY THE UNITED STATES UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. UNDER THIS FORMULA, THE UNITED STATES PAYS 85% OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURANCE COMPANY PROVIDING COVERAGE. THE PREMIUM CHARGED FOR THIS TERRORISM COVERAGE WILL BE AN ADDITIONAL 5% OF YOUR POLICY PREMIUM, AND WILL NOT INCLUDE ANY CHARGES FOR THE PORTION OF THE LOSS COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

SELECTION OR REJECTION OF TERRORISM INSURANCE COVERAGE

WHAT YOU NEED TO DO NOW:

PLEASE"X" ONE OF THE BOXES BELOW AND RETURN THIS FORM TO YOUR INSURANCE BROKER.

| I accept Terrorism coverage as required to be offered under the Act. |
|---|
| I decline to purchase the Terrorism coverage as required to be offered under the Act. |

Policyholder/applicant signature

Print Name

Date

Fresno County Local Agency Formation Commission

Named Insured (Please Print or Type)