
Aransas Pass ISD

Request for Proposal (RFP)

Property, Liability, and Automobile Coverage

Package includes:

- Bid Specifications
- Underwriting Data
- Proposal Response Forms

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SECTION 1

General Information

General Conditions

A. Aransas Pass ISD, (hereafter referred to as Entity) is requesting proposals for the following Property, Liability and Automobile coverage.

Property	Building & Contents- Including but not limited to: Equipment Breakdown Flood Earthquake Electronic Data Media/Equipment Protection Extra Expense
Liability	General Liability Personal Injury Liability Employee Benefits Liability School Professional Legal Liability
Automobile & Physical Damage	Automobile Liability Vehicles
Crime	Dishonesty Money & Securities

- B. Proposers are expected to examine the complete RFP document. Failure to do so will be at the Proposer's risk. Written questions about this RFP and requests for additional information shall be provided no later than February 1, 2023 at 5:00 p.m. to the Purchasing Department, Attn: Cheryle Stanberry, 2300 McMullen Lane, Suite 600, Aransas Pass, Texas, 78336. The Entity will not respond to verbal inquiries.
- C. Proposers must submit one original and 2 copies (3 complete sets of the proposal)
- D. Proposals will be received until 2:00 PM on February 1, 2023 at the APISD Administration Office. The mailing address of this office is 2300 McMullen Lane, Suite 600, Aransas Pass, Texas. The physical location of this office is 2300 McMullen Lane, Suite 600, Aransas Pass, Texas.
- E. Proposals must be plainly marked on the outside of the envelope: "SEALED PROPOSAL FOR PROPERTY, LIABILITY AND AUTOMOBILE COVERAGE."
- F. The Entity reserves the right to accept or reject any or all proposals, waive any formalities and/or technicalities in the proposal and award the contract to best serve the interests of the Entity. The Entity may negotiate with Proposers as deemed advisable or necessary.

-
- H. All Proposals must be submitted on the **Proposal Forms** attached hereto, in accordance with all specified conditions. Coverage shall be for one year beginning March 1, 2023.
- I. Any restrictions, deviations or other modifications which alter or reduce coverage as specified in this RFP must be shown separately and explained in writing. Failure to attach an explanation of deviations to this proposal will indicate your acceptance of the specifications as written.
- J. Proposers are required to submit specimen coverage documents, agreements, and/or contracts the Entity will be required to sign in order to purchase the coverage quoted.
- K. Please indicate the method for payment and any optional methods that may be available.
- L. It is the intent of the Entity to award the proposal to one carrier who can provide all lines of coverage as a package. Preference may be given to packaged proposals; however, final purchasing decisions will be made based on the options that are most advantageous to the Entity. In addition to package pricing, please indicate if monoline pricing is available.
- M. Due care and diligence have been used in the preparation of these specifications and the information contained herein is believed to be substantially correct. However, the responsibility for determining the full extent of the exposure and the verification of all information presented herein shall rest solely on the Proposer. The Entity and its representatives will not be responsible for any errors and omissions in the specifications nor for the failure on the part of the Proposer to determine the full extent of the exposures.
- N. Quotations shall be based on the underwriting information furnished by the Entity. Loss data is believed to be correct but is not warranted. If inspections are required, please coordinate them through the Business Office by contacting Cheryle Stansberry.

Minimum Qualifications

- A. Proposers responding to this RFP must be licensed and/or authorized to do business in Texas and have at least 5 years experience writing Property, Liability and Automobile coverage in Texas. Proposer qualifications must be included as an exhibit to your proposal.
- B. Proposers must attach a brief biography describing the experience of the person assigned to handle this account.
- C. Submit a summary of all Property, Liability and Automobile services available to the Entity. Indicate charges for services that are in addition to the quoted contributions/premiums.
- D. Proposers must have an Errors and Omissions policy with a minimum limit of \$1,000,000 per occurrence. Attach current certificate of coverage.
- E. Self-funded programs or plans organized under the terms of the Interlocal Cooperation Act (Chapter 791, Title 7, Government Code) shall be accepted provided the program offers coverage that are equivalent to a fully insured program.

SECTION 2

Underwriting Information

General Underwriting Questions / Answers

Has the board implemented specific loss prevention policies?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Is there a swimming pool at any location?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
- If yes, please attach.		<input type="checkbox"/>		<input type="checkbox"/>
Do you operate a daycare center?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
- If yes, can the general public utilize the center?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
- Is the center operated by Entity employees?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Does the applicant own or lease any watercraft?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Does the applicant own or charter any aircraft?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Does the applicant engage in any activities, other than school activities, including the loaning or leasing of property?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
- If yes, please list and explain in detail		<input type="checkbox"/>		<input type="checkbox"/>
- Are certificates of insurance required from lessee?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Is the applicant engaged in any joint ventures, cooperatives or SSA's?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
- If yes, please list and explain in detail		<input type="checkbox"/>		<input type="checkbox"/>
Does the applicant employ police or security guards in any capacity?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
- If yes, are they certified by Texas Commission of Law Enforcement Officer Standards & Education (TCLEOSE)?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
- If yes, how many?		<input type="checkbox"/>		<input type="checkbox"/>
Does the applicant have an on-site physician(s), medical/dental clinics or a pharmacy?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
If yes, is it operated by the Entity?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
If yes, are they employees of the Entity?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>

Loss History for Past Five Years

A five-year loss history report for all lines of business requested in this RFP is attached. See Exhibit I.

SECTION 3

Coverage Specifications

Property and Contents

1. **Property covered** See attached Exhibit II.
2. **Policy Limits** \$105,168,127
State if co-insurance limit represents 90% or 100% of total value.
3. Blanket coverage on buildings, contents and auxiliary structures at all locations including on-site improvements such as fences, light poles, and bleachers.
4. **Basis of Recovery** Full Replacement Cost
5.

Peril	Deductible	Deductible Options
<u>All Other Perils</u>	<u>\$100,000</u>	<u>\$100,000</u>
<u>Wind and Hail</u>	<u>\$250,000</u>	<u>\$250,000</u>
<u>Named Windstorm</u>	<u>3%</u>	<u>5%</u>
6. **Automatic Coverage on newly acquired Property:** \$1,000,000 limits for up to 90 days
7. **Extra Expense :** \$500,000
8. **Electronic Data Protection for owned computer equipment**
 - a. **Type of Coverage** All Risk coverage
 - b. **Basis of Recovery** Full Replacement Cost
 - c. **Single Blanket Limit (all locations)** \$1,000,000

Underwriting Information – Fire Protection

Are fire hydrants located on or across the street from each campus?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Are fire alarm systems located in all buildings?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Is the fire department paid or voluntary?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Is the applicant located in a town of less than 15,000 population?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
- If yes, is the applicant within five miles of a town with a population of more than 15,000?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
- If yes, will that city's fire department respond to a fire at all your locations?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Does the applicant have a hooded ventilating system in the kitchen?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Does the applicant have a contract for hood-cleaning services?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
- If yes, how often does the contractor clean the hood?				

Underwriting Information – Building Maintenance / Occupancy

List any security measures such as burglar alarms, security lighting, etc.:

Does the applicant have any buildings 30 years or older?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
- If yes, has the wiring been updated to meet code specifications?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Are any owned or leased buildings being used for purposes other than their intended use?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Are any owned or leased buildings controlled by the applicant currently vacant or unoccupied?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>

Equipment Breakdown Coverage

Covered equipment unless otherwise indicated, includes electrical, mechanical and pressure equipment. It includes both Real Property, such as heating, cooking and electrical systems, and Personal Property, such as office and process equipment.

1.	Total number of locations occupied by the Entity:	See attached Exhibit II.
2.	Type of Coverage	Comprehensive
3.	Policy Limits	Equal to property limits, not to exceed \$100,000,000
4.	Deductible	\$5,000 per occurrence
5.	Basis of Recovery	Repair or Replacement
6.	Business Income, Extra Expense/Service Interruption:	\$1,000,000
7.	Contingent Business Income	\$25,000
8.	Civil Authority	Included
9.	Perishable Goods	\$100,000
10.	Demolition	\$100,000
11.	Ordinance or Law	\$100,000
12.	Expediting Expenses	\$100,000
13.	Hazardous Substance	\$100,000

Crime Coverage

1. Coverage will include employee dishonesty, loss inside and outside the premises for money and securities and faithful performance on a blanket basis.

2. **Employee Dishonesty** \$100,000

Money & Securities- Inside Premises \$50,000

Money & Securities- Outside Premises \$50,000

Underwriting Information – Crime Coverage

Total number of locations occupied by the Entity:				
Total number of locations at which money or securities are handled:				
How frequently are audits made?				
Are they made by an independent auditor or CPA?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Are countersignatures required?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Are securities subject to joint control of two or more responsible employees?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Number of employees and board members who handle money or securities, sign checks, authorize drafts, or audit accounts on a regular basis:				
Number of clerical personnel not listed above:				
Number of all other employees:				
What is the Average Daily Attendance (ADA) reported to TEA?				

Cyber Coverage

- Cyber Loss & Liability Coverage** \$1,000,000
Ransomware Limit \$100,000
Deductible \$25,000

Underwriting Information –Cyber Coverage

Gross Revenue for most recent 12 months:				
What format does the District use for backing up computer storage and data?:				
Does District use Multi-Factor Authentication for access to critical information	Y	<input type="checkbox"/>	N	<input type="checkbox"/>
Does the District take regular (at least monthly) backups of key server configurations and data?	Y	<input type="checkbox"/>	N	<input type="checkbox"/>

General Liability, Personal Injury Liability and Employee Benefits Liability Coverage

1. Limits of Liability: \$1,000,000 per occurrence, no annual aggregate
Deductible: \$1,000
2. Pays expenses, including judgments and defense costs.
3. Provides coverage for care, custody, and control.
4. Includes incidental medical malpractice.
5. Provides coverage for libel, slander and defamation of character.
6. Covers premises liability, advertising liability, and products liability on a per occurrence form.
7. Persons Covered/Insured **must** include named Entity, any trustees / board members, employees, student teachers, and volunteers.
8. Claims arising out of the negligent act, error, or omission of the Entity and/or its employees relative to the administration of employee benefit programs must be included.
9. Includes Law Enforcement Liability coverage

Professional Legal Liability

1. Provides protection for named Entity, any trustees / board members, employees, student teachers, and volunteers while acting in the course and scope of their duties.
2. Limits of Liability: \$1,000,000 per occurrence, \$1,000,000 annual aggregate
Deductible: \$15,000
3. Coverage Form: Claims - Made
4. The Proposer will pay all sums to which the Entity shall become legally obligated to pay on any claim first made against them during the policy period.
5. The Proposer shall defend civil suits against the Entity alleging a Wrongful Act including but not limited to civil rights - Section 1983, discrimination, sexual abuse, sexual harassment and sexual molestation claims.
6. A claim shall include demand received by the Entity for money, services or nonpecuniary relief. This shall include the service of suit or institution of arbitration proceedings against the Insured.
7. Claims expenses shall include attorney fees and all other fees, costs and expenses arising from defense of any claim.
8. The Proposer will pay all premiums on bonds to release attachments for an amount not in excess of the applicable limit of liability of the policy.
9. Either Professional Legal Liability or General Liability coverage must cover claims arising out of corporal punishment or student discipline.
10. Limits of coverage will not be reduced by the payment of defense costs (defense in addition to limits).
11. Cancellation by either the Proposer or the Entity will be subject to the terms and conditions of the contractual agreement or ten (10) days in the case of nonpayment.
12. Please provide an explanation of any **Prior Acts** coverage that will be quoted.
13. **Extended Reporting/Discovery Period** must be offered.

Automobile Liability and Physical Damage Coverage

1. Schedule of Vehicles, including Mobile Equipment, Bus Seating Capacities, & Values: See attached Exhibit III.
2. Minimum Liability Limits & Coverage desired:
 \$100,000 per person Bodily Injury limits,
 \$300,000 per occurrence Bodily Injury limits,
 \$100,000 per occurrence Property Damage limits

 Optional Liability Limits - \$1,000,000 Combined Single Limits
3. Hired and Non-Owned Vehicle coverage shall be excess over any other valid and collectible insurance.
4. Physical Damage coverage for Vehicles (list deductible options desired):

a) Collision	\$ 1,000	and		deductible
b) Other Than Collision*				
1) Comprehensive	\$1,000	and		deductible
2) Specified Perils	\$1,000	and		deductible

*When purchasing Other Than Collision coverage, Entity must choose either comprehensive or specified perils coverage.

Physical Damage coverage for Mobile Equipment (list deductible options desired):

a) Collision	\$1,000	and		deductible
b) Other Than Collision*				
1) Comprehensive	\$1,000	and		deductible
2) Specified Perils	\$1,000	and		deductible

*When purchasing Other Than Collision coverage, Entity must choose either comprehensive or specified perils coverage.

5. Fleet Automatic Coverage: Subject to audit, it is agreed that automatic coverage is provided for substitute and newly acquired automobiles (cars, trucks, trailers and buses) for the same coverage provided for all similar type automobiles.

Underwriting Information – Automobile Liability & Physical Damage

Are any transportation operations contracted to another? If yes, include name of contractor:	Y		N	
Are owned vehicles used by security personnel?	Y		N	
How often do you run Motor Vehicle Reports on Entity drivers?				
Where are the vehicles housed and what is the total value of vehicles at each location?				

SECTION 4

Loss Prevention Services

1. Attach a description of loss prevention services provided. Include a recent example of a loss prevention service completed by the Proposer's firm.
2. Provide the Proposer's experience and professional qualifications.
3. List the name of the loss prevention representative(s) who will make scheduled appointments to the Entity. Indicate the frequency or schedule for these appointments.
4. Where is this loss prevention representative located?
5. Include a biography of the loss prevention representative(s) who would be assigned to our account.
6. Describe the specific risk management materials/resources that are available to the Entity. Indicate the additional charges, if any.
7. Describe the specific education and training provided to Entity personnel. Indicate additional charges, if any.

SECTION 5

Proposal Response Forms

Company Information

Name of your company: _____

Phone number: _____

Facsimile number: _____

Address: _____

Primary business: _____

Type of company:
(corp., partnership, etc.): _____

Year started in business: _____

Number of years administering
Property, Liability, Automobile in
Texas: _____

Number of years administering
Property, Liability, Automobile for
public educational entities: _____

Proposers must include in the proposal a notice as to whether the person submitting the bid or an owner or operator of the business entity has been convicted of a felony and the description of the conduct resulting in the conviction. The contract may be terminated if it is determined that the person or business entity failed to give notice or misrepresented the conduct resulting in the conviction.

The Proposer, in compliance with the invitation for proposal on Property, Liability, Automobile funding, having examined the specifications and being familiar with all conditions in the specifications, hereby proposes to provide the services in accordance with the proposal documents on the attached response sheets.

"The undersigned affirms that they are duly authorized to execute this contract, that this company, corporation, firm, partnership or individual has not prepared this proposal in collusion with any other Proposer, and that the contents of this proposal as to prices, terms or conditions of said proposal have not been communicated by the undersigned nor by any employee or agent to any other person engaged in this type of business prior to the official opening of this proposal."

Having reviewed the specifications, we have complied with all requirements and conditions except as noted on the attachment labeled "Deviations."

Signature and title of authorized representative

Proposing Company _____ Date _____

Property and Contents Coverage

Limit	\$	Limit	\$
Deductible	\$	Deductible	\$
Total Cost	\$	Total Cost	\$

Total Scheduled Property Floaters

Limit	\$
Deductible	\$
Total Cost	\$

Name of Company offering coverage: _____

DEVIATIONS from proposal specifications:

Equipment Breakdown Coverage

Limit	\$
Deductible	\$
Total Cost	\$

Name of Company offering coverage: _____

DEVIATIONS from proposal specifications:

Crime

Limit	\$
Deductible	\$
Total Cost	\$

Name of Company offering coverage: _____

DEVIATIONS from proposal specifications:

Cyber

Limit	\$
Deductible	\$
Total Cost	\$

Name of Company offering coverage: _____

DEVIATIONS from proposal specifications:

General Liability, Personal Injury Liability and Employee Benefits Liability

Limit	\$
Deductible	\$
Total Cost	\$

Name of Company offering coverage: _____

DEVIATIONS from proposal specifications:

Professional Legal Liability

Limit	\$
Deductible	\$
Total Cost	\$

Name of Company offering coverage: _____

DEVIATIONS from proposal specifications:

Please respond to the following questions as they relate to the Professional Legal Liability coverage proposed. Please specify if there are any SUBLIMITS, otherwise it will be assumed full policy limits are available:

1. Who are the "covered persons" or "named insureds?"
2. Is Prior Acts coverage provided as part of the basic coverage? If so, what is the retroactive date?
3. In corporal punishment/student discipline covered?
4. Describe the terms available for "Extended Reporting/Discovery Period" coverage available when either the insured or insurer cancels or nonrenews? How long is the reporting period and what is the cost?
5. Does the policy cover non-pecuniary relief? If so, are there any sublimits for either defense costs or damages? If sublimits apply, please stipulate.
6. Are board members/employees covered as they serve on other boards within the course and scope of their employment (i.e., would coverage extend to a superintendent as he/she served on a Special Education Cooperative)?
7. Are claims alleging discrimination covered (e.g., 1983 Civil Rights violation)? If so, what is the Limit of Liability?
8. Is sexual misconduct (i.e., harassment), sexual abuse and molestation covered? If so, are there sublimits?
9. Does the coverage pay on behalf of or indemnify?
10. Are defense costs within limits or in addition to?
11. Please explain the notice of claim provision and what constitutes a "demand."
12. What provisions are there if the insured refuses to consent to settle?
13. Must the insured have the Proposer's consent to incur expenses?

Automobile Liability and Physical Damage Including Hired and Non-Owned Vehicles

Automobile Liability Coverage

1. Minimum Limits	\$100,000 / \$300,000 / \$100,000		
Deductible	\$250	\$500	\$1,000
Cost	\$	\$	\$

2. Optional Limits	\$1,000,000 Combined Single Limits		
Deductible	\$250	\$500	\$1,000
Cost	\$	\$	\$

Physical Damage Coverage

Deductible	\$250	\$500	\$1,000
Comprehensive	\$	\$	\$
Specified Perils	\$	\$	\$
Collision	\$	\$	\$

Name of Company offering coverage:

DEVIATIONS from proposal specifications:

Felony Conviction Notice

State of Texas Legislative Senate Bill No. 1, Section 44.034, Notification of Criminal History, Subsection (a), states "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.

VENDOR'S NAME: _____

AUTHORIZED COMPANY OFFICIAL'S NAME (PRINTED): _____

- A. My firm is a publicly held corporation; therefore, this reporting requirement is not applicable.

Signature of Company Official: _____

- B. My firm is neither owned nor operated by anyone who has been convicted of a felony:

Signature of Company Official: _____

- C. My firm is owned or operated by the following individual(s) who has/have been convicted of a felony:

Name of Felon(s): _____

Detail of Conviction(s): _____

Signature of Company Official: _____

Conflict Of Interest Questionnaire

FORM CIQ

For vendor or other person doing business with local governmental entity

This questionnaire reflects changes made to the law by H.B. 1491, 80th Leg., Regular Session.

OFFICE USE ONLY

This questionnaire is being filed in accordance with Chapter 176, Local Government Code by a person who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the person meets requirements under Section 176.006(a).

Date Received

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the person becomes aware of facts that require the statement to be filed. See Section 176.006, Local Governmental Code.

A person commits an offense if the person knowingly violates Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor.

1. **Name of person who has a business relationship with local governmental entity.**

2. **Check this box if you are filing an update to a previously filed questionnaire.**

(The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate.)

3. **Name of local government officer with whom filer has employment or business relationship.**

Name of Officer

This section (item 3 including subparts A, B, C & D) must be completed for each officer with whom the filer has an employment or other business relationship as defined by Section 176.001(1-a), Local Government Code. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer named in this section receiving or likely to receive taxable income, other than investment income, from the filer of the questionnaire?

Yes No NA

B. Is the filer of the questionnaire receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer named in this section AND the taxable income is not received from the local governmental entity?

Yes No NA

C. Is the filer of this questionnaire employed by a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership of 10 percent or more?

Yes No NA

D. Describe each employment or business relationship with the local government officer named in this section.

4.

Signature of person doing business with the governmental entity

Date

SECTION 6

**Exhibit I – Five year loss History
for All Lines of Business Quoted**

Claim Detail by Program Year - PY11

Summary of all Transactions for Claims with a DOL in Period 03-01-2022 to 02-28-2023

Claim Statuses as of 11-30-2022

Line of Business / Coverage	Open	Closed	Denied	No Status	Loss Payments	Expense Payments	Loss Reserves	Expense Reserves	Indemnity Recoveries	Total Incurred
LOB Not assigned										
No coverage assigned					0.00	0.00	0.00	0.00	0.00	0.00
Coverage Subtotals	0	0	0	0	0.00	0.00	0.00	0.00	0.00	0.00
LOB Subtotal	0	0	0	0	0.00	0.00	0.00	0.00	0.00	0.00

Grand Total for Enterprise

Claim Counts				Loss Payments	Expense Payments	Loss Reserves	Expense Reserves	Indemnity Recoveries	Total Incurred
Open	Closed	Denied	No Status						
0	0	0	0	0.00	0.00	0.00	0.00	0.00	0.00

Claim counts reflect total number of unique claim ID's.

Claim Detail by Program Year - PY9

Summary of all Transactions for Claims with a DOL in Period 03-01-2020 to 02-28-2021

Claim Statuses as of 11-30-2022

Line of Business / Coverage	Open	Closed	Denied	No Status	Loss Payments	Expense Payments	Loss Reserves	Expense Reserves	Indemnity Recoveries	Total Incurred
LOB Not assigned										
No coverage assigned					0.00	0.00	0.00	0.00	0.00	0.00
Coverage Subtotals	0	0	0	0	0.00	0.00	0.00	0.00	0.00	0.00
LOB Subtotal	0	0	0	0	0.00	0.00	0.00	0.00	0.00	0.00

Grand Total for Enterprise

Claim Counts				Loss Payments	Expense Payments	Loss Reserves	Expense Reserves	Indemnity Recoveries	Total Incurred
Open	Closed	Denied	No Status						
0	0	0	0	0.00	0.00	0.00	0.00	0.00	0.00

Claim counts reflect total number of unique claim ID's.

Property Casualty Alliance of Texas

Aransas Pass ISD

Line of Business / Coverage	Open	Closed	Denied	No Status	Loss Payments	Expense Payments	Loss Reserves	Expense Reserves	Indemnity Recoveries	Total Incurred
LOB: Auto										
Coverage: AUTO Property Damage										
Williams, Wesley	205901-01001				4,968.33	66.00	0.00	0.00	0.00	5,034.33
Coverage Subtotals	0	1	0	0	4,968.33	66.00	0.00	0.00	0.00	5,034.33
LOB Subtotal	0	1	0	0	4,968.33	66.00	0.00	0.00	0.00	5,034.33
LOB: General Liability										
Coverage: General Liability Bodily Injury PD										
De Los Santos, Yesika	205901-00901				0.00	2,347.40	0.00	0.00	0.00	2,347.40
Coverage Subtotals	0	1	0	0	0.00	2,347.40	0.00	0.00	0.00	2,347.40
LOB Subtotal	0	1	0	0	0.00	2,347.40	0.00	0.00	0.00	2,347.40

Grand Total for Enterprise

Claim Counts				Loss Payments	Expense Payments	Loss Reserves	Expense Reserves	Indemnity Recoveries	Total Incurred
Open	Closed	Denied	No Status						
0	2	0	0	4,968.33	2,413.40	0.00	0.00	0.00	7,381.73

Claim counts reflect total number of unique claim ID's.

Property Casualty Alliance of Texas

Aransas Pass ISD

Line of Business / Coverage	Open	Closed	Denied	No Status	Loss Payments	Expense Payments	Loss Reserves	Expense Reserves	Indemnity Recoveries	Total Incurred
LOB: Auto										
Coverage: Auto Bodily Injury										
Fuentes, Dianna	205901-00802				15,000.00	13.05	0.00	0.00	0.00	15,013.05
Coverage Subtotals	0	1	0	0	15,000.00	13.05	0.00	0.00	0.00	15,013.05
Coverage: AUTO Property Damage										
Woodard, Matthew Robert	205901-00701				3,707.73	124.00	0.00	0.00	0.00	3,831.73
Fuentes, Dianna	205901-00801				958.08	138.40	0.00	0.00	0.00	1,096.48
Coverage Subtotals	0	2	0	0	4,665.81	262.40	0.00	0.00	0.00	4,928.21
LOB Subtotal	0	3	0	0	19,665.81	275.45	0.00	0.00	0.00	19,941.26

Grand Total for Enterprise

Claim Counts				Loss Payments	Expense Payments	Loss Reserves	Expense Reserves	Indemnity Recoveries	Total Incurred
Open	Closed	Denied	No Status						
0	3	0	0	19,665.81	275.45	0.00	0.00	0.00	19,941.26

Claim counts reflect total number of unique claim ID's.

Property Casualty Alliance of Texas

Aransas Pass ISD

Line of Business / Coverage	Open	Closed	Denied	No Status	Loss Payments	Expense Payments	Loss Reserves	Expense Reserves	Indemnity Recoveries	Total Incurred
LOB: Auto										
Coverage: AUTO Property Damage										
Seidel, Terri	205901-00601				4,007.76	110.00	0.00	0.00	0.00	4,117.76
Coverage Subtotals	0	1	0	0	4,007.76	110.00	0.00	0.00	0.00	4,117.76
LOB Subtotal	0	1	0	0	4,007.76	110.00	0.00	0.00	0.00	4,117.76

Grand Total for Enterprise

Claim Counts				Loss Payments	Expense Payments	Loss Reserves	Expense Reserves	Indemnity Recoveries	Total Incurred
Open	Closed	Denied	No Status						
0	1	0	0	4,007.76	110.00	0.00	0.00	0.00	4,117.76

Claim counts reflect total number of unique claim ID's.

Loss Run Dated - 08/31/2022

CPAT Aransas Pass ISD

Account No: 435894

Policy Term: 03/01/2017 -- 03/01/2020

Policy Numbers: 7DA3CM0003948-02 AMP7520608-04 AMR-42378-02 HAN-14066-02 MSP-12721-06

Broker Company: CRC Group

<u>Date Of Loss</u>	<u>Status</u>	<u>Loss Paid</u>	<u>Expense Paid</u>	<u>Loss Reserve</u>	<u>Expense Reserve</u>	<u>Total Incurred</u>
8/25/2017	CLOSED	\$18,905,533.56	\$263,556.76	\$0.00	\$0.00	\$19,169,090.32
Claim Type:		Property Claim				
Loss Type:		Wind; Named Storm				
Loss Description:		Wind and rain damage.				
Location:		Houston				
CLM21116		4141557				
6/20/2018	CLOSED	\$134,842.84	\$12,538.65	\$0.00	\$0.00	\$147,381.49
Claim Type:		Property Claim				
Loss Type:		Flood				
Loss Description:		Flood - 8 inches of rain in building				
Location:		Faulk Early Childhood Main				
CLM26193		4153906				
6/20/2018	CLOSED	\$0.00	\$15,867.27	\$0.00	\$0.00	\$15,867.27
Claim Type:		Property Claim				
Loss Type:		Wind; Named Storm Tier 1				
Loss Description:		Rain damage to walls and gym floor . The contractor, Marshall Construction, didn't properly apply flashing to the roof				
Location:		High School Field House				
CLM26734		4155397				
Policy Total:		\$19,040,376.40	\$291,962.68	\$0.00	\$0.00	\$19,332,339.08

This is not to be construed as an absolute statement of claims, but as a history located for this insured with the listed policy numbers. The Amrisc, LLC loss runs do not necessarily reflect all new claims, transactions or changes applicable within the last 30 days.

Loss Run Dated - 08/31/2022

CPAT Aransas Pass ISD

Account No: 713630

Policy Term: 03/01/2020 -- 03/01/2021

Policy Numbers: 10T029659-13216-20-00 AMP7520608-05 AMR-42378-03 CPP1186411-00 HAN-14066-03 LEX-037041306-00 MSP-12721-07 ORAMPR008694-00 SSI-17689-00 USI-26446-00

Broker Company: CRC Group

Date Of Loss	Status	Loss Paid	Expense Paid	Loss Reserve	Expense Reserve	Total Incurred
7/25/2020	CLOSED	\$0.00	\$6,521.87	\$0.00	\$0.00	\$6,521.87
Claim Type:		Property Claim				
Loss Type:		Wind; Named Storm				
Loss Description:		Wind damage from Hurricane Hanna to poles and lighting equipment at the Football, Softball & Baseball fields.				
Location:		Aransas Pass High School Main				
CLM34067		4172882				
Policy Total:		\$0.00	\$6,521.87	\$0.00	\$0.00	\$6,521.87

CPAT Aransas Pass ISD

Account No: 803549

Policy Term: 03/01/2021 -- 03/01/2022

Policy Numbers: 10T029659-13216-21-01 AMP7520608-06 AMR-42378-04 CPP1186411-01 GVS-10738-00 HAN-14066-04 LEX-037041306-01 MSP-12721-08 ORAMPR008694-01 TSAMPR0000210-00 USI-26446-01

Broker Company: CRC Group

Date Of Loss	Status	Loss Paid	Expense Paid	Loss Reserve	Expense Reserve	Total Incurred
10/21/2021	CLOSED	\$0.00	\$8,654.01	\$0.00	\$0.00	\$8,654.01
Claim Type:		Property Claim				
Loss Type:		Water; Roof Leak				
Loss Description:		Rain entering the building through the roof has created some of the steel supports of the roof structure to rust. A large A/C Unit is directly above the area that is leaking.				
Location:		2103 Demory, Aransas Pass, TX, 78336				
CLM39180		4189936				
Policy Total:		\$0.00	\$8,654.01	\$0.00	\$0.00	\$8,654.01

This is not to be construed as an absolute statement of claims, but as a history located for this insured with the listed policy numbers. The Amrisc, LLC loss runs do not necessarily reflect all new claims, transactions or changes applicable within the last 30 days.

CPAT Aransas Pass ISD

Account No: 912765

Policy Term: 03/01/2022 -- 03/01/2023

Policy Numbers: AMP7520608-07 AMR-42378-05 CPP1186411-02 GVS-10738-01 HAN-14066-05 LEX-037041306
-02 MSP-12721-09 ORAMPR008694-02 TSAMPR0000210-01 USI-26446-02

Broker Company: CRC Group

No Claims found for this policy

	Loss Paid	Expense Paid	Loss Reserve	Expense Reserve	Total Incurred
Total All Years:	\$19,040,376.4 0	\$307,138.56	\$0.00	\$0.00	\$19,347,514.96

This is not to be construed as an absolute statement of claims, but as a history located for this insured with the listed policy numbers. The Amrisc, LLC loss runs do not necessarily reflect all new claims, transactions or changes applicable within the last 30 days.

THB North America & Special Risks - Facultative Risk Claims Summary

Claim Ref	Loss Date	Policy Ref	Inception Date	Expiry Date	Type / Interest	Claim Description	Subro	Sett Ccy	Order Percentage	Order Settled Fees	Order Outstanding Fees	Order Settled Loss	Order Outstanding Loss Estimate	Order Total Incurred	Claim Status
Client:- Aransas Pass ISD						Agent:- CRC Insurance Services, Inc. - Houston - CACRCSCUTX									
Settlement Currency: USD															
		AP12468A22	01/03/2022	01/03/2023	Deductible Buy-Back		USD			0.00	0.00	0.00	0.00	0.00	
USD Totals:										0.00	0.00	0.00	0.00	0.00	
<p>N.B. Please note for events that give rise to losses at multiple locations the above may not include figures for all locations and are only representative of those known to THB at the time the report was run. These figures will also not reflect balances accruing to any aggregate deductibles that may apply and will not reflect fees in relation to any claims advised to THB after 28th August 2017.</p>															

OCTOBER 16, 2022

CRC Group
32 Old Slip, 4th FL
New York, NY 10005

RE: Loss Run

Insured: Aransas Pass ISD
Policy: H86067220CSP

Dear Team,

Our records show no losses for the named insured and/or policy number(s).

This is not to be construed as an absolute statement of no claims, only that no loss history has been located for this insured and/or policy number(s).

Sincerely,

Sedgwick Delegated Authority
Loss Runs Dept.

Claims Loss Run

Report Run Date / Time: 10/11/2022, 1:09:17 AM

Policy Number: ESP30016494500

Insured: Aransas Pass ISD

Policy Effective Date: Mar 1, 2022

Policy Expiration Actual Date: Mar 1, 2023

Claim Number	Claimant	Status	Date of Loss	Date Reported	Date Closed	Claim Type	Type of loss	Claim State	Loss Reserve	Loss Paid	Expense Reserve	Expense Paid	Recovered Loss	Total Incurred	Examiner
No Losses Reported															
ESP30016494500 - Total															



Note: The establishment of a claim reserve does not constitute an admission of any liability on the part of the insured or the insurer, nor does it guarantee that any payment is or will be due from the insured or from the insurer under the policy.

Number of Open Claims: 0
Number of Closed Claims: 0
Report Run Date: 14-Oct-2022

Swiss Re Policy: ESP200540100 Effective: 01-Mar-2022 Expiry: 01-Mar-2023 Insured: ARANSAS PASS ISD Carrier: Swiss Re Corporate Solutions Capacity Insurance Corporation

Booking Policy Number	Underwriting Year	Effective	Expiry	Claim ID	Claim Status	Date of Loss	Date Claim Received by SR	Involved Property	Loss Location	Loss Description	Currency	Indemnity Paid	Expense Paid	Indemnity Reserved	Expense Reserved	Net Paid + Reserved
ESP200540100	2022	03-01-2022	03-01-2023									0.00	0.00	0.00	0.00	0.00

Exhibit II – Property Schedule

Member Name	Member #	Building	Bldg #	Address	City	Zip Code	Const	# Story	YR Built	YR Roof Built	Sprinklered	Sq. Ft.	Cost/Sq. Ft.	%	Source	Building Value	Contents Value	Total Value
Aransas Pass ISD	205-901	Aransas Pass High School Main	2A	450 S. Ave. A	Aransas Pass	78336	MNC	1	1974	2018		119,858	\$ 216.81	20%		\$ 25,986,267	\$ 5,197,253	\$ 31,183,520
Aransas Pass ISD	205-901	High School Weight Room	2B	450 S. Ave. A	Aransas Pass	78336	NC	1	1997			5,000	\$ 120.23	25%		\$ 601,156	\$ 150,289	\$ 751,445
Aransas Pass ISD	205-901	High School Field House	2C	450 S. Ave. A	Aransas Pass	78336	NC	1	2004			9,072	\$ 156.69	20%		\$ 1,421,461	\$ 284,292	\$ 1,705,753
Aransas Pass ISD	205-901	Stadium Storage Building	2D	450 S. Ave. A	Aransas Pass	78336	NC	1	1978			1,920	\$ 95.93	30%		\$ 184,183	\$ 55,255	\$ 239,438
Aransas Pass ISD	205-901	Stadium Concessions and Restrooms	2E	450 S. Ave. A	Aransas Pass	78336	JM	1	2022	2022		1,767	\$ 210.48	10%		\$ 371,910	\$ 37,191	\$ 409,101
Aransas Pass ISD	205-901	Maintenance Building	2F	450 S. Ave. A	Aransas Pass	78336	NC	1	2022	2022		2,480	\$ 69.22	25%		\$ 171,674	\$ 42,919	\$ 214,593
Aransas Pass ISD	205-901	Football Stadium Lighting		450 S. Ave. A	Aransas Pass	78336										\$ 210,000	\$ -	\$ 210,000
Aransas Pass ISD	205-901	Football Stadium Bleachers		450 S. Ave. A	Aransas Pass	78336										\$ 254,635	\$ -	\$ 254,635
Aransas Pass ISD	205-901	Football Stadium Home Press Box (5 x 38)		450 S. Ave. A	Aransas Pass	78336	F	1				190	\$ 289.47			\$ 55,000	\$ -	\$ 55,000
Aransas Pass ISD	205-901	Football Stadium Visitor Press Box (5 x 18)		450 S. Ave. A	Aransas Pass	78336	F	1				90	\$ 75.00			\$ 6,750	\$ -	\$ 6,750
Aransas Pass ISD	205-901	7 Lane Synthetic Track		450 S. Ave. A	Aransas Pass	78336										\$ 200,850	\$ -	\$ 200,850
Aransas Pass ISD	205-901	Football Stadium Scoreboard		450 S. Ave. A	Aransas Pass	78336										\$ 12,500	\$ -	\$ 12,500
Aransas Pass ISD	205-901	Football Stadium Ticket Booth A (9 x 12)		450 S. Ave. A	Aransas Pass	78336	JM	1				108	\$ 75.00			\$ 8,100	\$ -	\$ 8,100
Aransas Pass ISD	205-901	Football Stadium Ticket Booth B (8 x 10)		450 S. Ave. A	Aransas Pass	78336	JM	1				80	\$ 75.00			\$ 6,000	\$ -	\$ 6,000
Aransas Pass ISD	205-901	Football Stadium Fencing		450 S. Ave. A	Aransas Pass	78336										\$ 60,000	\$ -	\$ 60,000
Aransas Pass ISD	205-901	Digital Marquee		450 S. Ave. A	Aransas Pass	78336										\$ 35,000	\$ -	\$ 35,000
Aransas Pass ISD	205-901	Baseball Field Netting (40 x 220)		450 S. Ave. A	Aransas Pass	78336										\$ 58,000	\$ -	\$ 58,000
Aransas Pass ISD	205-901	Baseball Padded Back-Stop		450 S. Ave. A	Aransas Pass	78336										\$ 14,000	\$ -	\$ 14,000
Aransas Pass ISD	205-901	Baseball Bleachers (85' x 7 rows)		450 S. Ave. A	Aransas Pass	78336										\$ 59,500	\$ -	\$ 59,500
Aransas Pass ISD	205-901	Baseball Pressbox (8 x 12)		450 S. Ave. A	Aransas Pass	78336	NC	1	2022	2022		96	\$ 250.00	5%		\$ 24,000	\$ 1,200	\$ 25,200
Aransas Pass ISD	205-901	Baseball Bullpen (fencing)		450 S. Ave. A	Aransas Pass	78336										\$ 8,500	\$ -	\$ 8,500
Aransas Pass ISD	205-901	Baseball Sound System		450 S. Ave. A	Aransas Pass	78336										\$ 8,250	\$ -	\$ 8,250
Aransas Pass ISD	205-901	Baseball Dugout A (8 x 35)		450 S. Ave. A	Aransas Pass	78336	NC	1	2022	2022		280	\$ 30.00			\$ 8,400	\$ -	\$ 8,400
Aransas Pass ISD	205-901	Baseball Dugout B (8 x 35)		450 S. Ave. A	Aransas Pass	78336	NC	1	2022	2022		280	\$ 30.00			\$ 8,400	\$ -	\$ 8,400
Aransas Pass ISD	205-901	Baseball Bleacher Canopy (18 x 35)		450 S. Ave. A	Aransas Pass	78336	NC	1	2022	2022		630	\$ 30.00			\$ 18,900	\$ -	\$ 18,900
Aransas Pass ISD	205-901	Baseball Batting Cage Canopy (34 x 80)		450 S. Ave. A	Aransas Pass	78336	NC	1	2022	2022		2720	\$ 30.00			\$ 81,600	\$ -	\$ 81,600
Aransas Pass ISD	205-901	Baseball Field Lighting		450 S. Ave. A	Aransas Pass	78336										\$ 144,200	\$ -	\$ 144,200
Aransas Pass ISD	205-901	Baseball Field Scoreboard		450 S. Ave. A	Aransas Pass	78336										\$ 8,400	\$ -	\$ 8,400
Aransas Pass ISD	205-901	Softball Field Netting (30 x 180)		450 S. Ave. A	Aransas Pass	78336										\$ 44,000	\$ -	\$ 44,000
Aransas Pass ISD	205-901	Softball Padded Back-Stop		450 S. Ave. A	Aransas Pass	78336										\$ 14,000	\$ -	\$ 14,000
Aransas Pass ISD	205-901	Softball Bleachers (85' x 7 rows)		450 S. Ave. A	Aransas Pass	78336										\$ 59,500	\$ -	\$ 59,500
Aransas Pass ISD	205-901	Softball Pressbox (8 x 12)		450 S. Ave. A	Aransas Pass	78336	NC	1	2022	2022		96	\$ 250.00	5%		\$ 24,000	\$ 1,200	\$ 25,200
Aransas Pass ISD	205-901	Softball Bullpen (fencing)		450 S. Ave. A	Aransas Pass	78336										\$ 8,500	\$ -	\$ 8,500
Aransas Pass ISD	205-901	Softball Sound System		450 S. Ave. A	Aransas Pass	78336										\$ 8,250	\$ -	\$ 8,250
Aransas Pass ISD	205-901	Softball Dugout A (8 x 35)		450 S. Ave. A	Aransas Pass	78336	NC	1	2022	2022		280	\$ 30.00			\$ 8,400	\$ -	\$ 8,400
Aransas Pass ISD	205-901	Softball Dugout B (8 x 35)		450 S. Ave. A	Aransas Pass	78336	NC	1	2022	2022		280	\$ 30.00			\$ 8,400	\$ -	\$ 8,400
Aransas Pass ISD	205-901	Softball Bleacher Canopy (18 x 35)		450 S. Ave. A	Aransas Pass	78336	NC	1	2022	2022		630	\$ 30.00			\$ 18,900	\$ -	\$ 18,900
Aransas Pass ISD	205-901	Softball Batting Cage Canopy (36 x 60)		450 S. Ave. A	Aransas Pass	78336	NC	1	2022	2022		2160	\$ 30.00			\$ 64,800	\$ -	\$ 64,800
Aransas Pass ISD	205-901	Softball Field Lighting		450 S. Ave. A	Aransas Pass	78336										\$ 77,000	\$ -	\$ 77,000
Aransas Pass ISD	205-901	Softball Field Scoreboard		450 S. Ave. A	Aransas Pass	78336										\$ 8,400	\$ -	\$ 8,400
Aransas Pass ISD	205-901	Concession Site Lights		450 S. Ave. A	Aransas Pass	78336										\$ 32,000	\$ -	\$ 32,000
Aransas Pass ISD	205-901	Ticket Booth Entrance Archway		450 S. Ave. A	Aransas Pass	78336										\$ 80,000	\$ -	\$ 80,000
Aransas Pass ISD	205-901	Ticket Booth Entrance Masonry Pillars		450 S. Ave. A	Aransas Pass	78336										\$ 18,000	\$ -	\$ 18,000
Aransas Pass ISD	205-901	Ticket Booth Entrance Site Lights		450 S. Ave. A	Aransas Pass	78336										\$ 25,000	\$ -	\$ 25,000
Aransas Pass ISD	205-901	Stadium Water Storage Tank		450 S. Ave. A	Aransas Pass	78336										\$ 25,000	\$ -	\$ 25,000
Aransas Pass ISD	205-901	Parking Lot 6' Fencing Main Field		450 S. Ave. A	Aransas Pass	78336										\$ 119,700	\$ -	\$ 119,700
Aransas Pass ISD	205-901	Parking Lot 4' Football Fence		450 S. Ave. A	Aransas Pass	78336										\$ 31,680	\$ -	\$ 31,680
Aransas Pass ISD	205-901	Tennis Courts		450 S. Ave. A	Aransas Pass	78336										\$ 80,000	\$ -	\$ 80,000
Aransas Pass ISD	205-901	Tennis Courts Lighting		450 S. Ave. A	Aransas Pass	78336										\$ 27,000	\$ -	\$ 27,000
Aransas Pass ISD	205-901	Blunt Middle School Main	3A	2103 Demory	Aransas Pass	78336	MNC	1	1988	1998		87,849	\$ 208.22	18%		\$ 18,292,252	\$ 3,292,605	\$ 21,584,857
Aransas Pass ISD	205-901	Charlie Marshall Elementary Main	4A	2300 McMullen	Aransas Pass	78336	MNC	1	1996			58,681	\$ 210.40	16%		\$ 12,346,745	\$ 1,975,479	\$ 14,322,224
Aransas Pass ISD	205-901	Charlie Marshall Elementary Gym	4B	2300 McMullen	Aransas Pass	78336	MNC	1	1997			7,015	\$ 208.31	15%		\$ 1,461,316	\$ 219,197	\$ 1,680,513
Aransas Pass ISD	205-901	Charlie Marshall Elementary Covered Play Area		2300 McMullen	Aransas Pass	78336	NC	1				4,575	\$ 10.00			\$ 45,750	\$ -	\$ 45,750
Aransas Pass ISD	205-901	HT Faulk Elementary School	5A	902 W Nelson	Aransas Pass	78336	MNC	2	2019	2019	YES	71,891	\$ 209.48	16%		\$ 15,059,527	\$ 2,409,524	\$ 17,469,051
Aransas Pass ISD	205-901	Kieberger Elementary Main	6A	748 W Goodnight Ave	Aransas Pass	78336	MNC	1	1950			36,849	\$ 208.09	16%		\$ 7,667,992	\$ 1,226,879	\$ 8,894,871
Aransas Pass ISD	205-901	Storage Building		748 W Goodnight Ave	Aransas Pass	78336	F	1				80	\$ 30.00			\$ 2,400	\$ 500	\$ 2,900
Aransas Pass ISD	205-901	Covered Play area		748 W Goodnight Ave	Aransas Pass	78336	F	1				960	\$ 15.00			\$ 14,400	\$ -	\$ 14,400
Aransas Pass ISD	205-901	Covered Walkways		748 W Goodnight Ave	Aransas Pass	78336										\$ 5,000	\$ -	\$ 5,000
Aransas Pass ISD	205-901	Carpenter Shop	7B	715 W. Wheeler Ave	Aransas Pass	78336	FR	1	1966			3,780	\$ 144.04	25%		\$ 544,480	\$ 136,120	\$ 680,600
Aransas Pass ISD	205-901	Electrical \ HVAC	7C	715 W. Wheeler Ave	Aransas Pass	78336	NC	1	1970			2,418	\$ 100.66	25%		\$ 243,402	\$ 60,851	\$ 304,253
Aransas Pass ISD	205-901	Transportation / Bus Maintenance	7D	715 W. Wheeler Ave	Aransas Pass	78336	NC	1	1987			7,300	\$ 90.42	25%		\$ 660,060	\$ 165,015	\$ 825,075
Aransas Pass ISD	205-901	Storage Building	7F	715 W. Wheeler Ave	Aransas Pass	78336	NC	1	1970			4,000	\$ 92.76	25%		\$ 371,031	\$ 92,758	\$ 463,789
Aransas Pass ISD	205-901	Compton Hall	7G	715 W. Wheeler Ave	Aransas Pass	78336	FR	1	1963	2001		7,920	\$ 190.55	25%		\$ 1,509,182	\$ 377,296	\$ 1,886,478
Aransas Pass ISD	205-901	Records Storage	7J	715 W. Wheeler Ave	Aransas Pass	78336	JM	1	1942			1,440	\$ 211.72	25%		\$ 304,881	\$ 76,220	\$ 381,101
Aransas Pass ISD	205-901	Pump House		715 W. Wheeler Ave	Aransas Pass	78336	F	1				16	\$ 31.25			\$ 500	\$ -	\$ 500
Aransas Pass ISD	205-901	Covered Walkways		715 W. Wheeler Ave	Aransas Pass	78336										\$ 27,000	\$ -	\$ 27,000
Totals																\$ 89,366,084	\$ 15,802,043	\$ 105,168,127

Exhibit III – Vehicle Schedule

Member Number	Member Name	Vehicle Number	Mfr Year	Make	Model	Vin	ClassX	Cost New	Comprehensive Deductible	Collision Deductible	District Unit Number
205-901	Aransas Pass ISD	1	1996	THOMAS BUILT	BUS (77 pass)	1T88R4B2UT1141196	618400	\$58,197	\$1,000	\$1,000	Bus #4
205-901	Aransas Pass ISD	2	1998	CHEVY	PU	1GBHC34J9WF052252	014990	\$23,561	\$1,000	\$1,000	Truck #20
205-901	Aransas Pass ISD	3	2000	GMC	VAN	1GTHG39ROY1169104	014990	\$19,350	\$1,000	\$1,000	Van #22
205-901	Aransas Pass ISD	4	2002	INTERNATIONAL	BUS (24 pass)	1HVBRABLO2A91688	618400	\$56,166	\$1,000	\$1,000	Bus #1
205-901	Aransas Pass ISD	5	2003	FORD	CARGO TRK	1FCWF36L33EA65116	014990	\$21,553	\$1,000	\$1,000	
205-901	Aransas Pass ISD	6	2003	FREIGHTLINER	BUS (71 pass)	4UZAAXBV03CL70463	618400	\$58,068	\$1,000	\$1,000	Bus #12
205-901	Aransas Pass ISD	7	2003	CHEVROLET	UTILITY TRK	1GBGC24U93Z330500	014990	\$18,885	\$1,000	\$1,000	Truck #24
205-901	Aransas Pass ISD	8	2003	THOMAS BUILT	BUS (71 pass)	4UZAAXBV23CL71579	618400	\$58,023	\$1,000	\$1,000	Bus #13
205-901	Aransas Pass ISD	9	2004	THOMAS BUILT	BUS (71 pass)	4UZAAXC534CM78520	618400	\$61,800	\$1,000	\$1,000	Bus #14
205-901	Aransas Pass ISD	10	2006	FREIGHTLINER	BUS (72 pass)	4UZABRDC46CN91606	618400	\$67,004	\$1,000	\$1,000	Bus#15
205-901	Aransas Pass ISD	11	2008	FORD	F-250 PU	1FTSX20Y88EA08691	014990	\$19,359	\$1,000	\$1,000	Truck #26
205-901	Aransas Pass ISD	12	2008	FORD	F-250 PU	1FTSX20Y68EA08690	014990	\$19,359	\$1,000	\$1,000	Truck #25
205-901	Aransas Pass ISD	13	2009	INTERNATIONAL	BUS (77 pass)	4DRBUSKNX9A698749	618400	\$80,647	\$1,000	\$1,000	Bus #16
205-901	Aransas Pass ISD	14	2010	BLUEBIRD	BUS (47 pass)	1BAKBCPA1AF274612	618400	\$84,477	\$1,000	\$1,000	Bus #5
205-901	Aransas Pass ISD	15	2010	BLUEBIRD	BUS (47 pass)	1BAKBCPA3AF274613	618400	\$84,477	\$1,000	\$1,000	
205-901	Aransas Pass ISD	16	2011	INTERNATIONAL	BUS (77 pass)	4DRBUSKN6BB284609	618400	\$75,894	\$1,000	\$1,000	Bus #19
205-901	Aransas Pass ISD	17	1992	UTILTY	TRLR	J2092	684990				
205-901	Aransas Pass ISD	18	2000	ROSS STAFFORD	TRLR	1S9FS0811P1292321	684990				
205-901	Aransas Pass ISD	19	2002	PACE AMERICAN	TRLR	47ZBF08112X021617	684990				
205-901	Aransas Pass ISD	20	2004	UTILITY	TRLR	3617583466AP78336	684990				
205-901	Aransas Pass ISD	21	2006	BIGT	TRLR	16VPX182262E40263	684990				
205-901	Aransas Pass ISD	22	2012	Chevrolet	Malibu	1G1ZC5E03CF161652	739800	\$16,053	\$1,000	\$1,000	
205-901	Aransas Pass ISD	23	2017	International	Bus	4DRBUC8N6HB283398	618400	\$90,968	\$1,000	\$1,000	Bus #18
205-901	Aransas Pass ISD	24	2017	International	Bus	4DRBUC8N6HB283417	618400	\$90,968	\$1,000	\$1,000	Bus #19
205-901	Aransas Pass ISD	25	2017	International	Bus	4DRBUC8N0HB283431	618400	\$90,853	\$1,000	\$1,000	Bus #20
205-901	Aransas Pass ISD	26	2017	International	Bus	4DRBUC8N6HB283451	618400	\$90,853	\$1,000	\$1,000	Bus #21
205-901	Aransas Pass ISD	27	2016	FORD	F150	1FTMF1C8XGKD25003	014990	\$21,000	\$1,000	\$1,000	
205-901	Aransas Pass ISD	28	2013	CHEVROLET	1500	1GNSCHE03DR130998	014990	\$28,600	\$1,000	\$1,000	
205-901	Aransas Pass ISD	29	2019	Interstate	TRLR	4RAVS2426KC049449	684990	\$10,222	\$1,000	\$1,000	