

RESOLUTION TO EXECUTE THE AGREEMENT ESTABLISHING THE ASSOCIATION OF COUNTY COMMISSIONERS OF OKLAHOMA

Be it remembered that on the 13th day of June, 2016, at a regular meeting of the Board of County Commissioners of OTTAWA County ("County"), the following RESOLUTION was presented, read and adopted:

original mailed 6-13-16

**ACCO SELF INSURANCE FUND
WORKERS' COMPENSATION INSURANCE QUOTE**

FOR

OTTAWA COUNTY

COVERAGE PERIOD FROM (7-1-2016)-(6-30-2017)

6/1/2016

PAYMENT OPTION (ONE)

\$ 120,701

DUE ON OR BEFORE JULY 31, 2016

PAYMENT OPTION (TWO)

\$ 62,161

DUE ON OR BEFORE JULY 31, 2016

\$ 62,161

DUE ON OR BEFORE JANUARY 31, 2017

TOTAL PAYMENT OPTION (TWO)

\$ 124,322

Compsource Mutual Insurance Company Premium \$114,714

ACCO-SIF Claim Handling Fee \$5,987

TOTAL \$120,701

INTENT TO PARTICIPATE IN ACCO-SIF
(Worker's Compensation)

OTTAWA COUNTY

2016-2017

Payment Options:

Decision: (mark X)

Payment Option – 1

Payment due in full by July 31, 2016

X

Payment Option – 2

1st Installment due July 31, 2016
2nd Installment due Jan. 31, 2017

For binding coverage effective July 1, 2016 through June 30, 2017, ACCO-SIF accepts and authorizes issuance of the Association of County Commissioners of Oklahoma – Self Insured Fund Workers Compensation Policy incorporating the above payment option.

Gary Wepuk
Chairman

Attest: Reba G. Sill By: RM
County Clerk

John Clarke
Member

Russell Carls
Member





Gene Wallace
Executive Director
429 N.E. 50th Street
Oklahoma City, OK 73105

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May 13th, 2016

RE: 2016/2017 Workman's Compensation Insurance Renewal Quote
Member: Ottawa County

Dear ACCO-SIF Member,

Find enclosed the workman's compensation renewal quote for the 2016/2017 policy term.

A \$5,987 claim handling fee is included within the attached quote. The ACCO-SIF claim handling fee was calculated based on the total amount of workman's compensation claims filed in the last seven policy terms in relation to the grand total amount of the workman's compensation claims filed by all of ACCO-SIF members during that same seven year time frame.

The balance of the attached quote in the amount of \$114,714 represents the Compsource Mutual Insurance Company premium calculation which is based on your 2016/2017 submitted payroll report along with applying an experience modifier (EMOD) applicable to the frequency and severity of your workman's compensation claims activity. The premium calculation will be included within the workman's compensation policy that will be mailed out no later than August 31st, 2016.

Please fax the endorsed **RESOLUTION** and **PAYMENT OPTION** to my direct fax number @ 405-576-3149 or by email to dustyb@okacco.com. After these two documents are faxed to ACCO, please mail the original copies to ACCO by regular mail. Return both documents on or before June 3rd, 2016. These two documents **ARE NOT INVOICES**, an original invoice will be sent after these two documents are returned. ACCO will mail out the original premium invoices within the first two weeks of July 2016.

We would like to reemphasize the importance of submitting all premium payments on a timely basis. For those members that choose the one payment option, please remit your premium payment no later than **July 31st, 2016**. For those members that choose the two payment option, please remit your first payment no later than **July 31st, 2016** and your second payment no later than **January 31st, 2017**.

The ACCO-SIG (property/liability) quotes will be mailed out within the next 30 days.

If you should have any questions, please give me a call.

Sincerely,

Dusty Birdsong
Administrator
(405) 516-5318 Direct Line
(405) 524-3200
(800) 982-6212 Toll Free Line