



# AGENDA REPORT

New Haven, Michigan

Meeting Type

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**MEETING DATE:** June 10, 2025

**DEPARTMENT:** Office

**DATE SUBMITTED:** June 4, 2025

**PREPARED BY:** Sandra Cazel, Accountant

**ITEM TITLE:** Worker's Compensation 07/01/2025 to 06/30/2026

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**EXECUTIVE SUMMARY:** Our renewal total for our workers' compensation is \$12,264.00

**RECOMMENDED ACTION:** Please approve the attached Declaration of coverage from Michigan Municipal League Worker's Compensation Fund in the amount of \$12,264.00

**ADMINISTRATIVE REVIEW:**

**EXHIBITS:**