

**DATE:** October 1, 2024

**TO:** Mayors/Village Presidents/Town Presidents

**CC:** Risk Management Coordinators

**FROM:** Brad Cole, Chief Executive Officer  
IML Risk Management Association



**RE:** RMA 2025 Coverage Year

The Illinois Municipal League Risk Management Association (RMA) thanks you for your continued participation in the RMA program. We are very proud of our long history of providing a comprehensive and innovative risk management program and superior customer service to our members.

Enclosed please find your municipality's invoice for the 2025 coverage year starting on January 1, 2025.

While the effects of inflation are noticeable in the overall rising costs of claims and increased auto and property values, our largest cost driver has been the overall increase in workers' compensation expenses. Please reference the enclosed arbitration outcomes infographic published by the Illinois Municipal League (IML) as well as the RMA *Return-to-Work Program* packet. If you have an injured employee with light duty restrictions, we ask your assistance in working with the RMA loss control and claims team to implement a return-to-work program in as many situations as possible. A robust return-to-work program will help you and RMA keep workers' compensation costs to a minimum.

RMA knows the importance of budget stability and we have worked hard to keep any specific rate increases to a minimum after offering rate reductions or rate freezes to our members in four of the last six years. We are also pleased to continue to offer a 1% early payment discount if your contribution payment is received in full on or by November 15, 2024.

We thank you for making RMA your choice for professional risk management services and insurance coverage. If you have questions about your 2025 renewal contribution amount or coverages, please contact a member of the RMA membership services team at (800) 252-5051.

If you would like one of our staff members to visit your municipality to review the RMA program and its benefits, or if you have questions or comments or want to update our records on covered property and other insured items, please feel welcome to contact our main office at (217) 525-1220 to schedule an appointment.

As always, please feel welcome to contact me directly at any time. Thanks.

*Disclaimer: The trade secret, commercial, and financial information contained in the documents hereby provided are proprietary, privileged, and confidential IMLRMA/CCMSI records. Distribution of such trade secret, commercial, or financial information is prohibited and would cause competitive harm to IMLRMA/CCMSI.*

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**Risk  
Management  
Association**

# INVOICE

**PO Box 5180, Springfield, IL 62705-5180 | Ph: (217) 525-1220 | Fax: (217) 525-7438**

Please return this form with payment  
after completing the information  
on the reverse side.

Date: October 1, 2024

Member: Village of Thornton

Account #: 0583

Indicate Payment Option (from list below): \_\_\_\_\_

Amount Enclosed: \$ \_\_\_\_\_

**MAKE CHECK PAYABLE TO RMA**

## BILLING DETAIL

### 2025 IML RISK MANAGEMENT ASSOCIATION ANNUAL CONTRIBUTION

Work Comp	\$78,575
Auto Liability & Comprehensive General Liability	\$69,935
Portable Equipment	\$3,691
Auto Physical Damage	\$17,217
Property	\$25,406
	<u>\$194,824</u>
2025 ILLINOIS MUNICIPAL LEAGUE MEMBERSHIP DUES*	\$ 350

### INVOICE TOTAL

**\$195,174**

**PLEASE CHOOSE ONE OF THE FOLLOWING  
PAYMENT OPTIONS and enter it in the space  
provided above:**

#### OPTION #1 – Pay Full Amount

Contribution Amount	\$194,824.00
Minus 1% Savings	\$1,948.24
	<u>\$192,875.76</u>
Illinois Municipal League Dues	\$ 350.00
<b>Total due by 11/15/24</b>	<b>\$193,225.76</b>

#### OPTION #2 - Pay Full Amount

Contribution Amount	\$194,824.00
Illinois Municipal League Dues	\$ 350.00
<b>Total due by 12/13/24</b>	<b>\$195,174.00</b>

#### OPTION #3 - Pay in two installments

Includes 1% installment fee

Contribution Amount	\$194,824.00
Plus 1% fee	\$1,948.24
	<u>\$196,772.24</u>
Illinois Municipal League Dues	\$ 350.00
	<u>\$197,122.24</u>

**\$98,561.12 Due by 12/13/24**

**\$98,561.12 Due by 5/16/25**

*\*Membership with the Illinois Municipal League (IML) is a requirement to remain a member of the IML Risk Management Association.*

On behalf of the municipality named above ("Member"), I hereby warrant that I have the authority to sign this agreement on the Member's behalf. (If choosing the installment option, I acknowledge and understand that it is afforded only as a benefit for budgeting purposes and is not meant to allow for mid-term withdrawal.) I acknowledge and understand that Article 5 of the Intergovernmental Cooperation Contract ("Contract") prohibits termination of the Intergovernmental Cooperation Contract no less than 120 days prior to the first day of January of any given year. Per Article 5, I warrant that the Member will adhere to the Contract and pay all contributions when due.

**Municipal Official (please sign):**

\_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**INVOICE****2025 Min/Max Contribution**

The signed Min/Max Agreement  
must be returned with your payment.

PO Box 5180, Springfield, IL 62705-5180 | Ph: (217) 525-1220 | Fax: (217) 525-7438

Please return this form with payment  
after completing the information  
on the reverse side.

Date: October 1, 2024

Member: Village of Thornton

Account #: 0583

Indicate Payment Option (from list below): \_\_\_\_\_

Amount Enclosed: \$ \_\_\_\_\_

**MAKE CHECK PAYABLE TO RMA**

**BILLING DETAIL****2025 IML RISK MANAGEMENT ASSOCIATION ANNUAL CONTRIBUTION**

Work Comp	\$70,148
Auto Liability & Comprehensive General Liability	\$62,434
Portable Equipment	\$3,295
Auto Physical Damage	\$15,371
Property	\$22,681
	<u>\$173,929</u>
<b>2025 ILLINOIS MUNICIPAL LEAGUE MEMBERSHIP DUES*</b>	<b>\$ 350</b>

**INVOICE TOTAL**

**\$174,279**

**PLEASE CHOOSE ONE OF THE FOLLOWING  
PAYMENT OPTIONS and enter it in the space  
provided above:**

**OPTION #1 – Pay Full Amount**

Contribution Amount	\$173,929.00
Minus 1% Savings	\$1,739.29
	<u>\$172,189.71</u>
Illinois Municipal League Dues	\$ 350.00
<b>Total due by 11/15/24</b>	<b>\$172,539.71</b>

**OPTION #2 - Pay Full Amount**

Contribution Amount	\$173,929.00
Illinois Municipal League Dues	\$ 350.00
<b>Total due by 12/13/24</b>	<b>\$174,279.00</b>

**OPTION #3 - Pay in two installments****Includes 1% installment fee**

Contribution Amount	\$173,929.00
Plus 1% fee	\$1,739.29
	<u>\$175,668.29</u>
Illinois Municipal League Dues	\$ 350.00
	<u>\$176,018.29</u>

\$88,009.15 Due by 12/13/24

\$88,009.14 Due by 5/16/25

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On behalf of the municipality named above ("Member"), I hereby warrant that I have the authority to sign this agreement on the Member's behalf. (If choosing the installment option, I acknowledge and understand that it is afforded only as a benefit for budgeting purposes and is not meant to allow for mid-term withdrawal.) I acknowledge and understand that Article 5 of the Intergovernmental Cooperation Contract ("Contract") prohibits termination of the Intergovernmental Cooperation Contract no less than 120 days prior to the first day of January of any given year. Per Article 5, I warrant that the Member will adhere to the Contract and pay all contributions when due.

**Municipal Official (please sign):**

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### Minimum/Maximum Contribution Agreement

This Agreement is between the Illinois Municipal League Risk Management Association (RMA), an intergovernmental association formed pursuant to Article VII, Section 10 of the Illinois Constitution of 1970 and the **VILLAGE OF THORNTON**, a member of RMA. This Agreement amends and supplements the declarations pages dated January 01, 2025 to January 01, 2026 and all endorsements thereto.

#### 1. DEFINITIONS

The following definitions shall apply for purposes of this Agreement:

- Loss Fund – Those dollars set aside for the payment of claims excluding reinsurance and excess premiums and administrative costs.
- Minimum Loss Fund – 85% of those dollars set aside for the payment of claims excluding reinsurance and excess premiums and administrative costs.
- Maximum Loss Fund – 130% of those dollars set aside for the payment of claims excluding reinsurance and excess premiums and administrative costs.
- Paid Claim Dollars – Those payments made by RMA on claims including defense costs against the **VILLAGE OF THORNTON** minus recovery from subrogation, deductible or salvage credited against those claim payments.
- Minimum Contribution – Minimum Loss Fund including reinsurance and excess premiums and administrative costs.
- Maximum Contribution – Maximum Loss Fund including reinsurance and excess premiums and administrative costs.

#### 2. MINIMUM/MAXIMUM CONTRIBUTION BREAKDOWN

The **VILLAGE OF THORNTON** hereby agrees to the following schedule of contributions:

		<u>Minimum Contribution</u>		<u>Maximum Contribution</u>
Reinsurance and Excess Premiums and Administrative Costs		\$ 55,525		\$ 55,525
Loss Fund	@ 85%	<u>\$ 118,404</u>	@ 130%	<u>\$ 181,089</u>
Contribution		\$ 173,929		\$ 236,614

3. Based upon a comparison of paid claim dollars against the loss fund, RMA will determine whether additional contributions beyond the minimum contribution will be required up to the maximum contribution.
4. For purposes of determining paid claims, RMA will complete a semi-annual review of paid claim dollars.

5. **NOTICE**

RMA hereby agrees to send, through its agents, written notice when paid claim dollars are equal to or greater than 60% of the Minimum Loss Fund.

RMA agrees, through its agents, to send a second written notice when paid claim dollars equal or exceed 85% of the Minimum Loss Fund.

6. **BILLING/PAYMENT** – The parties to this Agreement hereby agree to the following terms:

When paid claim dollars reach or exceed 100 percent of the Minimum Loss Fund, billing will be instituted on a yearly basis for those paid claim dollars in excess of the Minimum Loss Fund and billing will continue on a yearly basis until the Maximum Loss Fund limit is attained or all claims initiated during the coverage period are closed. Billings will be completed in July of each year for paid claim dollars through June 30.

The **VILLAGE OF THORNTON** hereby agrees to make payment within 30 days of its receipt of billing.

7. All other definitions, conditions and coverages of RMA remain the same under this Agreement, including the handling of all claims and member contribution payment schedules.
8. This Agreement is to be interpreted and construed in accordance with the laws of the State of Illinois.
9. If any one portion or portions of this Agreement is found to be invalid or unenforceable, the remainder shall remain valid and binding on the parties.

The undersigned hereby affirm that they are duly authorized as agents to bind the parties to this Agreement.

\_\_\_\_\_  
Mayor/Village President/Town President

\_\_\_\_\_  
Date

\_\_\_\_\_  
Treasurer/Comptroller/Risk Management Coordinator

\_\_\_\_\_  
Date

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*Reserved for RMA use only*

\_\_\_\_\_  
RMA Managing Director

\_\_\_\_\_  
Date