

Insured: TOMBALL ATHLETIC BOOSTER CLUB
Coverage: Not-For-Profit Organization Liability including Employment Practices Liability
Coverage
Client No.: 232961
Policy No.: PS0000004178009
Expiration Date: November 23, 2021

Express Renewal Letter

The expiring policy noted above meets the criteria for our **Express Renewal** process.

We are offering to renew coverage based upon the terms outlined in the attached proposal subject to verification of the following (please mark one):

X No changes have been made in the organization structure, ownership and/or services provided by TOMBALL ATHLETIC BOOSTER CLUB.

_____ Changes have been made in the organization structure, ownership and/or services provided by TOMBALL ATHLETIC BOOSTER CLUB.

(If changes have been made in the organization structure, ownership and/or services performed please complete a renewal application.)

I accept the express renewal offered by State Farm Fire & Casualty at the expiring Limit of Liability, Retention/Deductible and payment plan. I acknowledge that the information provided in the last application submitted for issuance of the coverage to be renewed will be the basis of the renewal offer. I also agree that the answers and statements given in this letter are accurate and complete.

Signature: _____

(Must be signed by Chairperson of the organization, President or Executive Director)

Date Signed: 10/13/21

State Farm



**State Farm
Specialty Products**

Telephone: (866) 737-6877
Facsimile: (847) 572-6262

RENEWAL PREMIUM PROPOSAL

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Renewal of: PS0000004178009 **Expiring on:** November 23, 2021

Delivered To: Randal Reeves
RANDAL REEVES STATE FARM AGENCY
7702 Louetta Rd
Spring, TX 77379-7244

Agent No.: 536854 **Agent Fax No.:** (281) 376-2984

Proposed Insured: TOMBALL ATHLETIC BOOSTER CLUB
30030 Quinn Road
Tomball, TX 77375

Client No.: 232961

Program: Not-For-Profit Organization Liability including Employment Practices Liability Coverage

Coverage Type: Claims Made

Insurer: State Farm Fire and Casualty Company

Proposal Term: This premium proposal is valid until the expiration date stated above, unless extended in writing by the Underwriter.

Attached is our renewal premium proposal for your review and use in presenting renewal coverage options to the client.

In order to ensure that there is no lapse in coverage, please complete and return the attached Request to Bind form, prior to the expiration date. You may return this form to us via fax (847-572-6262), e-mail to info@statefarmspecialty.com or U.S. Mail. Please do not collect premium for this policy, we will send an invoice directly to your client.

*** PLEASE REFER TO THE REQUIREMENTS ON PAGE 2 OF THIS PROPOSAL ****

*** PLEASE REFER TO THE SPECIAL CONDITIONS ON PAGE 3 OF THIS PROPOSAL ***

Should you have any questions on the information provided in the premium proposal please do not hesitate to contact us.

We appreciate your continued support.

Steve Hawkins

State Farm**State Farm
Specialty Products**Telephone: (866) 737-6877
Facsimile: (847) 572-6262**RENEWAL PREMIUM PROPOSAL**

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Proposal Option # 1 2021 Renewal

	Limit of Liability in the Aggregate	Retention Each Claim	Premium
1	\$1,000,000	\$1,000	\$842

Defense Costs: Defense Costs Outside Limits**Forms & Endorsements:**

PSNP1001TX(11/03)	Not-For-Profit Organization Liability Policy Including Employment Practices Liability Coverage
PS1039-01(01/15)	Certified Acts of Terrorism Endorsement
PS1041 (01/15)	Policyholder Disclosure Notice of Terrorism Insurance Coverage
PS1044 (02/21)	U.S. Treasury Department's Office Of Foreign Assets Control ("OFAC") Advisory Notice To Policyholders
PS1045 (02/21)	Trade Or Economic Sanctions
PSNP1026TX(11/03)	Texas Amendatory Endorsement

Subject to our receipt & approval of the following requirements:

- ☐ Not Applicable

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RENEWAL PREMIUM PROPOSAL

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Special Conditions:

Please fax back the **completed** Request To Bind form as soon as the client advises you to renew the policy. You do not need to collect any money to bind coverage. We will bill the client.

• Not Applicable

Payment Options: Annual, Semi-Annual, Quarterly
(Confirm Desired Payment Option at Time of Binding)

Unless stated otherwise herein:

This premium proposal is subject to receipt of the additional information specified above, if any. No coverage is bound without State Farm Specialty Products' written confirmation.

In the event of cancellation or expiration of a Binder or Policy, the Insurer shall be entitled to an earned premium for the time in force at pro rata of the annual premium as charged by the Insurer.

Date: October 13, 2021

By: Steve Hawkins