encova INSURANCE

Notice of Election: Selection of Retrospective Rating Plan

First named insured: Rock Island School Dist #41

Policy number: TBD

Insured ("Insured" "you" or "your"), acknowledges and confirms the selection of a **Retrospective Rating Plan** for
Policy Number: TBD, Effective: 12/01/2026 and issued by Encova.

"Insured" means the insured first named in the policy and all other insureds stated in the policy. "Encova" ("we" or "our") means Encova Insurance Company, BrickStreet Mutual Insurance, AlleghenyPoint Insurance Company, NorthStone Insurance Company, SummitPoint Insurance Company, and PinnaclePoint Insurance Company, but only to the extent such company or companies have issued the Policy you have selected.

The following applies to your Retrospective Rating Plan:

States	Minimum Premium Factor	Maximum Premium Factor	Loss Conversion Factor	Loss Limitation	Lines of Insurance Included	Loss Development Factors
IL	1.0	1.0	N/A	N/A	WC	N/A

Policy Period: 1 year
You understand, certify, and confirm:

At the final premium audit, this policy will be billed using the rates and rules in effect

You have elected a Retrospective Rating Plan as summarized in this Selection document.

You understand all terms, conditions, and provisions of the Retrospective Rating Plan, including the methods of premium and tax computations, payment, and penalties for cancellation.

You understand the premium deposit of the Policy is an estimate of the ultimate premium payable by you.

You understand the ultimate premium payable will be determined after adjustments by Encova based upon the completed audit relating to the policy period. You understand the adjustment may result in the payment of return premium to you or payment of additional premium by you.

The Insured warrants and represents that the person signing this Selection of Retrospective Rating Plan has been duly authorized to execute the Selection document for and on behalf of the Insured, and that he or she has the authority to bind the Insured, jointly and severally, to the terms of the Retrospective Rating Plan Policy and to the understanding, certifications, and confirmations herein.

First named insured: (3)
By:
Print Name:
Title:
Date:
Address:

·Encova Insurance ·BrickStreet Mutual Insurance ·NorthStone Insurance ·PinnaclePoint Insurance ·SummitPoint Insurance ·AlleghenyPoint Insurance