



FLOYD COUNTY BOARD OF EDUCATION  
Stephen A. Trimble, Interim Superintendent  
106 North Front Avenue  
Prestonsburg, Kentucky 41653  
Telephone (606) 886-2354 Fax (606) 886-8862  
www.floyd.kyschools.us

Sherry Robinson - Chair - District 5  
Dr. Chandra Varia, Vice-Chair - District 2  
Linda C. Gearheart, Member - District 1  
William Newsome, Jr., Member - District 3  
Rhonda Meade, Member - District 4

November 7, 2017

### ISSUE PAPER

**AGENDA ITEM:** Approve the use of a commercial carrier on Friday, November 10, 2017 to Louisville, KY for the Floyd Central High School Football Team

**APPLICABLE STATUTE(S), REGULATIONS, BOARD POLICY/PROCEDURES AND/OR SCHOOL IMPROVEMENT PLAN:**

KRS 156.153

Board Policy 9.36

Certified Common Carrier Service

Use of certified common carrier service shall be authorized by the Board on a case-by-case basis, and the reasons to justify such use shall be cited in the board minutes.

**FISCAL/BUDGETARY IMPACT:** The cost of this commercial carrier will be paid through school activity funds.

**HISTORY/BACKGROUND:** The Floyd Central High School Football Team and coaching staff have devoted a great amount of time practicing this season. Our team has demonstrated passion and perseverance to make it to the regional semi-final playoff game by winning their first playoff game.

**RECOMMENDATION AND RATIONALE:** The staff at Floyd Central High School recommends utilizing a common carrier for transportation to the regional semi-final playoff game on Friday, November 10, 2017 in Louisville, KY. These athletes have exhibited superior standards throughout the football season and we feel this trip will provide them with a much-deserved reward.

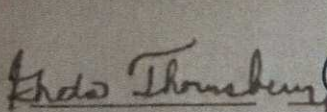
**ALTERNATIVE ACTION:**

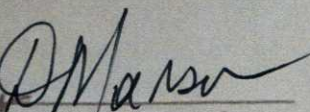
Request additional information

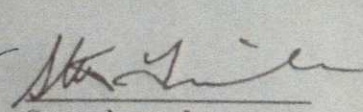
**CONTACT PERSON:**

Greta Thornsberry, Principal

Shawn Hager- Football Coach

  
Principal

  
Instructional Supervisor

  
Superintendent

# ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
10/18/2017

## PRODUCER

Sure Linc Services, Inc.  
111 Outer Loop

Louisville, KY 40214

INSURED MILLER TRANSPORTATION INC.,  
MILLER TRANSPORTATION BUS SERVICE, INC.  
111 OUTER LOOP  
LOUISVILLE, KY 40214

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

## INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: RLI

INSURER B:

INSURER C:

INSURER D:

INSURER E:

## COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	LFB0016201	10/17/2017	10/17/2018	EACH OCCURRENCE \$ 5,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 5,000,000 GENERAL AGGREGATE \$ 5,000,000 PRODUCTS - COMP/OP AGG \$ 5,000,000
A	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> COLLISION <input checked="" type="checkbox"/> SPECIFIED PERIL	LFB0019091	10/17/2017	10/17/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 5,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO	LFB0016201	10/17/2017	10/17/2018	AUTO ONLY - EA ACCIDENT \$ 5,000,000 OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
	<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	<b>OTHER</b> <b>GARAGE KEEPERS</b>	LFB0019091	10/17/2017	10/17/2018	600,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER IS TO BE LISTED AS AN ADDITIONAL INSURED

FAX 606-886-8862

## CERTIFICATE HOLDER

FLOYD COUNTY BOARD OF EDUCATION  
106 NORTH FRONT AVENUE  
  
PRESTONBURG, KY 41653

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

