

7/7/2017	Beginning Balance	\$ 4,011.48
	Total Deposits	\$ 23,490.85
	Total Expenses	\$(22,900.77)
7/6/2018	Ending Balance	\$ 4,601.56

Expenses:

▪	Food, Drinks, & Supplies	\$(10,789.33)
▪	Banquet Expenses	\$ (529.27)
▪	Team Jogging Suits & Shoes	\$ (2,417.72)
▪	Insurance & Training Expenses	\$ (546.85)
▪	Awards for Banquet	\$ (273.00)
▪	Summer Game Fees/Expenses	\$ (1,989.86)
▪	Coaches Expenses	\$ (1,021.41)
▪	Signs	\$ (1,256.00)
▪	Team food expense	\$ (830.23)
▪	Fundraiser expense	\$ (3,247.10)
	Total Expenses	\$ (22,900.77)

Deposits

▪	Concessions	\$ 14,613.85
▪	Basketball tournament	\$ 3,897.00
▪	Fundraiser Deposit	\$ 4,980.00
	Total Deposits	\$ 23,490.85

BEGINNING BALANCE	\$ 2,890.15
DEPOSIT	\$ 3,897.00
WITHDRAWL'S	\$ (1,545.59)
O/S CHECK'S	\$ (640.00)
ENDING BALANCE	\$ 4,601.56

MONTHLY ACTIVITY

<u>DATE</u>	<u>AMOUNT</u>	<u>DISCRIPTION</u>	<u>CHECK #</u>
5/10/2019	\$ (347.82)	SAMS	DC
5/13/2019	\$ (42.59)	WALMART	DC
6/3/2019	\$ (71.83)	WALMART	DC
6/4/2019	\$ (68.37)	GFS	DC
6/4/2019	\$ (157.45)	SAMS	DC
6/4/2019	\$ (31.80)	PIZZA HUT	DC
6/4/2019	\$ (73.13)	ZAXBYS	DC
6/5/2019	\$ (27.60)	WALMART	DC
5/24/2019	\$ (95.00)	VITAL SIGNS	2294
6/3/2019	\$ (300.00)	CASH/CONCESSION TOURNEY	2296
6/5/2019	\$ (150.00)	CHRIS STAFFORD (REF)	2298
6/5/2019	\$ (100.00)	CHRIS SWEENY (REF)	2300
6/5/2019	\$ (48.00)	DAKOTA THOMAS (CLOCK)	2301
6/5/2019	\$ (32.00)	TAMEIA LOVEN (CLOCK)	2302
Total:	\$ (1,545.59)		

BEGINNING BALANCE	\$	3,591.69
DEPOSIT	\$	-
WITHDRAWL'S	\$	(701.54)
O/S CHECK'S		
ENDING BALANCE	\$	2,890.15

MONTHLY ACTIVITY

<u>DATE</u>	<u>AMOUNT</u>	<u>DISCRIPTION</u>
4/15/2019	\$ (30.94)	SAMS
4/15/2019	\$ (39.04)	SAMS
4/16/2019	\$ (81.96)	IGA
4/17/2019	\$ (179.72)	SAMS
4/22/2019	\$ (11.88)	WALMART
4/23/2019	\$ (273.00)	OAK TREE
4/15/2019	\$ (85.00)	JKNIGHT REIMB FOR BBQ BANQUENT
Total:	\$ (701.54)	

BEGINNING BALANCE	\$ 5,284.91
DEPOSIT	\$ -
WITHDRAWL'S	\$ (1,693.22)
O/S CHECK'S	
ENDING BALANCE	\$ 3,591.69

MONTHLY ACTIVITY

<u>DATE</u>	<u>AMOUNT</u>	<u>DISCRIPTION</u>	<u>CHECK #</u>
3/22/2019	\$ (261.00)	SAMS	DC
3/25/2019	\$ (11.88)	WALMART	DC
3/27/2019	\$ (100.00)	SAMS/MEMBERSHIP	DC
4/3/2019	\$ (430.75)	SAMS	DC
4/8/2019	\$ (11.88)	WALMART	DC
4/8/2019	\$ (352.71)	SAMS	DC
1/25/2019	\$ (140.00)	VITAL SIGNS	2281
3/15/2019	\$ (385.00)	VITAL SIGNS	2292

Total: \$ (1,693.22)

BEGINNING BALANCE	\$ 7,314.60
DEPOSIT	\$ -
WITHDRAWL'S	\$ (2,029.69)
O/S CHECK'S	\$ -
ENDING BALANCE	\$ 5,284.91

MONTHLY ACTIVITY

<u>DATE</u>	<u>AMOUNT</u>	<u>DISCRIPTION</u>	<u>CHECK #</u>
2/11/2019	\$ (29.60)	WALMART	DC
2/11/2019	\$ (38.16)	MARATHON/PIZZA	DC
2/13/2019	\$ (33.69)	GFS	DC
2/13/2019	\$ (446.87)	SAMS	DC
2/13/2019	\$ (50.88)	PAPA JOHNS	DC
2/19/2019	\$ (24.00)	MARATHON/PIZZA	DC
2/20/2019	\$ (37.10)	MCDONALDS	DC
2/25/2019	\$ (54.00)	PAPA JOHNS	DC
2/25/2019	\$ (105.14)	ZAXBY'S	DC
2/7/2019	\$ (706.56)	FS QUATERBACK CLUB	2287
2/12/2019	\$ (154.01)	PFG	2289
3/2/2019	\$ (349.68)	PFG	2290

Total: \$ (2,029.69)

BEGINNING BALANCE	\$ 5,674.14
DEPOSIT	\$ 12,073.85
WITHDRAWL'S	\$ (10,433.39)
O/S CHECK'S	
ENDING BALANCE	\$ 7,314.60

MONTHLY ACTIVITY

<u>DATE</u>	<u>AMOUNT</u>	<u>DISCRIPTION</u>	<u>CHECK #</u>
1/9/2019	\$ (508.28)	SAMS	DC
1/14/2019	\$ (36.04)	MCDONALDS	DC
1/17/2019	\$ (52.98)	GFS	DC
1/17/2019	\$ (549.34)	SAMS	DC
1/22/2019	\$ (36.37)	WALMART	DC
1/22/2019	\$ (38.16)	MARATHON/PIZZA	DC
1/22/2019	\$ (56.16)	PIZZA HUT	DC
1/23/2019	\$ (33.92)	MCDONALDS	DC
1/23/2019	\$ (525.87)	SAMS	DC
1/28/2019	\$ (29.66)	PIZZA HUT	DC
1/28/2019	\$ (39.25)	ZAXBYS	DC
1/30/2019	\$ (5.00)	DOLLAR GENERAL	DC
1/31/2019	\$ (60.18)	GFS	DC
1/31/2019	\$ (541.18)	SAMS	DC
1/31/2019	\$ (38.16)	MARATHON/PIZZA	DC
2/4/2019	\$ (23.76)	WALMART	DC
2/4/2019	\$ (52.82)	WALMART	DC
2/4/2019	\$ (823.89)	SAMS	DC
2/4/2019	\$ (50.88)	MARATHON/PIZZA	DC
2/6/2019	\$ (16.01)	DOLLAR GENERAL	DC
2/7/2019	\$ (25.44)	MARATHON/PIZZA	DC
1/11/2019	\$ 709.00	DEPOSIT	DEPOSIT
1/17/2019	\$ 750.00	DEPOSIT	DEPOSIT
1/25/2019	\$ 6,188.50	DEPOSIT	DEPOSIT
1/25/2019	\$ 4,426.35	DEPOSIT	DEPOSIT
1/11/2019	\$ (574.38)	PFG	2278
1/17/2019	\$ (387.00)	VITAL SIGNS	2279
1/17/2019	\$ (173.84)	BSN SPORTS	2280
1/25/2019	\$ (3,119.50)	FS GIRLS B-BALL	2282
1/25/2019	\$ (480.00)	FS SPORTING GOODS	2283

2/4/2019	\$ (391.34)	PFG	2284
2/4/2019	\$ (1,763.88)	FS SCHOOLS /JOGGING SUITS	2285
Total:	\$ (3,750.37)		

BEGINNING BALANCE	\$ 6,393.24
DEPOSIT	\$ 840.00
WITHDRAWL'S	\$ (1,559.10)
O/S CHECK'S	
ENDING BALANCE	\$ 5,674.14

MONTHLY ACTIVITY

<u>DATE</u>	<u>AMOUNT</u>	<u>DISCRIPTION</u>
12/10/2018	\$ (35.19)	DOLLAR GENERAL
12/10/2018	\$ (39.67)	ZAXBY'S
12/17/2018	\$ (25.00)	MCDONALDS
12/17/2018	\$ (41.34)	PAPA JOHNS
12/18/2018	\$ (5.99)	PIGGLY WIGGLY
12/20/2018	\$ (18.83)	IGA
12/20/2018	\$ (38.99)	WALMART
12/20/2018	\$ (25.64)	HARDEES
12/21/2018	\$ (69.13)	WALMART
12/24/2018	\$ (23.32)	HARDEES
12/24/2018	\$ (60.00)	SOL AZTECA
1/2/2019	\$ (16.28)	WALMART
1/2/2019	\$ (318.65)	SAMS
1/7/2019	\$ (15.84)	WALMART
1/7/2019	\$ (44.29)	WALMART
1/7/2019	\$ (127.60)	GERALD PRINTING
12/17/2018	\$ 840.00	DEPOSIT
12/6/2019	\$ (614.34)	PFG
12/19/2018	\$ (39.00)	JENNIFER KNIGHT (REMIB FOR PIZZA)
Total:	\$ (719.10)	

BEGINNING BALANCE	\$	6,953.42	
DEPOSIT	\$	2,540.00	
WITHDRAWL'S	\$	(3,100.18)	
O/S CHECK'S	\$	-	
ENDING BALANCE	\$	6,393.24	

MONTHLY ACTIVITY

<u>DATE</u>	<u>AMOUNT</u>	<u>DISCRIPTION</u>	<u>CHECK #</u>
11/13/2018	\$ (3.99)	KEYSTOP (24PK OF WATER)	DC
11/7/2019	\$ (195.00)	VITAL SIGNS	2271
11/13/2019	\$ (29.68)	PIZZA HUT	DC
11/26/2018	\$ (94.86)	GFS	DC
11/26/2018	\$ (638.91)	SAMS	DC
11/28/2018	\$ (38.37)	WALMART	DC
11/30/2018	\$ (69.40)	WALMART	DC
12/8/2018	\$ (714.56)	SAMS	DC
11/14/2018	\$ (961.41)	GREGORY'S FLOOR	2272
11/21/2018	\$ (54.00)	VITAL SIGNS	2274
11/27/2018	\$ (300.00)	CASH (START UP CONCESSIONS)	2275
11/16/2018	\$ 1,650.00	DEPOSIT	
11/30/2018	\$ 890.00	DEPOSIT	
Total:	\$ (560.18)		

BEGINNING BALANCE	\$	6,438.39
DEPOSIT	\$	940.00
WITHDRAWL'S	\$	(424.97)
O/S CHECK'S	\$	-
ENDING BALANCE	\$	6,953.42

MONTHLY ACTIVITY

<u>DATE</u>	<u>AMOUNT</u>	<u>DISCRIPTION</u>	<u>CHECK #</u>
10/19/2018	\$ 200.00	DEPOSIT	
10/19/2018	\$ 300.00	DEPOSIT	
10/22/2018	\$ (71.17)	PIGGLY WIGGLY	DC
11/5/2018	\$ (50.80)	PIZZA HUT	DC
11/8/2018	\$ 400.00	DEPOSIT	
11/8/2018	\$ (303.00)	SPECIAL EVENT INSUR	DC

Total: \$ 275.03

BEGINNING BALANCE	\$	4,067.73
DEPOSIT	\$	2,900.00
WITHDRAWL'S	\$	(529.34)
O/S CHECK'S	\$	-
ENDING BALANCE	\$	6,438.39

MONTHLY ACTIVITY

<u>DATE</u>	<u>AMOUNT</u>	<u>DISCRIPTION</u>	<u>CHECK #</u>
9/10/2018	\$ 1,850.00	DEPOSIT	
9/14/2018	\$ 300.00	DEPOSIT	
9/17/2018	\$ 750.00	DEPOSIT	
9/17/2018	\$ (529.34)	F/S VOLLEYBALL	2270 paid for 1,

Total: \$ 2,370.66

BEGINNING BALANCE	\$	4,011.48
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DEPOSIT	\$	-
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WITHDRAWL'S	\$	-
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O/S CHECK'S	\$	-
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ENDING BALANCE	\$	4,011.48
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MONTHLY ACTIVITY

DATE

AMOUNT

DISCRIPTION

CHECK #

Total:

0

BEGINNING BALANCE	\$4,011.48		
DEPOSIT	\$ -		
WITHDRAWAL'S			
O/S CHECK'S	\$ -		
ENDING BALANCE	\$4,011.48		

MONTHLY ACTIVITY

<u>DATE</u>	<u>AMOUNT</u>	<u>DISCRIPTION</u>	<u>CHECK #</u>
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2019-2020 BOYS BASKETBALL BOOSTER OFFICERS

President – Jennifer Knight

Vice President – Temeka Chatman

Treasurer – Cimone Jones

Secretaary – Erica Hogan



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/07/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER R.V. Nuccio & Associates Insurance Brokers, Inc. 10148 Riverside Drive Toluca Lake, CA 91602	CONTACT NAME: Robert V. Nuccio	
	PHONE (A/C, No, Ext): (800) 364-2433	FAX (A/C, No): (818) 980-1595
	E-MAIL ADDRESS: support@rvnuccio.com	
INSURED FSHS Boys Basketball 400 S College Street Franklin, KY 42134	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Fireman's Fund Insurance Company	NAIC # 21873
	INSURER B: Nationwide Life Insurance Company	66869
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			XPK80978520 NANPO0041244	11/8/2018	11/8/2019	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY		DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000				
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		MED EXP (Any one person) \$ 5,000				
	GEN'L AGGREGATE LIMIT APPLIES PER:		PERSONAL & ADV INJURY \$ 1,000,000				
<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			GENERAL AGGREGATE \$ 2,000,000				
	AUTOMOBILE LIABILITY						PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input type="checkbox"/> ANY AUTO						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per person) \$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS					BODILY INJURY (Per accident) \$
	UMBRELLA LIAB						PROPERTY DAMAGE (Per accident) \$
	EXCESS LIAB						\$
	<input type="checkbox"/> OCCUR						EACH OCCURRENCE \$
	<input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/>
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	N/A				E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$
A	Directors and Officers			NPODO0046888	11/8/2018	11/8/2019	\$1,000,000
B	AD&D Medical Plus			NPOAM0035049	11/8/2018	11/8/2019	\$10,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Robert V. Nuccio

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/07/2018

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IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER R.V. Nuccio & Associates Insurance Brokers, Inc. 10148 Riverside Drive Toluca Lake, CA 91602	CONTACT NAME: Robert V. Nuccio PHONE (A/C, No, Ext): (800) 364-2433 FAX (A/C, No): (818) 980-1595 E-MAIL ADDRESS: support@rvnuccio.com																					
INSURED FSHS Boys Basketball 400 S College Street Franklin, KY 42134	<table border="1"><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A:</td><td>Fireman's Fund Insurance Company</td><td>21873</td></tr><tr><td>INSURER B:</td><td>Nationwide Life Insurance Company</td><td>66869</td></tr><tr><td>INSURER C:</td><td></td><td></td></tr><tr><td>INSURER D:</td><td></td><td></td></tr><tr><td>INSURER E:</td><td></td><td></td></tr><tr><td>INSURER F:</td><td></td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	Fireman's Fund Insurance Company	21873	INSURER B:	Nationwide Life Insurance Company	66869	INSURER C:			INSURER D:			INSURER E:			INSURER F:		
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INSURER E:																						
INSURER F:																						

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	<input checked="" type="checkbox"/>	<input type="checkbox"/>	XPK80978520 NANPO0041244	11/8/2018	11/8/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input type="checkbox"/> N/A						WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.I. EACH ACCIDENT \$ E.I. DISEASE - EA EMPLOYEE \$ E.I. DISEASE - POLICY LIMIT \$
A	Directors and Officers			NPODO0046888	11/8/2018	11/8/2019	\$1,000,000
B	AD&D Medical Plus			NPOAM0035049	11/8/2018	11/8/2019	\$10,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Additional Insured: Additional Insured: Simpson County Board of Education Event Description: All Events Start Date: 11/4/2017 End Date: 11/4/2018 / Sexual Misconduct Liability included. Event Description: Various events Start Date: 11/8/2018 End Date: 11/8/2019

CERTIFICATE HOLDER**CANCELLATION**

Simpson County Board of Education
430 S. College St
Franklin, KY 42134

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Robert V. Nuccio

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)
Simpson County Board of Education 430 S. College St Franklin , KY 42134
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A.** In the performance of your ongoing operations; or
- B.** In connection with your premises owned by or rented to you.



Wildcat Basketball

Boys Basketball Projected Budget 2019-2020:

Liability Insurance:	\$400
Hudl:	\$1150
Equipment:	\$2000
Travel Suites:	\$2000
Christmas Tournaments:	\$1500
Coaching Shirts Staff:	\$2000
Senior Night:	\$500
Banquet:	\$500
Summer Camp:	\$1000
Walmart:	\$400
Feed team:	\$1000
KABC Dues:	\$100
Little League:	\$500
Workout Equipment	\$500
Total:	\$13,800

Fundraising Projects:

	<u>Expected Monies:</u>
1. Concessions	\$8000.00
2. Gym Signs	\$3200.00
3. Sock Sales	\$1000.00
4. Clothing Sales	\$1000.00
5. AAU Tournaments	\$2000.00

2019-2020 Boys Basketball Booster Club Officers:

1. President—Jennifer Knight
2. Vice President—Tameka Chatman
3. Treasurer—Samone Jones
4. Secretary—Dana Hopson