

REQUEST FOR COVERAGE

School District: Russellville Independent

Address: 355 South Summer Street

Russellville KY 42276

<u>Name of school(s)</u>	<u>Grades to be covered</u>
<u>Stevenson Elementary School</u>	<u>PreK- 5</u>
<u>Russellville Elementary School</u>	<u>6 - 8</u>
<u>Russellville High School</u>	<u>9 -12</u>
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Company: Zurich

Basic Premium Due \$ 11,425.00

Plan Option: 3

Catastrophic Premium Due \$ 1,088.40

TOTAL PREMIUM DUE \$ 12,513.40

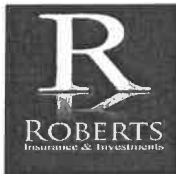
Effective date of coverage: 7/1/2023 Contact person: Mark Coursey

Phone number: (270) 726-8405 Fax number: (270) 726-4036

Email address: mark.coursey@russellville.kyschools.us

Contact person signature:  Date: 3/9/23

**Please email completed form to bobbi@bobrobertsins.com
Invoice will follow via mail once completed application is received in good order.**



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