**Board Memo**

**DATE:** 10/10/2024

**AGENDA ITEM DETAILS:**

**School/Department**

Boone County School District

**Product Vendor or Grant Issuer**

Bluegrass Risk Management

**Product or Grant Name**

Bluegrass Insurance Trust - Joint Exercise of Powers Agreement

**Date/Term (Beginning and End Dates/Year)**

ASAP

**APPLICABLE BOARD POLICY & STRATEGIC PLAN GOAL:**

Click or tap here to enter text.

**DESCRIBE USE OF CONTRACT/PURCHASE/AGREEMENT**

Joint Exercise of Powers Agreement with Boone County Schools and Bluegrass Risk Management as part of the Bluegrass Insurance Trust

**FUNDING FOR PURCHASES AND OTHER REQUESTS:**

**Total Cost**

N/A

**Funding Source**

N/A

 **\*If more than one funding source, list below along with amount or percent for each source**

N/A

**IF THIS IS A GRANT, ENTER AMOUNT TO BE AWARDED:**

**RECOMMENDATION:**

For the Board to approve the Joint Exercise of Powers Agreement with Boone County Schools and Bluegrass Risk Management as part of the Bluegrass Insurance Trust, as presented.

**CONTACT PERSON: (submitter)**

Eric McArtor, Deputy Superintendent/COO