

FULL RELEASE OF ALL FIXED PROPERTY DAMAGE CLAIMS WITH INDEMNITY

Claim #: 25-759069762

The undersigned, MARION CO BOARD OF EDUCATION, ("Releasor"), being of lawful age, for and in consideration of the sum of Twelve Thousand Four Hundred Forty Nine 00/100 (\$12,449.00), the receipt and sufficiency of which is hereby acknowledged, does individually and for the undersigned's principals, agents, successors, heirs, personal representatives, executors, administrators, and assigns, knowingly release, acquit and forever discharge William Knopp , ("Releasee"), Progressive Casualty Insurance Company, and Releasee's principals, agents, Successors, heirs, personal representatives, executors, administrators, and assigns, and all other persons and entities of any kind or nature liable or who may be claimed to be liable, of and from any and all actions, causes of action, claims, demands, damages, costs, loss of services, loss of use, expenses, compensation and liabilities of any kind on account of, or in any way growing out of, any and all known and unknown property damage only resulting or to result from the accident that occurred on or about at 12/1/25 at or near 773 E Main St in Marion County, Kentucky.

It is agreed that the undersigned relies wholly upon the undersigned's own judgment, belief and knowledge of the nature, extent and duration of such damages and has not been influenced to any extent whatsoever in making this Release by any representations or statements regarding such damages, or regarding any other matters, made by the person(s), firm(s) or corporation(s) who are now released, or by any person or persons representing such person(s), firm(s) or corporations(s).

It is further agreed that this settlement is the compromise of a doubtful and disputed claim and that the payment made under this settlement is not to be construed as an admission of liability on the part of the Releasee or those released hereunder, by whom liability is expressly denied.

In further consideration of the payment of the aforesaid sum, the undersigned warrants and represents that there are no persons, firms, corporations, insurance companies, governmental agencies or other third parties who have rights against the undersigned, Releasee or the parties released herein based upon subrogation, derivation or assignment originating from the claims of the undersigned, arising out of the accident described above. Further, the undersigned hereby agrees to defend, indemnify and hold harmless all persons or parties released hereunder of and from all loss, damage and expense, including all costs of defense and attorneys fees, as a result of any claim based upon subrogation, derivation, or assignment originating from the claims of the undersigned arising out of the accident described above, including any attorneys fees and costs incurred in the defense of any such claims or in seeking the enforcement of the within Full Release of All Claims with Indemnity agreement.

This Release contains the entire agreement between and among the parties hereto, and the terms of the Release are contractual and not mere recitals. I, the undersigned, have carefully read the foregoing Release and know and understand the contents of the same. I sign this Release voluntarily as my own free act and with full knowledge of its significance, intending to be legally bound by the same.

Signed: _____ Date: _____

Title: _____

Witness

INSURANCE FRAUD WARNING:

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES A STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION, CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME.