

Quarterly Board Meeting

1:30 p.m. Tuesday, October 19, 2010

J. Frank Parks Education Center Selma Unified School District 3036 Thompson Avenue Selma, California

AGENDA

- 1. CALL TO ORDER and ROLL CALL
- 2. APPROVAL of AGENDA
- 3. PUBLIC HEARING SESSION
- 4. CONSENT AGENDA
 - 4.1 Approval of Minutes of the June 08, 2010 Meeting as Mailed
 - 4.2 Approval of Expenditures

4.2.1 Quarter & Year Ending June 30, 2010 - Audited 4.2.2 Quarter Ending September 30, 2010

5. TREASURER'S REPORT

5.1 Financial Report for Year Ending June 30, 2010 – Audited5.2 Financial Report for Quarter Ending September 30, 2010

6. BROKER'S REPORT

- 6.1 Claims Cost Analysis6.2 Re-Accreditation Review6.2 Mise.
- 7. ADMINISTRATOR'S REPORT

8. LOSS CONTROL REPORT

9. ACTION ITEMS

- 9.1 Consider Financial Audit for Year ending June 30, 2010 and 2009
- 9.2 Consider Approval of SETECH Report
- 9.3 Consider Acceptance of Annual Report
- 9.4 Consider Conflict of Interest Code for F.C.S.I.G.
- 9.5 Consider Resolution for Withdrawal from SELF
- 10. BOARD MEMBER REPORT
- 11. CLOSED SESSION
- 12. NEXT MEETING Tuesday January 11, 2011
- 13. ADJOURNMENT

STRATEGIC PLANNING SESSION IMMEDIATELY FOLLOWING BOARD MEETING

CLAIMS COST ANALYSIS



6.1

6.1 Cont

FCSIG CLAIMS COST ANALYSIS

Date:

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10/1/2010

Period: Sept. 2010

		Mon	thly	Year to	Date
		Current	Last Year	Current	Last Year
Number of Claims	Medical Indemnity Total	39 <u>15</u> 54	45 <u>14</u> 59	85 <u>35</u> 120	89 <u>30</u> 119
Estimated Total Amount	Medical Indemnity *L&O Total	38,049 157,912 <u>21,816</u> 217,777	58,500 98,336 <u>10,530</u> 167,366	76,427 486,545 <u>78,542</u> 641,514	113,516 250,588 <u>28,839</u> 392,943
Average per Indemnity Claim	Medical Indemnity *L&O Total	2,537 10,527 <u>1,454</u> 14,518	4,179 7,024 <u>752</u> 11,955	2,184 13,901 <u>2,244</u> 18,329	3,784 8,353 <u>961</u> 13,098
Average Claim		4,033	2,837	5,346	3,302

*L&O Expenses = Legal and other expenses(attorney fees, investigations, etc.)

		School Summary Report			t		
			Yearly				
Code	School Name		7/1/2010 to	09/30/10		7/1/2009	to 09/30/09
		Claims	ADA	ADA/# Clms	Claims	ADA	ADA/# Clms
5819	Alvina Elementary	0	194	-	0	202	0
5806	American Union	0	347	•	1	334	0.002994012
5852	Burrel	0	107	•	0	112	0
5805	Central Unified	27	14,540	0.00185695	29	14,309	0.002026696
	Central Valley Preschool	0	100	-	0	100	0
5813	Clay Elementary	0	227	-	1	227	0.004405286
5850	FCOE	11	4,573	0.00240542	13	4,713	0.002758328
5842	Firebaugh-Las Detlas	4	2,404	0.00166389	3	2,328	0.00128866
5801	Fowler Unified	1	2,246	0.00044524	6	2,229	0.00269179
5846	Golden Plains	8	1,917	0.00417319	5	1,885	0.00265252
5810	Kerman Unified	5	4,399	0.00113662	2	4,266	0.000468823
5802	Kings Canyon	17	10,365	0.00164014	8	10,275	0.000778589
5804	Kingsburg Elem	2	2,309	0.00086618	3		0.00128866
5829	Kingsburg High	2	1,300	0.00153846	1	1,341	0.000745712
5835	Laton Unified	2	746	0.00268097	3	757	0.003963012
5841	Mendota Unified	4	2,580	0.00155039	6	2,533	0.002368733
5823	Monroe Elementary	1	193	0.00518135	0	188	0
5828	Orange Center	1	324	0.00308642	0	339	0
5827	Pacific Union	0	378	-	0	392	0
5824	Parlier Unified	0	3,382	-	6	3,419	0.001754899
5839	Raisin City	1	295	0.00338983	0		0
5849	Riverdale Unified	2	1,628	0.00122850	3	1,657	0.001810501
5803	Sanger Unified	12		0.00109890	15	f	0.001405152
5800	Selma Unified	14		0.00207746	8	·	0.001178203
5851	South County Support	0		-	0		0
5840	Southwest Trans Agcy	2	1,571	0.00127307	4	1,707	0.002343292
	Valley ROP	0	388	-	0	+	0
5811	Washington Colony	2	432	0.00462963	0		0
5812	Washington Union	1	1,178	0.00084890	0	1,2?6	0
5809	West Park	0	921	-	2		0.002547771
5838	Westside Elem	1	251	0.00398406	0		0
	Total	120	77,454		119		·

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Claims by Occupation and Injury

Period: September 2010

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Teachers	10		<u>Slip/Fall</u>	Strike object	<u>Cumulative</u> trauma	<u>Stress</u>	<u>Other</u>
	1.	2	4	3	0	1	- ()
Custodians	+	3	0	0	0	0	1
Aides	12	0	2	2	<u>0</u>	2	6
Food services	9	3	3	0	0	-Ú	3
All other classified	0	0	0	0	0	0	0
Bus drivers	5	0	2	0	0	0	3
Grounds workers	3	1	1	0	0	0	1
All other certificated	3	1	1	0	0	0	1
Maint./craftsmen/mechanics	0	0	Ó	0	0	0	0
Clerical	5	0	1	1	0	1	2
Misc.(nurse.coach,admin.,etc.)	3	1	1	0	1	0	0
Total	54	11	15	6	1	4	17
Year to Date Totals September 2010		1	<u>. </u>				
Teachers	24	3	12	3	0	1	5

Teachers	24	3	12	3	0	1	<u>```</u>
Custodians	18	9	4	1	1	0	3
Aides	18	2	5	2	0	2	7
Food services	12	3	3	2	0	0	4
All other classified	2	1	1	0	0	0	0
Bus drivers	11	2	3	0	0	1	5
Grounds workers	7	2	1	0	0	0	4
All other certificated	11	2	2	2	0	0	5
Maint./craftsmen/mechanics	3	0	0	0	0	0	3
Clerical	8	0	4	1	0	1	2
Misc.(nurse.coach,adminetc.)	6	2	1	2	1	0	0
Total	120	26	36	13	2	5	38

Late Reported Claims Period: Sept. 2010

The claims administrator is required to contact claimants within 14 days from the date the member district/agency becomes aware of a claim. A late reported claim is one that is reported to the claims administrator by the member district/agency at such a time that the administrator is prevented from meeting this requirement. The member may be subject to fines &/or penalties for each late reported claim.

Period	Year to Date
1 of 8	2 of 11
none	2 of 4
none	5 of 5
1 of 1	1 of 1
none	1 of 1
none	1 of 14
nonc	1 of 2
	1 of 8 none none 1 of 1 none none

FRESNO COUNTY SELF INSURED GROUP – TOTAL INCURED OVER \$5000 FOR SEPTEMBER 2010

\$6,536.48

48 yr old bus driver/yard duty person was walking thru the bus yard and slipped on a curb injuring his right foot. EE was referred to Concentra. The diagnosis was a right foot contusion/sprain. ER confirmed EE was working on a Sat and LDW was 9/25/10 and they cannot accommodate the current restrictions. EE is off until his recheck on 10/4/10.

\$5,916.08

59 yr old cook with no history of any prior claims. On 9/16/10 EE was walking out of the dish room and slipped in water on the floor. She fell and twisted her left ankle and landed on her left knee. EE was initially seen at Concentra 9/16/10 and diagnosed with a left knee contusion/strain and left ankle/foot sprain. It was also noted EE has marked varicose veins in both legs. EE placed on modified duty of no lifting over 10 pounds, sitting 100% of the time with no climbing stairs or ladders, kneeling or squatting. EE is to use a walker at work. The ER cannot accommodate the work restrictions. EE is to recheck on 9/27/10.

\$22,532.00

57 year old Teacher was exiting the Library after a meeting with other teachers when she didn't see the step and fell. This resulted in a fracture of her left wrist. Dr. Schuman performed the initial exam on 9/7/10, diagnosis fracture of the left wrist involving distal ulna and radius consistent with a colles fracture. EE was referred to orthopedist, Dr. Toby Johnson. EE was evaluated on 9/8/10 and the doctor indicated surgery was needed. EE was scheduled for surgery on 9/16/10.

\$14,040.00

50 year old paracducator completed a DWC-J alleging mental stress. EE claims to be assigned to a teacher who is constantly belittling her and is vindictive and puts her in a high stress environment Based on limited information, the ER requested we delay and investigate. The claim will be referred to Phil Dalton for statements. EE was initially seen at Jobcare 9/9/10 and diagnosed with stress. EE is to be referred for a psychiatry evaluation. EE was advised not to work with the teacher she has the conflict with. Recheck is set for 9/23/10.

\$6,900.00

49 yr old Human Resources Assistant has been experiencing issues with the Sub Finder system and has been receiving numerous complaints from Subs and Employees who have been trying to use the system. EE has claimed stress and chest pains. EE was seen at St. Agnes and was cleared to perform all job functions associated with regular job duties as of 09/18/10. EE claims stressed due to computer system not working correctly. The diagnosis was not given. Recommends cardiac evaluation non-work related. We were going to investigate the claim. However it appears from conversations with the doctor, that he may consider her problem as not work related. We are currently waiting on the report to determine if the claim needs to be investigated or if we can deny the claim.

\$9,227.98

45 yr old bus driver pulled on the bus brake and strained her right elbow. EE was initially seen at Jobcare 9/7/10 and diagnosed with lateral epicondylitis. EE was placed on modified duty of no use of right upper extremity; No repetitive grasping or pulling with right hand. The employer cannot accommodate the work restrictions. The doctor has indicated that an orthopedic evaluation maybe needed. EE is currently of work until recheck on 09/28/10.

\$9,594.16

30 year old Cook held a drinking cart from falling over edge of cement and strained low back/hip area. We have not received medical reports from the doctor. However per a phone call with Job Care Reedley, EE seen on 9/23/10 for a back strain. EE was released to modified duty which the employer cannot accommodate.

\$17,115.12

63 year old secretary completed a DWC-1 alleging work stress. At this time, it appears she is claim stress due to being advised that she was being re-located to another building. Based on limited information, ER requested we delay and investigate. 90 day decision date is 11/27/10. File will be referred to Phil Dalton for statements.

\$24,422.48

27 year old first grade teacher was using the copier when she bumped her laptop while reaching over it to grab papers. The lap top fell onto her left middle toe. EE actually to Concentra the next day and was diagnosed with a open wound of left middle toe. A podiatrist referral was made and EE was taken off work. EE was placed on modified duties on 09/27/10 which the ER has confirmed they could not accommodate. Recheck is set for 10/5/10.

\$7,000.00

46 year old Teacher is alleging daily mental stress due to work. All members of the Board approved the action for the Intent to Dismiss [EE] dated 6/8/10 which was sent to EE with proof of service on 6/9/10. Since this was not a firm termination, EE returned to work when school resumed on 8/16/10 but then was taken off work by Sanger Walk-in on 9/2/10. The work status from Sanger Walk-in Clinic dated 9/2/10 took her off work thru 11/2/10. Per Joseph at Sanger Walk-in, EE was seen on 2/28/10 and was diagnosed with depression/stress/anxiety. EE was then seen 9/2/10 and taken off work. EE was never taken off work until 9/2/10. EE is to recheck on 10/5/10. Claim will be delayed pending additional investigation.

\$13,439.20

54 yr old groundskeeper was walking across the school ground with a blower on his back when he strained his left knee. EE reported the injury immediately and was referred to Jobcare the same day. ER confirmed LDW was 9/15/10 and they cannot accommodate his work restrictions at this time. EE is diagnosed with left knee internal derangement. EE has been referred to an orthopedist. The evaluation is set for 10/05/10. He is to recheck with his PTP on 10/11/10. He will be off work at least until his recheck with his PTP.

\$17,115.12

65 yr old food service assistant was walking to see her manager when she caught her foot on the wheel of a cart and fell. She fell on the back of her head, shoulder and hip and used her right hand/wrist to break her fall causing a wrist fracture. ER confirmed there was a witness. EE was initially seen at Urgent Care 9/17 and diagnosed with a right wrist fracture. EE was referred to Dr. Mochizuki who saw EE 9/23/10 and confirmed the need for surgical repair of the fracture. EE had surgery 9/24/10. Dr. Mochizuki indicates TD 4 wks post op.

NOTE: Complete both sides of this page for ALL State of California Department of Industrial Relations Self Insurance Plans	annual reports		
2265 Watt Avenue, Suite 1			
Sacramento, CA 95825 Web site=http://sip.dir.ca.gov		III IIATKANAA BAZZ	ፖሬ ትሳቆንደቶ ይኖሩላት ለ የተናንፈል። ለስላዲታንን የግንቶዎንን ደርሃን መሆን
E-mail: siptādir.ca.gov			
PUBLIC SELF INSURER'S A	NNUAL RE	PORT	
L G	ENERAL-To b	completed by the employ	er
1. CERTIFICATE NUMBER:		2. PERIOD OF REPORT	
A-5546-09-195		Full Year	Interim/Amended Report for the Period of
Active Revoked		F	07/01/09 07/01/10 rom Date (mm/dd/yy) To Date (mm/dd/yy)
3. NAME OF MASTER CERTIFICATE	HOLDER		
NAME Fresno County Sel	f Insurance G	roup	FEDERAL TAX ID. NUMBER
ADDRESS 2133 High St, St	еE		94-6002210
CITY Selma		STATE CA	
ZIP -4 93662			
4. TYPE OF PUBLIC AGENCY:	- POLICE/FII		
	HOSPITAL	OTHER	
5. During the period of this report, has t	hore been survey	the following with range to t	
affiliate, JPA's or its member agencies?	nere occurany or	the tonowing with respect to t	ne master cerrificate norder, substitutity,
A merger or unification? Changes in name or identif Any addition to Self Insura If yes, explain:	•	Yes X No Yes X No Yes X No	
 TOTAL EMPLOYMENT A INSURER: (a) NUMBER OF EMPLOYEES (Number of individual employe (b) TOTAL WAGES AND SALAR (As reported on EDD Form DE 	8,639 es listed on for I HES PAID S 39	 6 for year ending June 30, 1 7,637,547 	AR 2009-2010 FOR THIS SELF 2016)
7. TO WHOM DO YOU WANT CORRE	SPONDENCE A	DDRESSED?	
	AME William		AST Tucker
COMPANY NAME: Tucker-Alexa		e	
ADDRESS: c/o 2133 High Street	, Ste E		
CITY: Selma	STATE:	CA ZIP+4: 93662-30	064
PHONE: (559) 896-8880	FAX: (559) 896-3064	
E-MAIL ADDRESS: billt@ocsnet.	net		
 CERTIFICATION BY AGENCY OFFI I declare under the penalty of perjury th lieve at is true, correct and complete. 		ed this Self Insurer's Annual I	Report and to the best of my knowledge and be-
SIGNATURE (Original Only):		DATE	D and the a stree street street and the second street street and the second street street street street street s
TYPED NAME: Eric Cederquist			Fiscal Year
AGENCY NAME: Fresho County S	Self-Insuranc	Group	ΛΛ/1Λ
STREET ADDRESS: Co 2133 High		•	
CITY: Selma	STATE		
PHONE: (559) 896-8880	EAX: (5)	59) 896-3846	

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ANNUAL REPORT IS DUE OCTOBER 1, 2010

5. (Continued)

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9. List the full legal names of each separate affiliate member whose liabilities are being reported under this annual report, the certificate number of each such member.

Full Logal Name	Affiliate Centricate No.
Fowler Unified School District	5546-001
Kings Canyon Joint Unified School District	5546-002
Sanger Unified School District	5546-003
Selma Unified School District	5546-004
Kingsburg Joint Union School District	5546-005
Central Unified School District	5546-006
American Union Elementary School District	5546-007
Parlier Unified School District	5546-013
Kerman Unified School School District	5546-014
Washington Union High School District	5546-015
Washington Colony Elementary School District	5546-016
Orange Center Elementary School District	5546-017
Monroe Elementary School District	5546-018
Clay Joint Elementary School District	5546-019
West Park Elementary School District	5546-020
Westsude Elementary School District	5546-023
Alvina Elementary School District	5546-024
Raisin City Elementary School District	5546-027
Southwest Transportation Agency	5546-028
Mendota Unified School District	5546-029
Firebaugh-Las Deltas Joint Unified School District	5546-030
Pacific Union Elementary School District	5546-031
Kingsburg Joint Union High School District	5546-033
Laton Joint Unified School District	5546-035
Fresno County Office of Education	5546-036
Riverdale Joint Unified School District	5546-037

NOTE 1: Add additional page(s) to list additional members, is necessary.

NOTE 2: If more than one claims administrator is used, then habilities must be reported separately for each claims adjusting location using a Liabilities by Reporting Location page.



Full Legal Name	Affiliate Certificate Number		
Golden Plains Unified School District	5546-038		
South County Support Services Agency	5546-039		
Caruthers Unified School District	5546-040		
Central Valley Preschool	5546-041		
Burrel Union Elementary School District	5546-042		
Valley Regional Occupational Program	5546-043		

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H. LIABILITIES BY REPORTING LOCATION

Reporting Location Nosc. A-5546-09-195

Name of Master Certificate Holder: Fresho County Self Insurance Group

Type of Report:

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Original Report (Due October 1 each year)

Amended Report for the Period of

Interim Report

07/01/09 06/30/10 From Data ciert dd yv) To Date (num dd yy)

		Incurred Liability		Paid to I	Date	Funice Lia	Furnie Liability	
	Nemba	\$ ardementy	\$ Medical	\$ Indemnity	S Medical	S Indemnity	\$ Medical	
1.0 avei open av of 6.30 2018 exported price to FV-2005-06	87	3,002,953	5,995,442	2,513,079	2,775,929	489,874	3,219,513	
2. Open & Clu	sed Cases:							
aden 1946-en Torsticiskos Ruportod	606	1,268,460	2,217,493	1,124 973	1,732,193	143,487	485,30	
1 \ 2105-16 Саяс-мрев	30	491,405	1,230,897	347,918	745,597			
ich Y 2005-01 Urd Cases Reperted	575	1,007,830	1,762,979	929,535	1.414.271			
FY 2006-07 Cases Open	24	444,338	934,214	366,043	585.506	78,295	348.70	
- A Y (skiffica); iutal Cases	560	1,230,785	2,351,374	1,026,347	1,576,029			
FY 1877-08 E State Open	54	820,878	1,660,665	616,440	85,320	204,438	775.34	
4, 1 Y 21855-094 . stil C255	547	1,234,019	2,672,092	907,096	1,580,164			
FY 2004-09	83	994,592	2,115,947	667,669	1,024,019	326,923	1,091,92	
Casus Open e.E.Y. 20094-14								
ional Cases <u>Reported</u> FY 2009-14	541	537,830	1,879,651	224,498	652,627	313,332	1,227,02	
Cases Open	206	471,817	1,628,213	158,485	401.189			
						Sinderonaty	\$ Medicai	
					SUBTOTAL	1,556,349	7,147,81	
1.1.6.6.1.1		UTURE LIABILIT	V (Indumnity phu	Madiant	TOTAL	8,704,167		
5. 65115	1.417.17 1	CIGKE LEVELLI	v (meennny pro-	sicultury	IOTAL _	S Indomnity	5 Medical	
		1.1. June 121 2000				1,138,068	2,218,00	
	•	aid during FY 2009 MCAL-ONLY cases	•			343		
6 Numb	er of IND		198					
6. Number of INDEMNITY cases reported in FY 2009-10:								
7. TOTAL of 5 and 6 (also entered in 2e above):								
9, Numba	9. Number of Fatality cases reported in FY 2009-10							
10. (a) Number of FY 2009-10 claims for which the employer or administrator was notified of representation by an attorney or legal representative in FY 2009-10; 17								
10. (b) Ni	unber of	non-FY 2009-10 cla	ims for which the (employer or admin	istrator was	13		



A. NAME OF ADMINISTRATOR(S): ADMINISTR:	ATING AGENO	TY(IES) SUBMI	ITTING THIS	REPORT.	
1. Name (Person) Sharon Castillo	1	Administrative A	gency*s		
Agency Name Tristar Risk Managemen	(Certificate No.:	195		
Address P.O. Box 7937			c	or 🗌 Self Adn	ninistered
City Fresno	State CA	Zip+4 9374	7-7937		
B. HAS THERE BEEN A CHANGE IN ADMIN THIS REPORT PERIOD? VES X IF YES: DATE OF CHANGE:	ISTRATOR/A NO	DMINISTRAT	FIVE AGEN O	TY DURING TH	E PERIOD OF
TYPE OF CHANGE: Char	ige in Admini	strative Agene	cy.		
Char	nge to or from	Self Administ	tration		
NAME OF NEW ADMINISTRATOR	(S)/ADMINIS	FRATIVE AG	ENCY(IES):		
Name					
Agency Name					
Address					
City		State	Zip+4		

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CERTIFICATION

I declare under penalty of perjury that I have prepared or caused this report to be prepared and I have examined this liabilities report of this self insurer's workers' compensation liabilities. To the best of my anowledge and belief this report is true, correct and complete with respect to the workers' compensation liabilities incurred and paid. I further declare under the penalty of perjury that the estimates of future liability of workers' compensation claims made in this report reflect the administrator's best judgment astothe future liability of claims, using prevailing industry standards, and the signatory intends Self Insurance Plans to rely upon the representation.

Ori o TT	ginal Signature of Administrator (Qualified Person) PED NAME OF ADMINISTRATOR		1) e: 07/06/10
Adı	ministrator's First Name: Sharon	M.I.: L	Last Name: Castillo
Tit	e: Branch Manager		
Nai	ne of Administrative Agency or Employer: Tristar Ri	isk Maragemei	nt
Str	cet Address: 4969 E. McKinley Ave., Ste. 204		
Cit	y: Fresno	State: CA	Zip÷4: 93727-1968
Pho	me No. of Administrator: (559) 432-1260	Fax Not. (559)	432-8587
E-n	nail Address of Administrator: sharon.castillo@tris	itargroup.net	



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2010 Multi-County Agency Biennial Notice

Name of Agency: Fresno County Self Insura	nce Group					
Mailing Address: c/o 2133 High St., Ste E; Selma, CA 93662						
Contact Person: Donna Murry Office Phone No: 559 819-1024						
E-mail:_donnam@ocsnet.net	Fax No: (559) 896-3846					
Accurate disclosure is essential to monitor whether officials have conflicts of interest and to help ensure public trust in government. This agency has reviewed its conflict-of-interest code and has determined that (check one box):						
An amendment is required. (Check all that apply.)						
Substantive	Non-Substantive					
O Include new positions (including	O Revise the titles of existing positions					
 consultants) that must be designated O Delete Positions that manage public investments from the list of designated 	 Modification of any provision of a code, provided no disclosure or disqualification obligations are disturbed 					
positions O Revise disclosure categories	O Delete titles of positions that have been abolished					
O Other (describe)	O Otear (describe)					
Code is currently under review by the code-reviewing body.						

No amendments necessary.

Verification

The agency's code accurately designates all positions that make or participate in the making of governmental decisions; the disclosure assigned to those positions accurately requires the disclosure of all investments, business positions, interests in real property, and sources of income that may foreseeably be affected materially by the decisions made by those holding designated positions. The code includes all other provisions required by Government Code section 87302.

Signature of Chief Executive Officer

7/20/10

All agencies must complete and return this notice, including agencies whose codes are currently under review. Please return this notice no later than October 1, 2010, to:

Fair Political Practices Commission 428 J Street, Suite 620 Sacramento, CA 95814 (866) ASK-FPPC Fax (916) 322-3711

CONFLICT OF INTEREST CODE FOR THE

FRESNO COUNTY SELF-INSURANCE GROUP

The Political Reform Act (Government Code Section 81000, et seq.) requires state and local government agencies to adopt and promulgate conflict of interest codes. The Fair Political Practices Commission has adopted a regulation (2 Cal. Code of Regs. Sec. 18730) which contains the terms of a standard conflict of interest code, which can be incorporated by reference in an agency's code. After public notice and hearing it may be amended by the Fair Political Practices Commission to conform to amendments in the Political Reform Act. Therefore, the terms of 2 California Code of Regulations Section 18730 and any amendments to it duly adopted by the Fair Political Practices Commission are hereby incorporated by reference. This regulation and the attached Appendix designating officials and employees and establishing disclosure categories, shall constitute the conjlict of interest code of the FRESNO COUNTY SELF-INSURANCE GROUP.

Designated employees shall file their statements with the FRESNO COUNTY SELF-INSURANCE GROUP who will make the statements available for public inspection and reproduction. (Gov. Code Section 81008). Statements for all designated employees will be retained by the FRESNO COUNTY SELF-INSURANCE GROUP.

FRESNO COUNTY SELF-INSURANCE GROUP

DESIGNATED EMPLOYEES:

Members of the Board	1-4
Alternates	1-4
General Manager	1-4
Consultants*	1 - 4

DISCLOSURE CATEGORIES:

<u>Category 1</u>. Persons in this category shall disclose all investments and business positions in business entities and sources of income of the type that has contracted with the agency to provide services, supplies, materials or equipment.

<u>Category 2.</u> Persons in this category shall disclose all investments and business positions in business entities and sources of income that are of the type in which the agency is empowered to invest its funds.

<u>Category 3.</u> Persons in this category shall disclose all investments and business positions in business entities and sources of income that are insurance companies, carriers, holding companies, underwriters, agents, solicitors or brokers.

<u>Category 4.</u> Persons in this category shall disclose all investments and business positions in business entities and sources of income which they know or have reason to know that they have filed claims against the agency.

*The general manager may determine in writing that a particular consultant, although a "designated position," is hired to perform a range of duties that is limited in scope and thus is not required to fully comply with the disclosure requirements described in this section. Such written determination shall include a description of the consultant's duties and, based upon that description, a statement of the extent of disclosure requirements. The written determination is a public record and shall be retained for public inspection in the same manner and location as this conflict of interest code. This is the last page of the conflict of interest code for Fresno County Self-Insurance Group.



5

CERTIFICATION OF. FPPC APPROVAL

Pursuant to Government Code Section 37303, the conflict of interest code for the Fresno County Self-Insurance Group was approved on March 27, 1995. The code will be effective on April 26, 1995.

chinel Steven G. Churchwell

General Counsel Fair Political Practices Commission

FRESNO COUNTY SELF INSURANCE GROUP BOARD OF DIRECTORS

RESOLUTION # JPA F10-3

Withdrawal from School Excess Liability Fund (SELF)

WHEREAS, the Fresno County Self Insurance Group is currently a member of the Schools Excess Liability Fund ("SELF"). a joint powers authority: and

WHEREAS, pursuant to the joint powers agreement ("Agreement") between and among SELF and its members, a party to the Agreement may withdraw from the Agreement by taking appropriate action; and

WHEREAS, the Fresno County Self Insurance Group has been a member of SELF for a minimum of three (3) fiscal years; and

WHEREAS, pursuant to the Agreement, in order to withdraw from SELF at the end of a fiscal year a party to the Agreement must send to the SELF Board of Directors notice of intent to withdraw prior to December 31, 2010.

NOW, THEREFORE, BE IT RESOLVED as follows:

- 1. All of the recitals set forth above are true and correct and this Board of Directors so finds and determines.
- 2. This Board of Directors hereby declares its intent to withdraw from SELF effective June 30, 2011.
- 3. Notice of this intent to withdraw shall be delivered to SELF on or before December 31, 2010.

PASSED AND ADOPTED by the Board of Directors of the Fresno County Self Insurance Group on this 19th day of October, 2010 by the following vote:

AYES:	
NOES:	
ABSTAIN:	
ABSENT:	

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Eric Cederquist Fresno County Self Insurance Group, President