

VIS® Renewal Application and Invoice for Insurance & Purchasing Group Membership

Christopher Perepiczka
Collin County Justice Center Detention

Date: March 28, 2023
CLIENT CODE: TXMCKI3

4300 Community Avenue
Mckinney, TX 75070

The CIMA Companies, Inc. Federal ID # 52-0819983

County: Collin

Volunteer Insurance Renewal for the Policy Term 7/1/2023 - 7/1/2024

Description	# Volunteers	Premium Rate	Premium Amount	TX Surplus Lines Tax	TX Stamping Fee	TX Surcharge	TX Assessment	Total
W/R Accident	64	\$90.55	\$5,795.20	\$0.00	\$0.00	\$0.00	\$0.00	\$5,795.20
Total Premium:								\$5,795.20
Prior Account Balance:								\$0.00
Total Amount Due:								\$5,795.20

Please Note - \$100.00 Minimum premium due on both Liability and Accident policies.

Due upon receipt or prior to your expiration date of July 1, 2023. Please note your Client Code on your payment.

Do you perform any overseas business activities? Yes No
If yes, do your overseas business activities breach any U.S.A. Sanctions/Regulations? Yes No

Volunteer Insurance Contact Name/Email Address: _____

Please Note Any Change of Address Below:

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

By paying the "Total Amount Due" shown above, the applicant agrees: 1) to become a Member of Volunteers Insurance Service Association, Inc. Risk Purchasing Group (VIS); 2) to participate in a program of insurance designed specifically for the Members of VIS; 3) to accept, abide by, and be bound by the "Volunteer Insurance Terms and Conditions" and "RPG Membership Agreement" as posted on http://www.cimaworld.com/files/volunteer_insurance_terms_conditions.pdf and http://www.cimaworld.com/files/rpg_membership_agreement.pdf; 4) to pay all premiums including required State surplus lines taxes, assessments, stamps, and other State mandated charges; 5) to pay the VIS Membership Fee; and 6) that this application is the basis for the policy(ies) and its application for Membership in VIS.

The "Terms & Conditions of Coverage" and the "Membership Agreement – Terms & Conditions of Membership" are posted at http://www.cimaworld.com/files/volunteer_insurance_terms_conditions.pdf and http://www.cimaworld.com/files/rpg_membership_agreement.pdf. These documents provide important information on your rights as a Member, important aspects of coverage, and on VIS's Administrator and Managing General Underwriter as well as various compensation disclosures.

Disclosure Pursuant to Federal Law Regarding Purchasing Groups [U.S.C. 15 3901, et seq.]: Volunteers Insurance Service Association, Inc. (VIS) is a "Purchasing Group", as defined under Federal Law, formed to purchase liability insurance on a group basis for its members to cover the similar or related exposures to which the members of VIS are exposed by virtue of their related, similar or common business or service.

Notice to California Customers: License #0B01377, #0G99581 and #0I84209, CIMA Companies Insurance Services. License #0G98538 and #0G99581, XS Insurance Services.

Notice to Rhode Island Customers: This insurance contract has been placed with an insurer not licensed to do business in the state of Rhode Island but approved as a surplus lines insurer. The insurer is not a member of the Rhode Island insurers insolvency fund. Should the insurer become insolvent, the protection and benefits of the Rhode Island insurers insolvency fund are not available.

Notice to Texas Customers: The insurer for the purchasing group may not be subject to all the insurance laws and regulations of your state. The Insurance insolvency guaranty fund may not be available to the purchasing group.

Notice to Wyoming Customers: The insurer with which the surplus lines broker places the insurance is not licensed by this state and is not subject to its supervision. In the event of the insolvency of the surplus lines insurer, losses will not be paid by the state insurance guaranty association.

Notice to all Customers: For a specific list of officers by corporation or license information, please send your request to corporatesecretary@cimaworld.com. You may also directly access license information via your State Insurance Department's website. The CIMA Companies, Inc. also operates as: The CIMA Insurance Agency (in Hawaii, Montana, Ohio, and Utah).

Please make all checks payable to CIMA.

**Managing General Underwriter:
The CIMA Companies, Inc.**

2750 Killarney Drive, Suite 202, Woodbridge VA 22192-4124 Phone: 800.222.8920 Fax: 703.739.0761

Insurance Renewal - 2023
Court Referred Alternative Sentencing Program
Work Release Program

Thank you for the valuable service your organization and your Volunteers provide to your communities. On behalf of all of us at Volunteers Insurance Service (VIS), thank you for your continued participation in our program. For the 2022 renewal, we are pleased to announce there are no rate increases.

Your volunteers insurance renews on July 1, 2023. Enclosed please find your renewal invoice.

- **To keep the same coverage** – Please remit payment no later than **July 1, 2023** to maintain continuous coverage.
- **To add or change coverage type** – Email, fax, or call us with your requested coverage change and your CLIENT CODE. We will then email a revised invoice.
- **To change the number of volunteers covered** – Email, fax, or call us with your revised volunteer counts and your CLIENT CODE. We will then email a revised invoice.
- **To change contact information** – Please review the invoice and make changes, as necessary. Email or fax us with any updated contact information. Documents will be emailed to the contact on file.
- **Payment Options:**
 1. Electronic / VCheck – Most efficient option. Simply write a check (include your CLIENT CODE on the check) and email or fax a copy (do NOT mail) directly to our accounting team using the enclosed Payment Options form.
 2. Credit Card / PayPal – Payment is processed the same day and you receive an electronic receipt directly to the email you enter when making the payment. You can check out as a Guest, so you do not need to set up a PayPal account. Instructions are on the enclosed Payment Options form.
 3. Mail – Mail your check, along with a copy of your invoice to the address at the bottom of this page. Your CLIENT CODE must be on the check.

So that we may best assist you, and to avoid delays in processing, please include your CLIENT CODE on all forms of payment and communication.

We greatly appreciate your participation in our unique program and always are happy to hear from you.

Thank you,

Your Service Team:

Jennifer Yarnell, Account Executive, jyarnell@cimaworld.com, California License #4266609. Toll free: 800.222.8920 or 800.468.4200, Ext. 7306. Direct dial: 703.778.7306

Victoria Brooks, Account Executive, vbrooks@cimaworld.com, Toll free: 800.222.8920 or 800.468.4200, Ext. 7301. Direct dial: 703.778.7301

HEADQUARTERS AND MAILING ADDRESS FOR ALL OFFICES:

CIMA
2750 Killarney Drive, Suite 202
Woodbridge, VA 22192-4124
Phone: 703.739.9300; 800.222.8920; Fax: 703.739.0761
volunteers@cimaworld.com www.cimaworld.com

Candace Shannon

From: Jennifer Yarnell <jyarnell@cimaworld.com>
Sent: Tuesday, March 28, 2023 1:45 PM
To: Christopher Perepiczka
Subject: Volunteer Insurance Renewal - TIME SENSITIVE - TXMCKI3
Attachments: Invoice TXMCKI3.pdf; CRASVP_WR Renewal Memo.pdf; Payment Options.pdf

***** **WARNING:** External Email. Do not click links or open attachments that are unsafe. *****

Thank you for your continued participation in the volunteer insurance program. We appreciate your business and hope you are staying safe and healthy during these challenging times.

Attached please find your renewal information:

1. INVOICE
2. PAYMENT OPTIONS - To avoid processing delays and promote a contactless transaction, we strongly recommend utilizing one of the electronic payment options. Your CLIENT CODE (located in the upper right corner of your invoice) MUST be included on all forms of payment.
3. RENEWAL NOTICE - Contains detailed information regarding the renewal process.

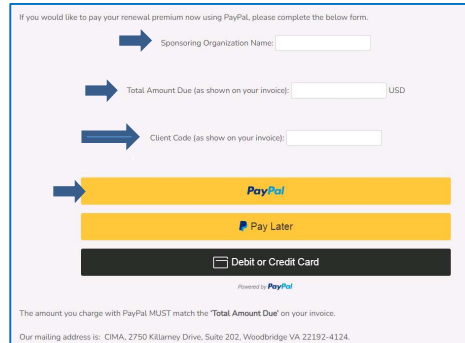
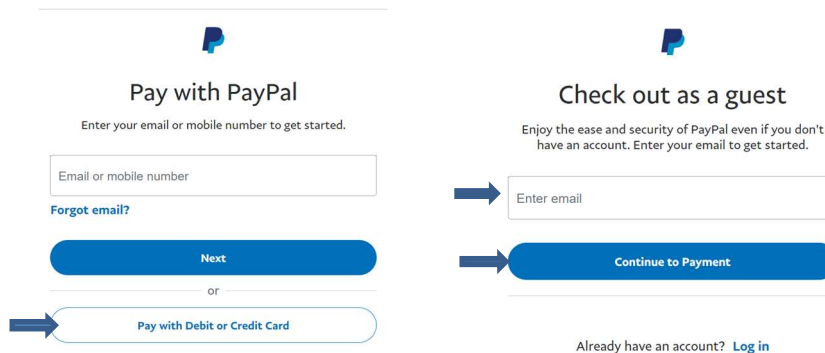
As we all continue to develop new ways to work through this changing environment, please let us know if you have any questions or suggestions to make the renewal process more efficient.

Kind Regards,
Your Service Team
Jennifer Yarnell, California License #4266609
Victoria Brooks
The CIMA Companies, Inc.
California License #0B01377
2750 Killarney Drive, Suite 202
Woodbridge, VA 22192
800.468.4200

Instructions for Credit Card Payments via PayPal

Link: <https://www.cimaworld.com/vis-members/>

- You will need your invoice and your **Client Code** (located on the upper right portion of your invoice).
- You do NOT need a PayPal account as you will check out as a GUEST.
- PayPal is no longer supported on Internet Explorer (05/2022).

1. Enter your info, then select **“PayPal”** > you should see a pop up window (it may be minimized on your screen) > Do **NOT** enter your email here, instead select **“Pay with Debit or Credit Card”** > that should take you to the **Guest** check out where you can enter your email then **“Continue to Payment”** information.
2. If the payment is processed, you should receive an email receipt directly from PayPal sent to the email address you entered when making your payment.
3. To contact PayPal directly: 888.221.1161.

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 Phone: 703.739.9300; 800.468.4200; Fax: 703.739.0761
volunteers@cimaworld.com www.cimaworld.com

ELECTRONIC CHECK PAYMENT

You can pay by Fax or **Email**. It's **Fast** and it's **Easy!**

For your convenience and to avoid unnecessary delay or expenses, you can simply Email/Fax us your payment check.

Here's how:

1. Write your payment check in the regular way. Be sure to sign and date your check and include your Client Code to ensure proper posting. Please make your check payable to **The CIMA Companies, Inc.**
2. Attach your check to this form and make a clear photocopy.
3. Then Email (preferred) to May at msanchez@cimaworld.com or Fax it to her at 410.782.2679.

That's all you have to do; your payment is made! Nothing could be faster or easier.

You keep your original check for your records. We will input the information from your faxed/emailed check to create a duplicate draft for deposit. The deposited draft will have the same check number and amount as the one you provided; you'll even receive the deposited draft from the bank along with all your other cancelled checks, just like always.

Your faxed/emailed check serves two purposes: 1) It provides information to assure that the pre-authorized draft is correct; and 2) It provides written authorization to create the draft for deposit by us.

ATTACH CHECK COPY HERE

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