

# AGENDA PACKET



# Monday, April 22, 2024 at 5:00 pm

Gloucester County Library 389 Wolfert Station Rd, Mullica Hill, NJ

WWW.TRICOJIF.ORG

# GLOUCESTER, SALEM, CUMBERLAND COUNTIES MUNICIPAL JOINT INSURANCE FUND (TRICOJIF)

# April 22, 2024 – 5:00 PM Gloucester County Library, Mullica Hill

# AGENDA

- I. Meeting called to order by Chairman
- II. Flag Salute
- III. Statement of Compliance with Open Public Meetings Act
  - A. Notice of this meeting was given by:
    - 1. Sending sufficient notice herewith to the *South Jersey News*, Mullica Hill, New Jersey and the *Courier Post*, Cherry Hill, NJ
    - 2. Filing advance written notice of this meeting with the Clerks/ Administrators of all member municipalities of the TRICO JIF; and
    - 3. Posting notice on the public bulletin boards of all member municipalities of the TRICOJIF.

# IV. Roll Call

- A. Fund Commissioners
- B. Fund Professionals
- C. Risk Management Consultants

V.	Move up Alternates ( <i>if necessary</i> ) Motion to move up	, and
	in the absence of,	and
	to the Executive Committee for voting purposes –	Motion – All in Favor

# VII. Approval of Minutes

- B. Motion to adopt the March 25 2024 Executive Claims Committee Meeting Closed Session Minutes – Motion – All in Favor

The Closed Session Minutes shall not be released to the public until the reason(s) for their remaining closed is no longer applicable and the Fund Solicitor has an opportunity to review them.

VIII.	Executive Claims Committee Meeting Report – April 22, 2024Verbal		
IX.	Exec	cutive Director's Report	
	A.	Lost Time Accident Frequency	Pages 22-23
	B. Certificates of Insurance		Pages 24-29
	C. Financial Fast Track Report		Pages 30-31
	D. Regulatory Filing Checklists		Pages 32-33
	E. 2023 Safety Incentive Program AwardsPage		Page 34
	F. 2024 Optional Safety Budget Page		Page 35
	G. 2024 Wellness Incentive		Page 36
	H. 2024 EPL/Cyber Risk Management Budget Pag		Page 37
	I. EPL Compliance Status Report Pag		Page 38
	J. Statutory Bond Status		Pages 39-41
	K.	•	
	L.		
	M.		
	N. Elected Officials TrainingPages 5		Pages 50-51
	O. Safety, Claims and Wellness Coordinator Roundtable		

	P. New Fund Commissioner Orientation	
	Q. Financial Disclosure Statement	
	R. Special Law Enforcement Officer Training	
	S. 1 <sup>st</sup> Qtr. Attendance	.Page 52
	T. Website	-
	U. New Member Activity	
X.	Solicitor's Report	
	A. MEL Helpline and Contact List	. Page 53-54
	B. Closed Cases Report	
	C. Resolution 2024 Adopting the Revised Litigation Management Guidelines -	Motion –
	Roll Call	Pages 56-97
XI.	Safety Director's Report	
	A. Activity Report	. Pages 98-100
XII.	Claims Administrator's Report	
	A. Lessons Learned from Losses	. Page 101
XIII.	Law Enforcement Risk Management Report	
	A. Report	. Pages 102-103
XIV.	Wellness Director Report	
	A. Monthly Activity Report	. Pages 104-105
	B. Targeting Wellness Newsletter	Pages 106-109
XV.	Managed Care Report	
	A. TRICOJIF Summary	. Page 110
	B. Average Days to Report	•
	C. Claims Reported by Type	-
	D. Nurse Case Management Reports	
	E. Transitional Duty Report	U
	F. PPO Savings and Penetration Report	-
	G. Top 10 Providers & Paid Provider by Specialty	
	H. Quick Notes	-
XVI.	Technology Risk Services	
	A. Reports	. Pages 119-120
XVII.	Treasurer's Report as of March 31, 2024	Pages 121- 168
	A. Investment Report	
	B. Investment JCMI	
	C. Loss Run Payment Registers	
	D. Fund Status	
	E. Disbursements	
	F. April Bill List	. Pages 169-170
	Motion to approve the Payment Register & Bill List- Motion - Roll Call	C

XVIII. Committee Reports Nothing

# XIX. MEL/RCF/EJIF Reports

A.	MEL Report – March 22, 2024	Pages 171-172
	RCF Report – March 22, 2024	-
	EJIF Report – March 22, 2024.	
	Cyber JIF Report – March 21, 2024	-

# XX. Miscellaneous Business

- A. Resolution 2024 \_\_\_\_\_ Authorizing the Release of Fund Year 2021 Closed Session Executive Committee Meeting Minutes as Recommended by the Fund Solicitor Motion Roll Call.
   D. Latie 2024 for the Delever of Fund Year 2022 Closed Session Executive Pages 176-177
- C. Resolution 2024 -\_\_\_\_\_ Authorizing the Release of Fund Year 2023 Closed Session Executive Committee Meeting Minutes as Recommended by the Fund Solicitor –**Motion – Roll** Call......Pages 180-181
- Motion to Authorize the Fund Solicitor & Executive Director to Prepare, Advertise, and Receive Requests for Qualifications for the Position of Workers Compensation Defense Attorneys and Liability Defense Attorneys – Motion – All in Favor
- E. Motion to Authorize the Executive Director to Prepare, Advertise, and Receive Requests for Qualifications for the Position of Safety Director, RTK Coordinator, Fund Treasurer, & Payroll Auditor – Motion – All in Favor
- F. Motion to Authorize the Fund Solicitor to Prepare, Advertise, and Receive Requests for Qualifications for the Position of Fund Administrator **Motion All in Favor**

# The next meeting of the TRICO JIF will be held on Monday, May 20, 2024 at 5:00 PM via Microsoft Teams

### XXI. Public Comment

- A. Motion to Open Meeting to Public Comment Motion All in Favor
- B. Motion to Close Meeting to Public Comment **Motion All in Favor**
- XXII. **Closed Session** (*if necessary*) Resolution 2024- \_\_\_\_\_ A request shall be made to go into Closed Session to discuss matters affecting the protection of safety and property of the public and to discuss pending or anticipated litigation and/or contract negotiations -**Motion Roll Call** 
  - A. Professionals' Reports
    - 1. Claims Administrator's Report
    - 2. Executive Director's Report
    - 3. Safety Director's Report
    - 4. Solicitor's Report
  - B. Reopen Public Portion of Meeting (*if necessary*) Motion All in Favor
- XXIIII. Approval of Claims Payments Motion Roll Call
- XXIV. Authorization to Abandon Subrogation (if necessary) Motion Roll Call
- XXV. Motion to Adjourn Meeting Motion All in Favor

# GLOUCESTER, SALEM, CUMBERLAND COUNTIES MUNICIPAL JOINT INSURANCE FUND

# March 25, 2024 – 3:30 PM

# Microsoft Teams EXECUTIVE CLAIMS MEETING MINUTES

The Executive Claims Committee Meeting of the Gloucester, Salem, and Cumberland Counties Municipal Joint Insurance Fund (TRICO JIF) was held via Microsoft Teams on March 25, 2024 at 3:30 PM, prevailing time. Karen Sweeney, Fund Chair, Wenonah Borough, presiding.

### STATEMENT OF COMPLIANCE WITH THE OPEN PUBLIC MEETING ACT

Notice of this meeting was given by: (1) sending sufficient notice herewith to *South Jersey News*, of Mullica Hill and the *Courier Post*, Cherry Hill, NJ; (2) filing advance written notice of this meeting with the Clerks/Administrators of all member municipalities of the TRICO Municipal Joint Insurance Fund, and (3) posting notice on the public bulletin boards of all member municipalities of the TRICO Municipal Joint Insurance Fund, and Insurance Fund.

Those in attendance were:

Karen Sweeney, *Chair*, **Wenonah Borough** Bob Diaz, *Fund Secretary*, **South Harrison Township** Marjorie Sperry, **Quinton Township** Ken Brown, **Carneys Point** Colette Bachich, **Washington Township** 

Also present were:

Paul A. Forlenza, MGA, Executive Director, *RPA – A Division of Gallagher*Kamini Patel, MBA, CIC, CPCU, AIDA<sup>®</sup>, Deputy Executive Director, *RPA – A Division of Gallagher*Kris Kristie, Senior Account Manager, *RPA – A Division of Gallagher*Scott DeWeese, *The DeWeese Law Firm, P.C.*Rob Garish, Asst. Director of Public Sector, *J.A. Montgomery*Chris Roselli, Account Manager, *Qual-Lynx*Dominic Spaventa, Liability Supervisor, Qual-Lynx
Karen Beatty, Client Services Manager, *Qual-Care*Chris Winter, CPM, Law Enforcement Risk Management Consultant
Debby Schiffer, Wellness Director, *Targeting Wellness*

Those unable to attend:

Jeff Celebre, **City of Vineland** Doug Hogate, Elsinboro Township

#### **EXECUTIVE SESSION PORTION OF MEETING**

Chair Sweeney entertained a motion to move to Executive Session to review the *Payment Authorization Requests* that will be voted on in Open Session during the Executive Committee Meeting being held on March 25, 2024 at 5:00 PM.

Motion by Ms. Sperry, seconded by Mr. Brown to move to Executive Closed Session. All in favor. Motion carried

TRICO JIF Executive Claims Meeting Minutes March 25, 2024 Page 2

### **REOPEN PUBLIC PORTION OF THE MEETING**

Chair Sweeney entertained a motion to reopen the public portion of the meeting.

Motion by Ms. Sperry, seconded by Mr. Brown to reopen the public portion of the meeting. All in favor. Motion carried.

### SOLICITOR REPORT

### **Proposed Revised Litigation Management Guidelines:**

Mr. Scott DeWeese announced that the proposed revisions to the Litigation Management Guidelines have been completed. He then directed the committee members to a draft of the revised Litigation Management Guidelines included in the agenda packet. He noted that Mr. David DeWeese is recommending substantial revisions explaining that the last update was completed in 2017 and there have been significant changes in processes and procedures. He asked the committee to review the Guidelines and provide any comments or suggestions for additions, deletions, or corrections to Mr. David DeWeese as soon as possible. He noted Mr. David DeWeese would like to present a resolution along with the revised Litigation Management Guidelines to the Executive Committee in April for adoption. In addition, Mr. David DeWeese will include updated form reports as an appendix.

Mr. Scott DeWeese asked if there were any additional questions. No additional questions were entertained.

# **EXECUTIVE DIRECTOR'S MONITORING REPORTS**

#### Supervisor Investigation Report:

Ms. Patel referenced the reports included in the agenda noting that two (2) out of eight (8) incidents reported did not have a Supervisor's Investigation Reports completed. Vineland had Supervisor's Investigation Reports completed on both of their incidents. Ms. Patel noted this is very good.

Ms. Patel stated that the report is sent to J.A. Montgomery, who in turn uses it as a coaching tool when they visit with the member town and she reiterated the importance of completing the Accident Investigation Reports.

Ms. Patel asked if there were any questions. No questions were entertained.

### QUAL-LYNX REPORT;

Mr. Roselli referenced his OPEN/CLOSED Analysis reports included in the agenda packet. He explained that these reports are two separate depictions of each Unit's (WC, Property, and Liability) Claims Counts per Adjuster.

In the Workers' Compensation Unit, there are 678 lost time files, including 43 related to COVID-19. Each adjuster in the unit handles an average of 136 lost time files. The total file count, including both lost time and medical only files, is 991, which is 11 more than the previous month. Mr. Roselli announced that earlier this week, an offer of employment has been made and accepted for a new adjuster in the WC unit. He stated that this new employee would start on April 15, 2024. He stated that while

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this new hire does not have any adjusting experience, they are familiar with workers compensation from their current employment.

The Liability Unit has 574 claim files, with 626 claimants attached to them. Each adjuster in the unit handles an average of 135 claim files. The total file count has decreased by five (5) since the previous month.

In the Property Unit, Tanya Johnson and Karen Oliva handle claims in ACM/BURLCO/TRICO JIFs. Karen Oliva, who is now fully employed in the unit and will assist Tanya with these claims to reduce the workload. Mr. Roselli asked if there were any questions. No questions were entertained.

# QUAL-LYNX STAFFING CONCERNS

Mr. Forlenza stated that he was happy to hear that Qual Lynx had recently hired a new adjuster in the WC unit since this position has been open for several months. He noted that having this position open for an extended period placed a burdensome workload on other adjusters in the unit as the lost time adjusters claim counts are currently hirer than outlined in the contract between Qual Lynx and the JIF. Mr. Forlenza also noted that his office has requested a modification to the monthly report format. This alteration aims to facilitate a monthly comparison between the current adjuster workload and the contractual adjuster file counts.

# **CLAIMS AUDIT**

Mr. Forlenza requested that all Fund Professionals, with the exception of Mr. DeWeese, Ms. Patel, and himself, leave the meeting to allow for a thorough review of the claims audit outcomes. Once the Fund Professionals had exited, Mr. Forlenza proceeded to deliver a comprehensive summary on the purpose and findings of the audit including a concise overview of the subsequent meetings held following the completion of the claims audit. Mr. Forlenza reminded the Committee that a copy of the Claims Audit had been emailed to all members of the Committee last week asking that they review, at a minimum, the Executive Summary section of the report. Following his overview, Mr. Forlenza asked the Committee if they had any questions. Hearing none, Mr. Forlenza stated that he, along with Ms. Patel and Mr. DeWeese, will meet with Qual-Lynx in the near future to address the audit's recommendations and proposed potential solutions. He noted that his office would work with Qual-Lynx to install monitoring mechanisms to ensure the audit recommendations are implemented. The Committee agreed with this approach.

### NEXT MEETING

The next Executive Claims Meeting will be held on **Monday, April 22, 2024 at 3:30 PM** at Gloucester County Library.

### **MOTION TO ADJOURN**

Chair Sweeney asked for a motion adjourning the Executive Claims meeting. Motion by Ms. Sperry seconded by Mr. Brown to adjourn the meeting.

The meeting was adjourned at 4:48 PM.

TRICO JIF Executive Claims Meeting Minutes March 25, 2024 Page 4

Kris Kristie, Recording Secretary for

Robert Diaz, Secretary

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# GLOUCESTER/SALEM/CUMBERLAND COUNTIES MUNICIPAL JOINT INSURANCE FUND

### March 25, 2024 @ 5:00 pm

#### Via Microsoft Teams

# **EXECUTIVE COMMITTEE MEETING**

# **OPEN SESSION MINUTES**

The meeting of the Gloucester, Salem, Cumberland Counties Municipal Joint Insurance Fund (TRICOJIF) was held via Microsoft Teams on March 25, 2024 at 5:00 PM, prevailing time. Chair Karen Sweeney, Wenonah Borough, presiding. The meeting was called to order at 5:00 PM.

#### FLAG SALUTE

#### STATEMENT OF COMPLIANCE WITH THE OPEN PUBLIC MEETING ACT

Notice of this meeting was given by: (1) sending sufficient notice herewith to *South Jersey News*, of Mullica Hill and the *Courier Post*, Cherry Hill, NJ; (2) filing advance written notice of this meeting with the Clerks/Administrators of all member municipalities of the TRICO Municipal Joint Insurance Fund, and (3) posting notice on the public bulletin boards of all member municipalities of the TRICO Municipal Joint Insurance Fund.

### ROLL CALL

Ken Brown, Carneys Point Twp. Sue Miller, Clayton Borough Colleen Emmons, Deptford Twp. Carolyn King-Sammons, Elk Twp. Mike Burden, Fairfield Twp. Barbara Freijomil, Franklin Twp. Clark Pierpont, Glassboro Borough Kathy Schools, Alternate, Harrison Township William Pine, Logan Twp. Kevin Clour, Lower Alloways Creek Twp. Jennica Bileci, Mantua Twp. Don Darcangelo Monroe Twp. Joy Gunn, National Park Borough Harry Moore, Oldmans Twp. Susan Jacabucci, Paulsboro Borough Anjanette Scott, Penns Grove Borough Dan Neu, Pennsville Twp. Melissa Flacker, Pilesgrove Twp. Michael Razze, Pitman Borough Majorie Sperry, Quinton Twp. Bob Diaz, Fund Secretary, South Harrison Twp. Jena Dolbow, Swedesboro Borough Linda Gomez, Alternate, Vineland City Colette Bachich, Washington Twp. Lee Ann DeHart, West Deptford Nicole O'Hara, Westville Borough Cassidy Swanson, Woodbury City Jane DiBella, Woolwich Twp. Karen Sweeney, Fund Chair, Wenonah Borough Shannon Elton, Woodbury Heights Borough

Absent Fund Commissioners/Professionals were:

> Doug Hogate, **Elsinboro Twp.** Lisa Jeffers, **Greenwich Twp.** John Hitchner, **Hopewell Twp.** Rick Eber, **Mannington Twp.** Brad Campbell, **Shiloh Borough** Jack Cimprich, **Upper Pittsgrove Twp.**

Also present were:

Paul A. Forlenza, MGA, Executive Director, *RPA*, *A Division of Gallagher*Kamini Patel, MBA, CIC, CPCU, AIDA<sup>®</sup>, Program Director, *RPA – A Division of Gallagher*Scott DeWeese, Esquire, *The DeWeese Law Firm, P.C.*Rob Garish, Assistant Director of Public Sector, *J. A. Montgomery Risk Control*Debby Schiffer, *Wellness Director*Chris Roselli, Account Manager, *Qual-Lynx*Karen Beatty, Client Services Manager, *QualCare*Tom Tontarski, *Treasurer*Chris Winter, *Law Enforcement Risk Service Director*Jerry Caruso, *Technology Risk Services Director...* after roll call

Also present were the Risk Management Consultants from the following agencies and others:

Barclay Insurance Cettei & Connell Conner Strong &n Buckelew Len Eckman Insurance Hardenbergh Insurance

These minutes do not necessarily reflect the order in which some items were discussed.

Recording Secretary Kristie asked for a motion to move up Kevin Clour, Lower Alloways Creek, Alternate #1, and Dan Neu, Pennsville Township, Alternate #2 in the absence of Jeff Celebre, Vineland City, and Doug Hogate, Elsinboro Township to the Executive Committee for voting purposes.

Motion by Ms. Sperry, seconded by Ms. Bachich, to move up the Committee members as presented. All in Favor. Motion carried.

### APPROVAL OF THE MINUTES – Executive Committee Meeting

Chair Sweeney presented the minutes of the February 26, 2024 Executive Committee meeting for approval.

Chair Sweeney asked members for their questions at this time. No questions were entertained.

Chair Sweeney entertained a motion to approve the minutes of the February 26, 2024 Executive Committee meeting.

Motion by Ms. Sperry, seconded by Mr. Brown, to approve the minutes of the February 26, 2024 Executive Committee meeting. All in Favor. Motion carried.

#### APPROVAL OF THE MINUTES – Executive Claims Review Committee Meeting

Chair Sweeney presented the minutes of the February 26, 2024 Executive Claims Review Committee Meeting for approval.

Chair Sweeney asked members for their questions at this time. No questions were entertained.

Chair Sweeney entertained a motion for approval of the Executive Claims Review Committee meeting minutes.

Motion by Ms. Sperry, seconded by Ms. Bachich, to approve the minutes of the February 26, 2024 Executive Claims Review Committee Meeting. All in Favor. Motion carried.

#### APPROVAL OF THE MINUTES – Executive Claims Review Committee Closed Session

Chair Sweeney presented the Executive Claims Review Committee Closed Session meeting minutes of February 26, 2024 for approval.

Chair Sweeney asked members for their questions at this time. No questions were entertained.

Chair Sweeney entertained a motion for approval of the Executive Claims Review Committee Closed Session meeting minutes.

Motion by Ms. Sperry, seconded by Ms. Bachich, to approve the Executive Claims Review Committee Closed Session meeting minutes of February 26, 2024 as presented.

The Executive Claims Review Committee Closed Session minutes of February 26, 2024 shall not be released to the public until the reason(s) for their remaining closed is no longer applicable, the Fund Solicitor has had the opportunity to review them, and their release has been approved by the Executive Committee. All in Favor. Motion carried.

#### **EXECUTIVE CLAIMS REVIEW COMMITTEE MEETING REPORT – March 25, 2024**

Chair Sweeney reported that an Executive Claims Committee Meeting was held on Monday, March 25, 2024 at 3:30 PM via Microsoft Teams.

The Committee reviewed fourteen (14) claims. Of the claims reviewed, there were six (6) Workers' Compensation, one (1) General Liability, one (1) Auto, and six (6) Property PARs recommended for approval of settlement or continuing defense.

There were zero (0) claim(s) reviewed for February that had previously been approved by Vineland.

There were four (4) claim(s) reviewed for abandonment of subrogation attempt for February.

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Questions will be addressed during Closed Session if necessary.

#### **EXECUTIVE DIRECTOR'S REPORT**

Mr. Forlenza reviewed the Executive Director's Report found in the agenda packet with the membership. He then highlighted the following items from the report:

Mr. Forlenza noted that last month the updated JIF directories were posted to the website. Please review them as the information comes directly from Origami so any errors in emails, mailing addresses, phone numbers, need to be corrected in Origami. Please also let our office know what is being corrected.

Mr. Forlenza referenced the Certificates of Insurance report included in the agenda and asked the members to please review to be sure the certificates were ordered by you, and are correct.

Mr. Forlenza noted details regarding the allocation of funds for the Optional Safety budget, EPL/Cyber budget, and Wellness Incentive funds for 2024 can be found on pages 27, 28, and 29 of the agenda, respectively. It is important to note that a combined notification letter was sent out on or about February 13, providing information on the allotted funds for each program. He emphasized the importance of timely reimbursement for any purchases made under these programs. If you have already made purchases and are seeking reimbursement, he urged the members not to wait until the November 30, 2024 deadline to claim and request reimbursement from his office. You can simply submit the necessary information to her office, and we will process it for payment on the next bill list.

Mr. Forlenza noted the latest update on the statutory bonds, which can be found on pages 31-32 of the agenda. He noted the importance of verifying the inclusion of any newly bonded individuals, particularly in cases where retirements occurred at the end of December. Please ensure that the individuals who have been bonded through this program are accurately listed on the aforementioned pages. If you come across any discrepancies or if an individual's name is missing despite their application for underwriting and bonding, He strongly recommends reaching out to Jonathan Tavares in the Fund Underwriters Office. Alternatively, his office is readily available to assist you with any inquiries or concerns you may have.

In regards to the Elected Officials Training, Mr. Forlenza noted attendance has been very low, so please remind your Governing Body to take the training if they have not done so. He reminded the members that a \$250 credit, up to 5% of your towns assessment, will be issued for each Municipal Elected Official that competes the training In addition, he noted his office receives a download of individuals who have completed the training approximately every two weeks. A follow-up email is sent to those who have successfully completed the training, and also published is an attendee/participants list on the JIF websites. To access this list, visit the JIF website and navigate to the "Sign-In Sheets" section, located approximately halfway down on the right-hand side.

Mr. Forlenza noted that the 2025 renewal process has been initiated. As part of this process, it is crucial to conduct payroll audits. You should have received a letter from her office last month regarding the completion of the payroll audit process for this year. It is important that all Members update and upload their payroll data for the 2023 fund year into Bowman's portal, by March 12, 2024. Detailed instructions on how to upload the data into Bowman's portal were provided in the email sent on February 15. Should you have any inquiries or concerns regarding this process, please do not hesitate to contact his office for assistance.

In addition, Mr. Forlenza stated the Property Appraisal process for this year has been initiated. A formal notification was sent out from his office last month, requesting the active participation of all Risk Management Consultants and Members in reviewing the property listings in Origami. It is important to ensure the accuracy and completeness of the property listing, and he asked that members who will be receiving a physical appraisal this year promptly notify AssetWorks once the review process has been completed.

Mr. Forlenza noted the JIF would hold the 2024 Safety Kickoff Breakfast on April 2, 2024 at Auletto's Caterers, Almonesson, NJ. The invitation was emailed to all Fund Commissioners and Alternates, as well as the Clerks, RMC's, Safety, Claims and Wellness Coordinators. We asked that you please respond no later than today, March 25, 2024.

Mr. Forlenza stated the JIF will hold the 2024 Safety, Claims, & Wellness Coordinator Roundtable online on April 30, 2024. Additional information will be forthcoming.

Mr. Forlenza noted the Executive Director's office will be holding two (2) New Fund Commissioner Orientation sessions this year; one in May and the other later this Fall via Microsoft Teams. Anyone who would like an overview of the JIF is welcome to sign up and participate. An email notification with further details on how to participate in this training will be emailed to all members in April.

Mr. Forlenza reminded the members that the Division of Local Government Services utilizes an "on line" process for completion and submission of Financial Disclosure forms. Each Fund Commissioner has a unique PIN # for which to file for their position of Fund Commissioner with the JIF. Newly appointed Fund Commissioners receive their Filing PIN # from his office once we are notified of their appointment. Any newly appointed Fund Commissioner that has not yet received their PIN# from the Executive Director's office, or has any questions, should contact Kris Kristie at Kristi\_Kristie@rpadmin.com. Additional information will be sent to all Fund Commissioners once it is released by the Department of Community Affairs.

In regards to the JIF website, Mr. Forlenza noted that we are still working on the Members Only Section of the JIF website. He reported that all would be notified as soon as it is complete.

Mr. Forlenza asked if there were any questions. No questions were entertained

### SOLICITOR'S REPORT

#### Assignment of New Cases

Mr. Scott DeWeese reported that there have been no new case(s) assigned since the last meeting:

#### Assignment of Closed Cases

Mr. DeWeese reported that there have been three (3) case(s) closed since the last meeting:

Kane v. Township of East Greenwich Brennan v. Township of Washington Jones v. City of Vineland

### General Liability Files

Mr. DeWeese noted that there are **37** active General Liability files, thirteen (13) of which are Police Civil Rights cases. He stated if a member would like a synopsis of their town's cases sent to them please contact him.

### Subrogation Files

Mr. DeWeese stated that there are collection efforts being made on \$2,197,259.23 of potential recoveries on 78 files.

**MEL EPL Helpline & Authorized Contact List** – Mr. DeWeese emphasized to the members to please review the attached list of authorized contacts for the *MEL Employment Practices Helpline* and be sure that who you want to have access to the Helpline are listed on this report, as calls can only be fielded from those on the list. He reminded the members that they could appoint up to **two (2)** municipal representatives who will be permitted to contact the *Helpline* attorneys with their inquiries. The appointment of the municipal representatives must be made by Resolution of the Governing Body.

### Proposed Revised Litigation Management Guidelines

Mr. Scott DeWeese announced that Mr. DeWeese had completed proposed revisions to the Litigation Management Guidelines (LMG). He noted that he is recommending substantial revisions to the LMG, and he explained that the last update was completed in 2017 and there have been significant changes in processes and procedures since that last revision. The Claims Review Committee was asked to review these at the March meeting. Mr. Scott DeWeese stated that Mr. DeWeese would like to present a resolution along with the revised Litigation Management Guidelines to the Executive Committee in April for adoption.

In addition, Mr. DeWeese will include updated form reports as an appendix.

### Indemnification and Hold Harmless Provisions

Mr. Scott DeWeese noted that Mr. DeWeese has had several questions regarding the JIF indemnification and hold harmless language that is on the ACM JIF website. These are in the process of being revised as well as the insurance requirements and will be sent out shortly for review. He stated Mr. DeWeese would

like to present a resolution along with the revised Indemnification and Hold Harmless Guidelines to the Executive Committee in April for adoption.

Mr. Scott DeWeese asked if there were any questions. No questions were entertained.

# SAFETY DIRECTOR'S REPORT

Mr. Garish stated that the Safety Director's Report is included in the agenda and is self-explanatory, noting his report covers activities for January. He then highlighted the following:

Mr. Garish noted his report encompasses a comprehensive overview of the activities conducted during the month of February. These activities include, but are not limited to, member visits, attendance at various meetings, completion of safety director bulletins and messages, as well as utilization of the MSI Live and MSI Now training platforms.

As a reminder, anyone who has new employees, volunteers, or part time employees please be sure to have them register in the new learning management system.

Mr. Garish noted his office has recently introduced specialized *Work Zone Training Programs* exclusively tailored for police officers. This program mirrors the TEAMS class, which is a mandatory traffic incident management course mandated by the state for police officers upon their initial assignment.

Recognizing the importance of this training, his office has created a comprehensive training program that will be conducted live via the MSI Platform through Zoom and is scheduled for May 16<sup>th</sup>. A formal notice will be disseminated to all members, and this training opportunity will be made available to all law enforcement agencies.

Mr. Garish also noted, as we approach the forthcoming spring and summer months, it is incumbent upon us to underscore the heightened utilization of our parks and playgrounds. We strongly encourage diligent inspections utilizing the provided forms that are specifically tailored for municipal operations. Furthermore, his office offers comprehensive general safety overviews and online classes pertaining to playground knowledge.

Lastly Mr. Garish noted his office has had quite a few inquiries regarding fireworks and drone shows. To address these concerns, they have curated a dedicated section on the MEL website exclusively catering to drones. Additionally, the Safety Director's office has compiled a comprehensive handbook and bulletins that serve as resources for events. Should you require a thorough survey of the designated area or any form of assistance, please do not hesitate to reach out to the Safety Director's office.

Mr. Garish asked if there were any questions. No other questions were entertained.

# CLAIMS ADMINISTRATOR'S REPORT

### Lessons Learned from Losses

During the recent Lessons Learned from Losses review, Mr. Roselli emphasized the importance of office and building safety. He discussed the significance of maintaining floors, mats, wiring and spills, making sure to clean up spills immediately and inspect for tripping hazards daily. Mr. Roselli also mentioned that when a slip & fall occurs that the scene of the accident should be photographed immediately.

Lastly, Mr. Roselli referenced several Claim Roadmaps, which were included in the agenda packet, noting the Roadmaps should be shared with those in your municipalities who report claims or are involved in the claims process. He stated the Roadmaps are designed to assist you in initiating and managing claims, whether they pertain to workers' compensation, liability claims, or damage to municipal property. He noted the information has been updated to reflect any changes in personnel, particularly within the workers' compensation team. He stated there are no new processes involved, and the resources are readily available for your convenience.

Ms. Roselli asked if there were any questions at this time. No questions were entertained.

# LAW ENFORCEMENT LIABILITY CONSULTANT REPORT

Mr. Winter reviewed his report, which was included in the agenda, noting it is mostly self-explanatory, and highlighted the following.

Mr. Winter reported that Policy and Procedure requests have been received and he will be responding to requesting agencies with the most current L/E best practices, NJ AG Guidelines and L/E Accreditation requirements.

Mr. Winter noted he completed one (1) Police agency visit to date with other agency visits currently scheduled. These visits were provided to discuss agency concerns, trends, Accreditation assistance and other requests. L/E RM services were outlined and provided to Chiefs and Command Staff present. Police agency's with Command changes will be a priority and visited as well. Agency visits are ongoing and being scheduled at this time to continue to build relationships with the Law Enforcement agencies within the TRICO JIF and stated Activity Reports would be forwarded to the Fund Commissioners upon completion.

Mr. Winter reported no training is scheduled at this time; however, the Report Writing Class and the Management of Aggressive Behavior will be repeated on a selected date based on Police Chiefs input. Additionally, a course is being discussed to assist agency Resiliency Officers, to be conducted by Dr. Kelly. He noted a survey has been distributed to Police Chiefs in an effort to plan and strategize for the upcoming year. Results continue to be received and will be summarized for a future distribution.

Mr. Winter noted that the TRICO JIF Law Enforcement Ad-Hoc Committee is being formulated with three (3) Police Chiefs to represent (JIF) police agencies. Mr. Winter will meet with them on a quarterly basis virtually to discuss loss trends, concerns, training, policy and procedure assistance, L/E Accreditation guidance etc. This is being developed to maintain an ongoing forum throughout the year as an extension of the County Chiefs Association, to identify areas as previously mentioned and to reduce potential risks. The concept has been well received when discussed with Chiefs. Chiefs selected for this committee are from Mantua PD, Clayton PD, Glassboro PD and Carneys Point, PD, with the initial meeting conducted sometime in April. Topics discussed included police licensing, JIF training courses offered, and pre-employment processes.

Lastly, Mr. Winter reviewed Bulletin 24-01, which discussed Fatigue in Laws Enforcement. He explained fatigue is a prevalent issue among law enforcement officers, with more than 90 percent reporting routine fatigue and 85 percent driving while drowsy. Fatigue can manifest as tiredness, depression, mood disorders, memory impairment, irritability, stress, and hypertension. It poses dangers to officers and communities, with a significant number of officer deaths resulting from auto collisions. Factors contributing to fatigue include long workweeks, inconsistent shift schedules, commuting, home life, irregular shift schedules, and staffing shortages. Compassion fatigue, resulting from repeated exposure to traumatic situations, is also a concern. Departments are implementing strategies such as compressed shifts, limiting overtime, and involving officers in shift scheduling to combat fatigue. Individual actions, such as maintaining physical fitness and utilizing support programs, can also help mitigate fatigue.

Mr. Winter asked if there are any questions. No questions were entertained.

### WELLNESS DIRECTOR'S REPORT

Ms. Schiffer stated her report, which is included in the agenda packet, provides a detailed overview of the activities and planned events for February. She then highlighted a range of well-being initiatives and activities that towns have either already implemented or have planned for the near future.

Ms. Schiffer noted she has been actively engaging with Wellness coordinators, both through meetings and individual discussions, to exchange ideas and offer assistance in accessing necessary resources. Some towns have already initiated their Wellness initiatives, including challenges focused on relaxation and stress management. Presentations on various wellness topics are also being scheduled in different towns.

Ms. Schiffer noted she has been reaching out to new resources, including speaker bureaus, to provide additional support and will be sharing this information with all coordinators as appropriate. Some towns are exploring new ideas and sharing them at the Town Safety Committee meetings to gain input and opinions from other department heads and some towns have established dedicated Wellness committees to facilitate brainstorming and shared responsibilities in promoting wellness activities.

Ms. Schiffer advised the first Wellness Advisory Committee meeting for 2024 has taken place, and the minutes have been shared with the Executive Safety Committee members. The Executive Safety Committee has approved the minutes and they are included in today's agenda for the membership's review and the next meeting is scheduled for May 16th, with participation from Clayton, Pennsville, and Monroe.

Ms. Schiffer reported she has conducted the first of three brainstorming sessions for Wellness coordinators, providing a platform for peer support and idea exchange. The last meeting in February had representation from four Burlington County towns, and the next session is planned for May.

In terms of resource development, she has been contacting companies and lenders to explore new offerings that can benefit the TRICOJIF. For instance, Deborah Heart and Lung now provides in-person health screenings, which can be challenging to arrange on-site. Additionally, they offer a first responder program called Hero Care Connect. She is also working on the distribution of the quarterly newsletter, with the first quarter already distributed and the April issue for Q2 scheduled for the end of this month, focusing on growth and learning.

Lastly, Ms. Schiffer reminded everyone about the new multimedia section under the Wellness portion of the TRICO JIF website. It features mindful minutes, including stretching exercises, workplace movement tips, and mindfulness for meditation. Employees can access these resources at their convenience. Ms. Schiffer asked if there were any questions at this time. No questions were entertained.

### MANAGED HEALTH CARE REPORT

Ms. Beatty noted she had included the February reports in the agenda, before reviewing her reports; she noted that she would be retiring as of April 1, 2024. Ms. Beatty noted that a replacement for her position has not yet been announced; however, there are a few candidates, and she will be around for the next 2 months or so to assist in training her replacement.

Ms. Beatty then highlighted the following from her reports:

### Lost Time v. Medical Only Cases

Ms. Beatty presented the TRICO JIF Lost Time v. Medical Only Cases (Intake Report).

	February	YTD
Lost Time	1	4
Medical Only	9	29
Report Only	12	33
# of New Claims Reported	22	66
Average Days Reported to QL	1.5	1.9

### **Claims Report by Type**

This report depicts the number of claims and average number of days to report a claim to Qual-Lynx by individual members YTD 2024.

All Claims: 1.9 days Non-COVID Claims: 1.8 days COVID Claims: 0.0 days

# **Transitional Duty Report**

Ms. Beatty presented the Transitional Duty Report that depicts Transitional Duty use by town. The highlights for February YTD are as follows:

Transitional Duty Summary Report	YTD
Transitional Duty Days Available	599
Transitional Duty Days Worked	226
% of Transitional Duty Days Worked	38%
Transitional Duty Days Not Accommodated	373
% of Transitional Duty Days Not Accommodated	62%
\$ Saved by Accommodating	\$18,843
\$ Lost by NOT Accommodating	\$44,475

### **PPO Penetration Report:**

Ms. Beatty presented the PPO Penetration Report that depicts the top provider services along with the number and amount of re-priced bills for February 2024.

PPO Penetration Rate	February
Bill Count	184
Original Provider Charges	\$176,996
Re-priced Bill Amount	\$65,706
Savings	\$111,290
% of Savings	63%

**Top 10 Providers by Specialty:** This report breaks down our top 10 providers by specialty e.g. Anesthesia/Pain Management, Facility, and MRI/Radiology as these are the heaviest expenses the Fund incurs.

**Nurse Case Assignment Report:** This report depicts the number of claims by member where a nurse case manager has been appointed and whether the nurse has been assigned longer than 90 days for February 2024.

### Managed Care Quick Notes

Ms. Beatty reported that starting May 1, 2024, Qual-Lynx would collaborate with Enlyte ScriptAdvisor for Pharmacy Benefit Management (PBM) services in New Jersey. ScriptAdvisor is a leading PBM solution provider in the workers' compensation industry. They have a wide network of pharmacies, including popular ones like Walgreens and CVS. The PBM program includes customized drug formularies, opioid and compound drug controls, pharmacist oversight, 24/7 support, and savings reporting. The transition will not interrupt patient care, and Qual-Lynx will provide First Fill letters to ensure no out-of-pocket expenses for medications.

Ms. Beatty asked if there were any questions at this time. No questions were entertained.

### TECHNOLOGY RISK SERVICES REPORT

Mr. Caruso referenced his reports included in the agenda highlighting the activities during the month of February. He noted substantial portions of his efforts were dedicated to the successful completion of our cyber hygiene training.

In regards to the new training session, which commenced on February 5, he reported positive outcomes. He reported that just over 90% of the recipients of the training emails have already completed the training, signifying a good level of engagement. He noted each employee received two (2) emails, one to restart the new training, and another to test their ability to check a phishing email to determine whether it was a genuine email or not. Additionally, Mr. Caruso reiterated the significance of the phishing exercise, which serves as a pre-training assessment of individuals' knowledge and preparedness.

Mr. Caruso stated he is currently engaged in proactive outreach to Fund Commissioners to address the ongoing results of the external network vulnerability scanning. He highlighted the critical vulnerabilities identified in some towns and the subsequent notifications sent to address them within the designated 30-day timeframe. He also mentions the positive outcome of the penetration testing, which has not yielded any concerning results.

Mr. Caruso noted his primary focus at present is the distribution of cyber risk management framework forms to all Fund Commissioners, emphasizing the significance of completing the basic form to qualify for a deductible reduction, of which 90% of our members have completed thus far, which is another excellent result.

Additionally, Mr. Caruso highlighted his efforts in addressing O365 policies, providing 15 online recommendations to enhance the security of the O365 environment. Notably, he emphasizes the importance of disabling external access to email via the web and implementing geo-restriction measures to prevent unauthorized access. He advises printing and sharing these recommendations with IT personnel for implementation.

Lastly, Mr. Caruso informed the members that Microsoft Teams would be transitioning to a new version by July 1, prompting all users to adapt to the updated platform.

Mr. Caruso asked if there were any questions. No questions were entertained.

# TREASURER'S REPORT

Mr. Tontarski presented an overview of the Treasurer's Report for the period ending February 29, 2024, a copy of which was provided to the membership in the agenda packet, for Closed Fund Years 1991 to 2019, and Fund Years 2020, 2021, 2022, 2023 and 2024.

### Investment Interest

Interest received or accrued for the reporting period totaled \$77,686.21. This generated an average annual yield of 2.65%. However, after including an unrealized net loss of \$145,192.71 in the asset portfolio, the yield is adjusted to -2.30% for this period. The total overview of the asset portfolio for the fund shows a current market value of \$27,818,933.01 vs. the amount we have invested.

The Fund's asset portfolio with Wilmington Trust consists of one (1) obligation with a maturity of less than one year.

The JCMI Portfolio has a current market value of \$25,376,299.23

### **Receipt Activity for the Period**

	Month	YTD
Subrogation Receipts	\$79,899.71	\$109,879.80
Salvage	\$0.00	
Overpayment Reimbursement	\$0.00	
1 <sup>st</sup> Installment Premium Receipts		\$3.002.573.00

### A.E.L.C.F. Participant Balances at Period End

All Member Balances are now combined in one report and shows that \$1,402.04 in interest has been applied to the existing balances as shown in the attached report totaling \$653,513.44 at months end.

# Loss Run Payment Register for the Period – February 29, 2024

Mr. Tontarksi stated the net claim activity during the reporting period for claims paid by the Fund and claims payable by the Fund at period end is \$330,266.30. The claims detail shows 438 claims payments issued.

# Cash Activity for the Period

Mr. Tontarski stated that during the reporting period the Fund's "Cash Position" changed from an opening balance of \$34,556,425.08 to a closing balance of \$35,761,327.64 showing an increase in the fund of \$1,204,902.56

# Bill Lists – March 2024

For the Executive Committee's consideration, Mr. Tontarski presented the March Bill List in the amount of \$215,703.29.

Chair Sweeney entertained a motion to approve February 2024 Loss Run Payment Register and the March Bill List in the amount of \$215,703.29, as presented.

Chair Sweeney asked if there were any questions at this time. No questions were entertained.

Motion by Ms. Sperry, seconded by Ms. Bachich to approve the *February Loss Run Payment Register and the March Bill List in the amount of \$215,703.29*, as presented.

ROLL CALL	Yeas:	Marjorie Sperry, Quinton Township Colette Bachich, Washington Township Ken Brown, Carneys Point Robert Diaz, Fund Secretary, South Harrison Twp. Karen Sweeney, Fund Chair, Wenonah Borough Kevin Clour, Lower Alloways Creek Dan Neu, Pennsville Township
	Nays:	None
	Abstain:	None

All in favor. Motion carried by unanimous vote.

### **COMMITTEE REPORTS**

### Strategic Planning Committee Meeting Minutes – February 28, 2024

Ms. Miller noted the Strategic Planning Committee met virtually on February 28, 2024 and the detailed minutes were included in the agenda, pages 127-143, which also included the revised Strategic Planning Charter for consideration of approval. She noted the minutes and report are self-explanatory, and highlighted the following.

Ms. Miller provided an update on recent activities, noting the upcoming member renewal period and highlighted the efforts of Mr. Forlenza and Ms. Patel to conduct visitations, ensuring maximum membership retention. She noted the absence of growth prospects this year, a trend they have been monitoring closely.

Two final points were highlighted: the Fund Commissioner orientation, which will now be held twice a year to accommodate those who missed the initial session, and the upcoming Annual Planning Retreat, scheduled to take place in person at Auletto Caterers, Almonesson in late July, with more information to follow.

Chair Sweeney asked for a Motion to Adopt the *Revised Strategic Planning Committee Charter* as presented.

Motion by Ms. Sperry, seconded by Ms. Bachich to Adopt the *Revised Strategic Planning Committee Charter* as presented. All in Favor. Motion carried.

# Safety Committee Meeting Minutes – February 29, 2024

In the absence of Mr. Celebre, Ms. Patel noted the Safety Committee met virtually on February 29, 2024 and the detailed minutes were included in the agenda, pages 144-179, which also included the revised Safety Committee Charter for consideration of approval. She noted the minutes and report are self-explanatory, and highlighted the following.

Ms. Patel stated that action needs to be taken to adopt the revised Safety Committee Charter at tonight's meeting. She noted that the annual Safety Director's report was discussed and is attached to the minutes. She reported that twelve (12) members are up for renewal 1/1/25 and inspections by the Safety Director will be completed. She stated that loss ratio reports were discussed and that the TRICO JIF's six-year average loss ratio is 92.5% loss ratio as of 12/31/23. She noted that the 12/31/23 snapshots could be found in Origami for your review. The Committee also discussed the upcoming Safety Breakfast and the Safety and Claims Coordinator Roundtable. The next meeting is May 30, 2024 via Microsoft Teams.

Chair Sweeney asked for a Motion to Adopt the Revised Safety Committee Charter as presented.

Motion by Ms. Sperry, seconded by Ms. Bachich to Adopt the *Revised Safety Committee Charter* as presented. All in Favor. Motion carried.

# MEL/RCF/EJIF/CYBER Reports

There were no meeting to report on this month.

# MISCELLANEOUS BUSINESS

#### Resolution 2024-19 Honoring Jane DiBella, Woolwich Township

Chair Sweeney read Resolution 2024-19 Honoring Jane DiBella, Woolwich Township, and thanked her for her services, and wished her a wonderful retirement.

Chair Sweeney entertained a motion to adopt Resolution 2024-19, as presented.

Motion by Ms. Sperry, seconded by Ms. Bachich to approve the Motion as presented. All in favor. Motion carried.

### NEXT MEETING

Chair Sweeney noted that the next meeting of the TRICO JIF would take place on Monday, April 22, 2024 at 5:00 PM at the Gloucester County Library, Mullica Hill, NJ.

### **PUBLIC COMMENT**

#### **Open Public Comment**

Chair Sweeney entertained a motion to open the meeting to the public.

Motion by Ms. Sperry, second by Ms. Bachich to open the meeting to the public. All in favor. Motion carried.

#### **Close Public Comment**

Hearing no other comments from the public, Chair Sweeney entertained a motion to close the meeting to the public.

Motion by Ms. Sperry, second by Ms. Bachich to close the meeting to the public. All in favor. Motion carried.

# APPROVE CLAIMS PAYMENTS

Chair Sweeney entertained a motion to approve the following PARs as reviewed and recommended by the Executive Claims Review Committee.

Workers Compensation	General Liability	Property	Auto
2022245499	2022254973	2024326176	2024325080
2024325590		2024326303	
2021234366		2021209871	
2022246520		2024309858	
202128262		2024313632	
2024324316		2021224601	

Motion by Ms. Sperry, second by Ms. Bachich, to approve Claims Payments, as presented

ROLL CALL	Yeas:	Marjorie Sperry, Quinton Township Colette Bachich, Washington Township Ken Brown, Carneys Point Robert Diaz, <i>Fund Secretary</i> , South Harrison Twp. Karen Sweeney, <i>Fund Chair</i> , Wenonah Borough Kevin Clour, Lower Alloways Creek Dan Neu, Pennsville Township
	N	,

Nays:NoneAbstain:None

All in favor. Motion carried by unanimous vote

### **APPROVE ABANDONING SUBROGATION**

Secretary Diaz noted there were four (4) claim(s) reviewed for abandonment of subrogation attempt since the last meeting:

2019156233
2023282793
2022271264
2023297102

Chair Sweeney entertained a motion for the Authorization for the Abandonment of Subrogation files 2019156233, 2023282793, 2022271264, 2023297102 as presented.

Motion by Ms. Sperry, second by Ms. Bachich, for the authorization for the abandonment of Subrogation on files as presented.

ROLL CALL	Yeas:	Marjorie Sperry, Quinton Township Colette Bachich, Washington Township Ken Brown, Carneys Point Robert Diaz, Fund Secretary, South Harrison Twp. Karen Sweeney, Fund Chair, Wenonah Borough Kevin Clour, Lower Alloways Creek Dan Neu, Pennsville Township
	Nays:	None
	Abstain:	None

All in favor. Motion carried by unanimous vote

# MOTION TO ADJOURN

There being no further business, Chair Sweeney entertained a *Motion to Adjourn* the March 25, 2024 Executive Committee Meeting of the TRICO JIF.

Motion by Ms. Sperry, second by Ms. Bachich. All in Favor. Motion carries.

The meeting was adjourned at 6:00 PM.

Kris Kristie, Recording Secretary for

Robert Diaz, Fund Secretary



To: Fund Commissioners

From: Paul Forlenza, MGA, RMC, Executive Director

Date: April 22, 2024

Re: **Executive Director's Report** 

# A. Lost Time Accident Frequency Report – (pgs. 22-23)

The February 2024 Lost Time Accident Frequency Summary and the Statewide Recap for February 2024 are attached for your review.

# B. Certificates of Insurance (pgs. 24-29)

Summaries of the Certificates of Insurance issued through 2/22/24-3/22/24 2024 are attached for your review.

# C. Financial Fast Track (pg. 30-31)

The Financial Fast Track Report for Year End 2023 and February 29, 2024 is attached for your review. This report is generated by the Administrative Consultant and provides a "snapshot" of the JIF's financial status. The JIF's surplus position as of Year End was **\$13,430,300** and for February 29, 2024 was **\$13,749,039** 

# D. Regulatory Filing Checklists (pgs. 32-33)

Enclosed please find two regulatory filing checklists that we provide each month as part of our due diligence reporting on behalf of the JIF. These checklists provide an outline of required reporting to the Departments of Banking and Insurance and Community Affairs on an annual and a monthly basis, and the status of the items outlined.

# E. 2023 Safety Incentive Program (pg. 34)

A letter from our office describing how to collect your 2023 Safety Award Money was emailed out to all members on or about March 28, 2024. If you have any questions on how to collect your 2023 Safety Incentive allowance, please contact our office **Please note that the deadline to claim or encumber these funds is November 1, 2024.** All encumbered funds had to be claimed by January 31, 2025.

# F. 2024 Optional Safety Budget (pg. 35)

A consolidated announcement letter including instructions on how to collect your 2024 Optional Safety Allowance was emailed to all members on or about February 13, 2024. If you have any questions on how to collect your 2024 Optional Safety Budget allowance, please contact our office <u>Please note that the deadline to claim or encumber these funds was November 1, 2024</u> <u>All encumbered funds have to be claimed by January 31, 2025.</u>

# G. 2024 Wellness Incentive (pg. 36)

A consolidated announcement letter including instructions on how to collect your 2024 Wellness Incentive Program Allowance was emailed to all members on or about February 13, 2024. If you have any questions on how to collect your 2024 Wellness Incentive Program allowance, please contact our office. <u>Please note that the deadline to claim or encumber these funds was</u> November 1, 2024. All encumbered funds have to be claimed by January 31, 2025.

# H. 2024 EPL/Cyber Risk Management Budget (pg. 37)

A consolidated announcement letter including instructions on how to collect your 2024 EPL/Cyber Risk Management Allowance was emailed to all members on or about February 13, 2024. If you have any questions on how to collect your 2024 EPL/Cyber Risk Management Allowance, please contact our office. <u>Please note that the deadline to claim or encumber these</u> funds was November 1, 20234 All encumbered funds have to be claimed by January 31, 2025.

# I. Employment Practices Liability Compliance Status (pg. 38)

Reports regarding each member's compliance status with the MEL EPL/POL Risk Management Plan is a handout for your review. Each member should review this report carefully to insure its accuracy. If you believe the report to be inaccurate regarding the status of your compliance with the Program can be directed to Sandra Cantwell at <u>scantwell@permainc.com</u>.

# J. Statutory Bond Status (pgs. 39-41)

The latest listing of Statutory Bonds issued by the MEL for JIF members is included for your review. This list should be reviewed for accuracy. Please note that these bonds are written for the individual NOT the position to be bond. All applicants for a bond must complete an underwriting application and submit it to the Fund Underwriter for approval. Any questions on the status of an application or a bond listed on the report should be directed to Jonathon Tavares at 856-614-4493 or jtavares@connerstrong.com.

# K. Skateboard Park Approval Status (pg. 42)

Enclosed, pleased find a spreadsheet depicting the current status of all approved skateboard parks or those currently under construction by a member municipality. The MEL has established a process, outlined in MEL Coverage Bulletin **2024-06**, which must be followed by all members who wish to construct a skateboard park and have the BURLCO JIF and MEL provide said facility with coverage. Any member with a park currently under construction or in the review process should review the enclosed spreadsheet to be sure that it accurately depicts the status of your facility. All members considering construction of a skateboard park should contact the Executive Director's office prior to moving forward.

# L. Capehart & Scatchard Blog (pgs. 43-48)

John Geaney, Esq. of the law firm of Capehart & Scatchard periodically provides updates on court cases dealing with workers' compensation, ADA, and FMLA issues. Copies of his latest updates are included for your information.

# M. Land Use Training Certification (pg. 49)

Attached for your review is a list of members that have provided a certification to the Fund Underwriter indicating that at least some of their Board Members have completed the Optional Land Use Training Program. Land Use Board members that complete the training program will be eligible for enhanced coverage should they be personally named in a Land Use claim. Please note that only these Board members that have completed the training are eligible for the enhanced coverage. If you would like additional copies of the Land Use Liability Training Booklets, please contact the Executive Director's office. If you have any questions regarding the individuals that have completed the training, please do not hesitate to contact Jonathon Tavares at 856-614-4493 or jtavares@connerstrong.com.

# N. Elected Officials Training (pgs. 50-51)

Once again, this year, the Fund will be sponsoring Elected Officials training via the MEL Safety Institute website. The MEL will reduce each member's 2024 MEL Assessment by \$250 for each municipal elected official who completes the training. This credit will also be extended to the member's CEO (i.e. Municipal Manager or Administrator) who completes the training. The total credit is limited to 5% of a member's 2024 MEL Assessment. Information on how to access the training was emailed to all Municipal Clerks, Fund Commissioners, & RMC's on January 3, 20 2024. If you have any questions, or need assistance with the training, please contact the MSI Helpline at 866-661-5120

# O. Safety, Claims, & Wellness Coordinator Roundtable

The JIF will hold the 2024 Safety, Claims, & Wellness Coordinator Roundtable via Zoom Conferencing on Tuesday, April 30, 2024 starting at 10:00 am and running approximately one hour. An invitation was emailed to all members from the Safety Directors office on April 5, 2024.

# P. New Fund Commissioner Orientation

This year, the Executive Directors office will hold two (2) New Fund Commissioner Orientation sessions; one in May and the other later this Fall via Microsoft Teams. Anyone who would like an overview of the JIF is welcome to sign up and participate. An email notification with further details on how to participate in this training will be emailed to all members in April.

# **Q.** Financial Disclosure Statement Filing

The Division of Local Government Services utilizes an "on line" process for completion and submission of Financial Disclosure forms. Each Fund Commissioner has a unique PIN # for which to file for their position of Fund Commissioner with the JIF and newly appointed Fund Commissioners receive their Filing PIN # from our office once we are notified of their appointment. An email was sent to all Fund Commissioners on April 3, 2024 along with LFN 2024-08 stating the Financial Annual Filing platform was open for filing and the deadline to file without penalty was April 30, 2024. If you have confirmation of your filing, please be sure to keep it should the Executive Directors office receive notice of non-filer status.

# R. Special Law Enforcement Officer Training

The Annual SLEO Training will be provided again this year in two (2) sessions in May. Additional information will be forthcoming.

# S. Quarterly Attendance (pg. 52)

A report detailing attendance records through the first quarter of the 2024 Fund Year is attached. Please be sure to review your attendance, and contact Ms. Kristie at Kristi\_Kristie@RPAdmin.com if you feel there are any discrepancies in the report.

# T. Website (<u>www.tricojif.org</u>)

Please take a moment to explore the website, which contains a plethora of information in an easy to read format and navigate site. If you have any questions, comments, or feedback, please contact Megan Matro at 856-446-9141 or Megan\_Matro@rpadmin.com.

# U. New Member Activity

Nothing to report

2         346         Carney           3         348         East O           4         349         Elk To           5         350         Fairfie           6         351         Glassi           7         352         Green           8         353         Harris           9         355         Logan           0         356         Mantu           1         357         Monro           2         358         Paulst           3         359         Penns           4         360         Penns           5         361         Pilesg           6         362         Pitman           7         364         South           8         365         Weeto           2         369         Wood           3         370         Wood           3         371         Wood           3         370         Wood           3         370         Wood           4         360         Pitman           55         464         Quinto           56         464         Quinto	MBER way Township leys Point Township Greenwich Township Township Teld Township sboro Borough an Township tua Township tua Township tua Township sboro Borough ts Grove Borough ts Grove Borough tsville Township grove Township	** FOR  * 2/29/2024	LOST TIME ACCIDENTS 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	LOST TIME FREQUENCY 0.00 0.	LOST TIME FREQUENCY  ***  0.00 0.00 0.00 0.00 3.30 2.31 0.00 2.04 1.67 1.79 1.27 4.00 1.92 0.00 0.73 0.00 0.73 0.00	LOST TIME FREQUENCY 0.00 0.00 0.00 0.00 3.86 1.14 0.00 0.00 0.82 1.80 1.23 1.96 0.63 0.00 0.74 0.00	MEMBER  1 Alloway Township 2 Carneys Point Township 3 East Greenwich Township 4 Elk Township 5 Fairfield Township 6 Glassboro Borough 7 Greenwich Township 8 Harrison Township 9 Logan Township 10 Mantua Township 11 Monroe Township 12 Paulsboro Borough 13 Penns Grove Borough 14 Pennsville Township 15 Pilesgrove Township 16 Pitman Borough	RATE 2024 - 202 0.00 0.00 0.00 0.00 3.30 1.59 0.00 0.96 1.14 1.67 1.16 2.76 1.17 0.00 0.69
1         345         Allow           2         346         Carney           3         348         East O           4         349         Elk To           5         350         Fairfie           6         351         Glassb           7         352         Green           8         353         Harris           9         355         Logan           0         356         Mantu           1         357         Monro           2         358         Paulsb           3         359         Penns           4         360         Penns*           5         361         Pilesg           6         362         Pitman           7         364         South           8         365         Swede           9         366         Upper           0         367         Wood           3         370         Wood           4         371         Woolv           5         464         Quinto           6         480         Oldman           7         528         Fran	way Township way Township Greenwich Township Township Township ield Township sboro Borough an Township tua Township tua Township tua Township sboro Borough ts Grove Borough tsville Township grove Township an Borough h Harrison Township desboro Borough er Pittsgrove Township	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	*** 0.00 0.00 0.00 0.00 3.30 2.31 0.00 2.04 1.67 1.79 1.27 4.00 1.92 0.00 0.73 0.00	0.00 0.00 0.00 0.00 0.00 3.86 1.14 0.00 0.00 0.82 1.80 1.23 1.96 0.63 0.00 0.74	<ol> <li>Alloway Township</li> <li>Carneys Point Township</li> <li>East Greenwich Township</li> <li>East Greenwich Township</li> <li>Elk Township</li> <li>Fairfield Township</li> <li>Glassboro Borough</li> <li>Greenwich Township</li> <li>Harrison Township</li> <li>Logan Township</li> <li>Logan Township</li> <li>Mantua Township</li> <li>Mantua Township</li> <li>Paulsboro Borough</li> <li>Penns Grove Borough</li> <li>Pennsville Township</li> <li>Pilesgrove Township</li> <li>Pilesgrove Township</li> </ol>	0.00 0.00 0.00 0.00 3.30 1.59 0.00 0.96 1.14 1.67 1.16 2.76 1.17 0.00
2         346         Carney           3         348         East O           4         349         Elk To           5         350         Fairfie           6         351         Glassf           7         352         Green           8         353         Harris           9         355         Logan           0         356         Mantu           1         357         Monro           2         358         Paulst           3         359         Penns           4         360         Penns           5         361         Pilesg           6         362         Pitman           7         364         South           8         365         Swede           9         366         Upper           0         367         Wood           3         370         Wood           4         371         Wood           5         464         Quinto           6         480         Oldman           7         528         Frankl           8         529         Shilo	eys Point Township Greenwich Township Township Township ield Township sboro Borough ison Township ison Township tua Township tua Township tua Township sboro Borough is Grove Borough isville Township grove Township an Borough h Harrison Township desboro Borough er Pittsgrove Township	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 3.30 2.31 0.00 2.04 1.67 1.79 1.27 4.00 1.92 0.00 0.73 0.00	0.00 0.00 0.00 3.86 1.14 0.00 0.00 0.82 1.80 1.23 1.96 0.63 0.00 0.74	<ol> <li>2 Carneys Point Township</li> <li>3 East Greenwich Township</li> <li>4 Elk Township</li> <li>5 Fairfield Township</li> <li>6 Glassboro Borough</li> <li>7 Greenwich Township</li> <li>8 Harrison Township</li> <li>9 Logan Township</li> <li>10 Mantua Township</li> <li>11 Monroe Township</li> <li>12 Paulsboro Borough</li> <li>13 Penns Grove Borough</li> <li>14 Pennsville Township</li> <li>15 Pilesgrove Township</li> <li>16 Pitman Borough</li> </ol>	0.00 0.00 0.00 3.30 1.59 0.00 0.96 1.14 1.67 1.16 2.76 1.17 0.00
3         348         East O           4         349         Elk Tc           5         350         Fairfie           6         351         Glassi           7         352         Green           8         353         Harris           9         355         Logan           0         356         Mantu           1         357         Monro           2         358         Paulsb           3         359         Penns           4         360         Penns           5         361         Pilesg           6         362         Pitman           7         364         South           8         365         Swede           9         366         Upper           0         367         Wood           3         370         Wood           4         371         Wood           5         464         Quinto           6         480         Oldman           7         528         Frankl           8         529         Shiloh           9         603         Manni	Greenwich Township Township Teld Township sboro Borough anwich Township ison Township tua Township tua Township tua Township sboro Borough ts Grove Borough tsville Township an Borough h Harrison Township desboro Borough er Pittsgrove Township	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 3.30 2.31 0.00 2.04 1.67 1.79 1.27 4.00 1.92 0.00 0.73 0.00	0.00 0.00 3.86 1.14 0.00 0.00 0.82 1.80 1.23 1.96 0.63 0.00 0.74	<ol> <li>Bast Greenwich Township</li> <li>Elk Township</li> <li>Fairfield Township</li> <li>Glassboro Borough</li> <li>Greenwich Township</li> <li>Harrison Township</li> <li>Logan Township</li> <li>Logan Township</li> <li>Mantua Township</li> <li>Mantua Township</li> <li>Paulsboro Borough</li> <li>Penns Grove Borough</li> <li>Pennsville Township</li> <li>Pilesgrove Township</li> <li>Pitman Borough</li> </ol>	0.00 0.00 3.30 1.59 0.00 0.96 1.14 1.67 1.16 2.76 1.17 0.00
4         349         Elk Tc           5         350         Fairfie           6         351         Glassi           7         352         Green           8         353         Harris           9         355         Logan           0         356         Mantu           1         357         Monro           2         358         Paulsb           3         359         Penns           4         360         Penns           5         361         Pilesg           6         362         Pitman           7         364         South           8         365         Swede           9         366         Upper           0         367         Wood           3         370         Wood           4         371         Wood           5         464         Quinto           6         480         Oldman           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower<	Township Tield Township sboro Borough enwich Township ison Township tua Township tua Township tua Township sboro Borough ts Grove Borough tsville Township an Borough h Harrison Township desboro Borough er Pittsgrove Township	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 3.30 2.31 0.00 2.04 1.67 1.79 1.27 4.00 1.92 0.00 0.73 0.00	0.00 0.00 3.86 1.14 0.00 0.00 0.82 1.80 1.23 1.96 0.63 0.00 0.74	<ul> <li>4 Elk Township</li> <li>5 Fairfield Township</li> <li>6 Glassboro Borough</li> <li>7 Greenwich Township</li> <li>8 Harrison Township</li> <li>9 Logan Township</li> <li>10 Mantua Township</li> <li>11 Monroe Township</li> <li>12 Paulsboro Borough</li> <li>13 Penns Grove Borough</li> <li>14 Pennsville Township</li> <li>15 Pilesgrove Township</li> <li>16 Pitman Borough</li> </ul>	0.00 0.00 3.30 1.59 0.00 0.96 1.14 1.67 1.16 2.76 1.17 0.00
5         350         Fairfie           6         351         Glassi           7         352         Green           8         353         Harris           9         355         Logan           0         356         Mantu           1         357         Monro           2         358         Paulst           3         359         Penns           4         360         Penns           5         361         Pilesg           6         362         Pitman           7         364         South           8         365         Swede           9         366         Upper           0         367         Wood           3         370         Wood           4         371         Wood           5         464         Quinto           6         480         Oldman           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	Teld Township sboro Borough anwich Township ison Township tua Township tua Township tua Township sboro Borough ts Grove Borough tsville Township an Borough h Harrison Township desboro Borough er Pittsgrove Township	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 3.30 2.31 0.00 2.04 1.67 1.79 1.27 4.00 1.92 0.00 0.73 0.00	0.00 3.86 1.14 0.00 0.82 1.80 1.23 1.96 0.63 0.00 0.74	<ul> <li>5 Fairfield Township</li> <li>6 Glassboro Borough</li> <li>7 Greenwich Township</li> <li>8 Harrison Township</li> <li>9 Logan Township</li> <li>10 Mantua Township</li> <li>11 Monroe Township</li> <li>12 Paulsboro Borough</li> <li>13 Penns Grove Borough</li> <li>14 Pennsville Township</li> <li>15 Pilesgrove Township</li> <li>16 Pitman Borough</li> </ul>	0.00 3.30 1.59 0.00 0.96 1.14 1.67 1.16 2.76 1.17 0.00
6         351         Glassi           7         352         Green           8         353         Harris           9         355         Logan           0         356         Mantu           1         357         Monro           2         358         Paulsb           3         359         Penns           4         360         Penns           5         361         Pilesg           6         362         Pitmar           7         364         South           8         365         Swede           9         366         Upper           0         367         Wood           3         370         Wood           4         371         Wood           5         464         Quinto           6         480         Oldmar           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	sboro Borough enwich Township ison Township an Township tua Township tua Township sboro Borough as Grove Borough swille Township an Borough h Harrison Township desboro Borough er Pittsgrove Township	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	3.30 2.31 0.00 2.04 1.67 1.79 1.27 4.00 1.92 0.00 0.73 0.00	3.86 1.14 0.00 0.82 1.80 1.23 1.96 0.63 0.00 0.74	<ul> <li>6 Glassboro Borough</li> <li>7 Greenwich Township</li> <li>8 Harrison Township</li> <li>9 Logan Township</li> <li>10 Mantua Township</li> <li>11 Monroe Township</li> <li>12 Paulsboro Borough</li> <li>13 Penns Grove Borough</li> <li>14 Pennsville Township</li> <li>15 Pilesgrove Township</li> <li>16 Pitman Borough</li> </ul>	3.30 1.59 0.00 0.96 1.14 1.67 1.16 2.76 1.17 0.00
7         352         Green           8         353         Harris           9         355         Logan           0         356         Mantu           1         357         Monro           2         358         Paulst           3         359         Penns           4         360         Penns           5         361         Pilesg           6         362         Pitmar           7         364         South           8         365         Swede           9         366         Upper           0         367         Wood           1         368         Westv           2         369         Wood           3         370         Wood           4         371         Wood           5         464         Quinto           6         480         Oldmar           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	enwich Township ison Township an Township tua Township roe Township sboro Borough as Grove Borough swille Township an Borough h Harrison Township desboro Borough er Pittsgrove Township	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	2.31 0.00 2.04 1.67 1.79 1.27 4.00 1.92 0.00 0.73 0.00	1.14 0.00 0.82 1.80 1.23 1.96 0.63 0.00 0.74	<ul> <li>7 Greenwich Township</li> <li>8 Harrison Township</li> <li>9 Logan Township</li> <li>10 Mantua Township</li> <li>11 Monroe Township</li> <li>12 Paulsboro Borough</li> <li>13 Penns Grove Borough</li> <li>14 Pennsville Township</li> <li>15 Pilesgrove Township</li> <li>16 Pitman Borough</li> </ul>	1.59 0.00 0.96 1.14 1.67 1.16 2.76 1.17 0.00
8         353         Harris           9         355         Logan           0         356         Mantu           1         357         Monro           2         358         Paulsb           3         359         Penns           4         360         Penns           5         361         Pilesg           6         362         Pitman           7         364         South           8         365         Swede           9         366         Upper           0         367         Wenou           1         368         Westv           2         369         Wood           3         370         Wood           4         371         Woolv           5         464         Quinto           6         480         Oldmar           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	ison Township nn Township tua Township roe Township sboro Borough as Grove Borough swille Township grove Township an Borough h Harrison Township desboro Borough er Pittsgrove Township	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 2.04 1.67 1.79 1.27 4.00 1.92 0.00 0.73 0.00	0.00 0.00 0.82 1.80 1.23 1.96 0.63 0.00 0.74	<ul> <li>8 Harrison Township</li> <li>9 Logan Township</li> <li>10 Mantua Township</li> <li>11 Monroe Township</li> <li>12 Paulsboro Borough</li> <li>13 Penns Grove Borough</li> <li>14 Pennsville Township</li> <li>15 Pilesgrove Township</li> <li>16 Pitman Borough</li> </ul>	0.00 0.96 1.14 1.67 1.16 2.76 1.17 0.00
9         355         Logan           0         356         Mantu           1         357         Monro           2         358         Paulsb           3         359         Penns           4         360         Penns           5         361         Pilesg           6         362         Pitmar           7         364         South           8         365         Swede           9         366         Upper           0         367         Wenor           1         368         Westv           2         369         Wood           3         370         Wood           4         371         Woolv           5         464         Quinto           6         480         Oldmar           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	an Township tua Township roe Township sboro Borough as Grove Borough swille Township grove Township an Borough h Harrison Township desboro Borough er Pittsgrove Township	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	2.04 1.67 1.79 1.27 4.00 1.92 0.00 0.73 0.00	0.00 0.82 1.80 1.23 1.96 0.63 0.00 0.74	<ul> <li>9 Logan Township</li> <li>10 Mantua Township</li> <li>11 Monroe Township</li> <li>12 Paulsboro Borough</li> <li>13 Penns Grove Borough</li> <li>14 Pennsville Township</li> <li>15 Pilesgrove Township</li> <li>16 Pitman Borough</li> </ul>	0.96 1.14 1.67 1.16 2.76 1.17 0.00
0         356         Mantu           1         357         Monro           2         358         Paulst           3         359         Penns           4         360         Penns           5         361         Pilesg           6         362         Pitmar           7         364         South           8         365         Swede           9         366         Upper           0         367         Wenor           1         368         Westv           2         369         Wood           3         370         Wood           4         371         Woolv           5         464         Quinto           6         480         Oldmar           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	tua Township roe Township sboro Borough as Grove Borough swille Township grove Township an Borough h Harrison Township desboro Borough er Pittsgrove Township	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	1.67 1.79 1.27 4.00 1.92 0.00 0.73 0.00	0.82 1.80 1.23 1.96 0.63 0.00 0.74	10 Mantua Township 11 Monroe Township 12 Paulsboro Borough 13 Penns Grove Borough 14 Pennsville Township 15 Pilesgrove Township 16 Pitman Borough	1.14 1.67 1.16 2.76 1.17 0.00
0         356         Manut           1         357         Monro           2         358         Paulst           3         359         Penns           4         360         Penns           5         361         Pilesg           6         362         Pitmar           7         364         South           8         365         Swede           9         366         Upper           0         367         Wenor           1         368         Westv           2         369         Wood           3         370         Wood           4         371         Wools           5         464         Quinto           6         480         Oldmar           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	tua Township roe Township sboro Borough as Grove Borough swille Township grove Township an Borough h Harrison Township desboro Borough er Pittsgrove Township	0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0	0.00 0.00 0.00 0.00 0.00 0.00 0.00	1.79 1.27 4.00 1.92 0.00 0.73 0.00	1.80 1.23 1.96 0.63 0.00 0.74	<ol> <li>Monroe Township</li> <li>Paulsboro Borough</li> <li>Penns Grove Borough</li> <li>Pennsville Township</li> <li>Pilesgrove Township</li> <li>Pitman Borough</li> </ol>	1.67 1.16 2.76 1.17 0.00
2         358         Paulsb           3         359         Penns           4         360         Penns           5         361         Pilesg           6         362         Pitmar           7         364         South           8         365         Swede           9         366         Upper           0         367         Wenor           1         368         Westv           2         369         Wood           4         371         Woods           5         464         Quinto           6         480         Oldmar           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	sboro Borough is Grove Borough isville Township igrove Township an Borough h Harrison Township desboro Borough er Pittsgrove Township	0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0	0.00 0.00 0.00 0.00 0.00 0.00	1.27 4.00 1.92 0.00 0.73 0.00	1.23 1.96 0.63 0.00 0.74	12 Paulsboro Borough 13 Penns Grove Borough 14 Pennsville Township 15 Pilesgrove Township 16 Pitman Borough	1.16 2.76 1.17 0.00
3         359         Penns           4         360         Penns           5         361         Pilesg           6         362         Pitman           7         364         South           8         365         Swede           9         366         Upper           0         367         Wenou           1         368         Westv           2         369         Wood           3         370         Wood           4         371         Woods           5         464         Quinto           6         480         Oldman           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	as Grove Borough Isville Township Igrove Township an Borough h Harrison Township desboro Borough er Pittsgrove Township	0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0	0.00 0.00 0.00 0.00 0.00	4.00 1.92 0.00 0.73 0.00	1.96 0.63 0.00 0.74	13 Penns Grove Borough 14 Pennsville Township 15 Pilesgrove Township 16 Pitman Borough	2.76 1.17 0.00
3         359         Penns           4         360         Penns           5         361         Pilesg           6         362         Pitman           7         364         South           8         365         Swede           9         366         Upper           0         367         Wenou           1         368         Westv           2         369         Wood           4         371         Woods           5         464         Quinto           6         480         Oldman           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	as Grove Borough Isville Township Igrove Township an Borough h Harrison Township desboro Borough er Pittsgrove Township	0 0 0 0 0 0	0 0 0 0 0 0	0.00 0.00 0.00 0.00 0.00	4.00 1.92 0.00 0.73 0.00	1.96 0.63 0.00 0.74	13 Penns Grove Borough 14 Pennsville Township 15 Pilesgrove Township 16 Pitman Borough	2.76 1.17 0.00
4         360         Penns           5         361         Pilesg           6         362         Pitman           7         364         South           8         365         Swede           9         366         Upper           0         367         Wenou           1         368         Westv           2         369         Wood           4         371         Woods           5         464         Quinto           6         480         Oldman           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	sville Township grove Township an Borough h Harrison Township desboro Borough er Pittsgrove Township	0 0 0 0 0 0	0 0 0 0 0	0.00 0.00 0.00 0.00	1.92 0.00 0.73 0.00	0.63 0.00 0.74	14 Pennsville Township 15 Pilesgrove Township 16 Pitman Borough	1.17 0.00
5         361         Pilesg           6         362         Pitman           7         364         South           8         365         Swede           9         366         Upper           0         367         Wenor           1         368         Westv           2         369         Wood           3         370         Wood           4         371         Woolv           5         464         Quinto           6         480         Oldmar           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	grove Township an Borough h Harrison Township desboro Borough er Pittsgrove Township	0 0 0 0	0 0 0	0.00 0.00	0.73 0.00	0.74	15 Pilesgrove Township 16 Pitman Borough	0.00
6         362         Pitman           7         364         South           8         365         Swede           9         366         Upper           0         367         Wenou           1         368         Westv           2         369         Wood           3         370         Wood           4         371         Woods           5         464         Quinto           6         480         Oldmar           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	an Borough h Harrison Township desboro Borough er Pittsgrove Township	0 0 0	0 0 0	0.00 0.00	0.73 0.00	0.74	16 Pitman Borough	
7         364         South           8         365         Swede           9         366         Upper           0         367         Wenor           1         368         Westv           2         369         Wood           3         370         Wood           4         371         Woods           5         464         Quinto           6         480         Oldmar           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	h Harrison Township desboro Borough er Pittsgrove Township	0	0	0.00	0.00		0	
8         365         Swede           9         366         Upper           0         367         Weno           1         368         Westv           2         369         Wood           3         370         Wood           4         371         Wools           5         464         Quinto           6         480         Oldmar           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	desboro Borough er Pittsgrove Township	0					17 South Harrison Township	0.00
9         366         Upper           0         367         Wenor           1         368         Westv           2         369         Wood           3         370         Wood           4         371         Woolv           5         464         Quinto           6         480         Oldmar           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	er Pittsgrove Township				0.00	0.00	18 Swedesboro Borough	0.00
0         367         Wenor           1         368         Westv           2         369         Wood           3         370         Wood           4         371         Woolv           5         464         Quinto           6         480         Oldma           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower		-	0	0.00	0.00	2.20	19 Upper Pittsgrove Township	1.11
1         368         Westw           2         369         Wood           3         370         Wood           4         371         Woolw           5         464         Quinto           6         480         Oldmar           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower		0	0	0.00	0.00	0.00	20 Wenonah Borough	0.00
2         369         Wood           3         370         Wood           4         371         Woolv           5         464         Quinto           6         480         Oldma           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	tville Borough	0	0	0.00	1.35	0.00	21 Westville Borough	0.60
3         370         Wood           4         371         Wood           5         464         Quinto           6         480         Oldma           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	dbury Heights Borough	0	0	0.00	0.00	1.96	22 Woodbury Heights Borough	0.94
4         371         Woolv           5         464         Quinto           6         480         Oldma           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	dstown Borough	0	0	0.00	***	0.00	23 Woodstown Borough	0.00
5         464         Quinto           6         480         Oldma           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	lwich Township	0	0	0.00	0.00	0.00	24 Woolwich Township	0.00
6         480         Oldma           7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	ton Township	0	0	0.00	2.56	2.27	25 Quinton Township	2.24
7         528         Frankl           8         529         Shiloh           9         603         Manni           0         640         Lower	nans Township	0	0	0.00	0.00	0.00	26 Oldmans Township	0.00
8         529         Shiloh           9         603         Manni           0         640         Lower	•	0	0	0.00	1.67	0.82	20 Franklin Township	1.14
9 603 Manni 0 640 Lower	1	0	0	0.00	0.00	0.00	28 Shiloh Borough	0.00
0 640 Lower	nington Township	0	0	0.00	0.00	0.00	29 Mannington Township	0.00
	er Alloways Creek Township	0	0	0.00	0.00	1.74	30 Lower Alloways Creek Townsh	0.84
	iboro Township	0	0	0.00	0.00	0.00	31 Elsinboro Township	0.04
	t Deptford Township	0	0	0.00	0.61	1.18	32 West Deptford Township	0.83
	ewell Township	0	0	0.00	0.00	0.00	33 Hopewell Township	0.00
1	onal Park Borough	0	0	0.00	0.00	***	34 National Park Borough	0.00
	hington Township	1	1	2.80	0.91	1.78	35 Washington Township	1.46
6 463 Deptfo	° 1	0	1	3.49	2.75	2.86	36 Deptford Township	2.86
1	TOTA TOWNSHID	0	1	4.94	3.38	5.67	37 Woodbury City	4.58
		0	1	6.63	3.39	2.37	38 Clayton Borough	4.38 3.19
9 660 Vinela	odbury City	0	1	0.00	0.07	2007	39 Vineland City	0.00
. 000 viller	dbury City ton Borough	0 ** 0	0					0.00

Gloucester, Salem, Cumberland Counties Municipal JIF JOINT INSURANCE FUND 2024 LOST TIME ACCIDENT FREQUENCY EXCLUDING SIR MEMBERS/ EXCLUDING COVID CLAIMS

Frequency = ((Y.T.D. LOST TIME ACCIDENT \* 200,000) / ADJUSTED HOURS WORKED) \* Member does not participate in the FUND for Workers' Comp coverage

\*\* Member has a higher Self Insured Retention for Workers' Comp and is EXCLUDED from this report

\*\*\* MEMBER WAS NOT ACTIVE FOR THIS FUND YEAR

2023 Loss Time Accident Frequency as of

February 28, 2023

0.72

# 2024 LOST TIME ACCIDENT FREQUENCY ALL JIFS EXCLUDING SIR MEMBERS/ EXCLUDING COVID CLAIMS

	2024	2023	2022	TOTAL
	LOST TIME	LOST TIME	LOST TIME	RATE *
FUND	FREQUENCY	FREQUENCY	FREQUENCY	2024 - 2022
Monmouth County	0.00	0.60	1.02	0.74
Ocean County	0.10	1.39	1.42	1.30
Bergen County	0.23	1.40	1.57	1.38
Morris County	0.25	1.58	1.22	1.31
Burlington County Municipal JI	0.29	1.25	1.43	1.26
Suburban Metro	0.41	1.34	1.66	1.41
South Bergen County	0.48	2.44	2.37	2.26
Central New Jersey	0.57	2.09	2.21	2.01
Suburban Municipal	0.61	1.23	1.26	1.19
Professional Municipal Manage	0.68	1.83	1.74	1.70
NJ Public Housing Authority	0.68	1.58	2.01	1.71
Gloucester, Salem, Cumberland	0.75	1.38	1.38	1.33
NJ Utility Authorities	1.32	1.55	1.42	1.47
Atlantic County Municipal JIF	1.33	2.07	2.20	2.08
Camden County	1.66	1.14	1.52	1.36
AVERAGE	0.62	1.52	1.63	1.50

#### February 29, 2024

 $\ast$  NOTE : lost days may include claims with reserves - where claimant may not yet have had lost time

# Conner Strong - Report by Insured Copy

COIID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
4LOFB	Gloucester, Salem, Cumberland JIF	Township of South Harrison	Township of South Harrison	664 Harrisonville Road		Mullica Hill	LN	08062	Crime,Crime,Statutor y Bond		
									Statutory Bond,Crime,Crime	03/11/2024	Evidence of insurance as respects to Statutory Bond coverage for Victoria Holmstrom - Tax Collector, effective 08/26/2013 and CFO/Treasurer, effective 01/01/2024.
4LWF3	Gloucester, Salem, Cumberland JIF	City of Vineland	Berryman's Branch		1616 Pennsylvania Avenue	Vineland	Γ	08361	Excess Liability,Commercial General Liability,Public Officials Liability,Automobile Liability,Property,Wo rkers Compensation and Employers' Liability	02/28/2024	RE: Water Utility Service Hometown America LLC, its subsidiaries and affiliates are Named Insured as respects to Vineland City providing water utility to Berryman's Branch Mobile Home Park.
4M8HH	Gloucester, Salem, Cumberland JIF	Township of Deptford	Deptford Township Board of Education	890 Bankbridge Road	Suite 100	Sewell	NJ	08080	Excess Liability,Commercial General Liability	03/07/2024	RE: Oak Valley Athletic Association The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to Oak Valley Athletic Association to use fields at Oak Valley School & Deptford Middle School from 3/4/24 through

	Borough of Swedesboro	Borough of Swedesboro	1500 Kings Hwy					( 100 10 1
			1500 Kings Hwy					6/28/24.
				Swedesboro	IJ	Crime,Crime,Statutor y Bond	03/22/2024	Evidence of insurance as respects to Statutory Bond coverage for Mark Godfrey - Tax Collector, effective 12/01/2021; and Tracy Dubbs - Treasurer, effective 03/18/2024.
						Crime,Statutory Bond,Crime	03/22/2024	
OE Gloucester, Salem, Cumberland JIF	Borough of Clayton	Enterprise FM Trust	PO Box 16805	St Louis	MO	Automobile Liability,Commercial General Liability,Property,Wo rkers Compensation and Employers' Liability,Excess Liability	02/26/2024	RE: Lease Agreement for 3 Vehicles Enterprise FM Trust, PO Box 16805 St Louis MO 16805 is an Additional Insured on the above-referenced Commercial General Liability, Automobile Liability and Excess Liability Policies and Loss Payee on the Property Policy regarding Physical Damage coverage for leased vehicles required by written contract as respects to Lease Agreement for 3 Vehicles. Insured on the above- referenced Commercial General Liability, Automobile Liability, Automobile Liability and Excess Liability Policies and Loss Payee on the Property Policy regarding Physical

COLID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
											Damage coverage for leased vehicles required by written contract as respects to Lease Agreement for 3 Vehicles.
G2TPT	Gloucester, Salem, Cumberland JIF	Borough of Paulsboro	Borough of Paulsboro	1211 Delaware Avenue		Paulsboro	NJ	08066	Crime,Crime,Statutor y Bond	03/14/2024	Evidence of insurance as respects to Statutory Bond coverage for Susan Jacobucci - CFO/Treasurer, effective 02/02/2022; Temple McBride - Utility Collector, effective 04/18/2019; and Mackenzi Kelly - Tax Collector, effective 02/01/2024.
									Crime,Statutory Bond,Crime	03/14/2024	
ΟΤQ8G	Gloucester, Salem, Cumberland JIF		Cumberland Regional High School	90 Silver Lake Road		Bridgeton	NJ	08302		03/04/2024	RE: Use of Premises- Basketball The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to use of premises for basketball activities during the current calendar year.
OU0FZ	Gloucester, Salem, Cumberland JIF	Township of West Deptford	Freedom Ammo	700 Crown Point Road		Thorofare	NJ	08086	Workers Compensation and Employers' Liability,Excess	03/12/2024	RE: Police Department Training The Certificate

COLID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address		Cert Holder - City	Cert Holder - State	Cert Holder - Postal	Policy Type	Date of Last Share	Description of
					2				Liability,Commercial General Liability	Date	OperationsHolder is anAdditional Insured onthe above-referencedCommercial GeneralLiability and ExcessLiability Policies ifrequired by writtencontract as respect tothe West DeptfordPolice Department'sparticipation intraining for annualhandgunqualifications.
P5H6M	Gloucester, Salem, Cumberland JIF	Borough of Swedesboro	Gloucester County Board of County Commissioners	Its Departments and Agencies	Attn: Highway Permit Department	PO Box 337, Woodbury	NJ		Workers Compensation and Employers' Liability,Commercial General Liability,Automobile Liability,Excess Liability	03/08/2024	RE: Coin Drops The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to coin drops being held on County roads by the Woolwich Fire Company during the current calendar year.
P61GL	Gloucester, Salem, Cumberland JIF	Township of Hopewell (T)	Cumberland County Department of Health	309 Buck Street		Millville	NJ		Commercial General Liability,Excess Liability,Workers Compensation and Employers' Liability	02/26/2024	RE: Rabies Clinic The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to the Rabies Clinic.

COIID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
	Gloucester, Salem, Cumberland JIF	Township of Greenwich (T)	Clonmell United Methodist Church	516 W. Broad Street		Gibbstown	NJ		Excess Liability,Commercial General Liability,Property	03/18/2024	RE: Use of Premises The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to use of premises/parking lot as a bus stop by the Township's Shuttle Bus.
	Gloucester, Salem, Cumberland JIF	Township of Harrison	Harrison Township Active Adults	114 Bridgeton Pike		Mullica Hill	ΓN		Workers Compensation and Employers' Liability,Commercial General Liability,Automobile Liability,Excess Liability	03/19/2024	Evidence of Insurance
	Gloucester, Salem, Cumberland JIF	City of Vineland	Cumberland Mall Realty Holding, LLC	3849 S. Delsea Drive		Vineland	U		Workers Compensation and Employers' Liability,Excess Liability,Commercial General Liability	03/22/2024	RE: Use of Premises The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to hosting tables at the Cumberland Mall during the current calendar year.
	Gloucester, Salem, Cumberland JIF	Township of Greenwich (T)	County of Gloucester	2 South Broadway	2nd Floor	Woodbury	IJ		Property,Excess Liability,Commercial General Liability	03/18/2024	RE: Mini Excavator The Certificate Holder is an

COIID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
											Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to use of the County's mini excavator.
Y8CYK	Gloucester, Salem, Cumberland JIF	City of Vineland	Cumberland Mall Realty Holding, LLC	3849 S. Delsea Drive		Vineland	NJ		Commercial General Liability,Workers Compensation and Employers' Liability,Excess Liability	02/28/2024	RE: College & Career Night Event The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to the Vineland Police's participation in a Special Event - College & Career Night at the Cumberland Mall
											30 Days Notice of Cancellation

#### TRI-COUNTY MUNICIPAL FUND FINANCIAL FAST TRACK REPORT AS OF December 31, 2023

		THIS MONTH	ΥΤΟ	PRIOR YEAR END	FUND BALANCE
1.	UNDERWRITING INCOME	1,546,102	17,953,419	289,746,194	307,699,613
2.	CLAIM EXPENSES				
	Paid Claims	687,589	5,768,988	110,539,721	116,308,709
	Case Reserves	(551,954)	(935,287)	9,570,039	8,634,752
	IBNR	(139,683)	1,974,915	5,135,819	7,110,734
	Recoveries	(14)	(3,995)	(193,094)	(197,088)
	TOTAL CLAIMS	(4,062)	6,804,621	125,052,485	131,857,107
3.	EXPENSES				
	Excess Premiums	460,163	5,966,479	81,734,889	87,701,368
	Administrative	402,494	3,259,474	53,552,167	56,811,641
	TOTAL EXPENSES	862,657	9,225,953	135,287,057	144,513,010
4.	UNDERWRITING PROFIT (1-2-3)	687,506	1,922,844	29,406,653	31,329,497
5.	INVESTMENT INCOME	384,500	1,450,010	8,536,663	9,986,672
6.	DIVIDEND INCOME	100,963	100,963	1,166,706	1,267,669
7.	STATUTORY PROFIT (4+5+6)	1,172,970	3,473,817	39,110,021	42,583,838
8.	DIVIDEND	100,963	1,700,963	24,560,248	26,261,211
9	RCF & MEL Additional Assessments	60,467	60,467	2,831,860	2,892,327
10	STATUTORY SURPLUS (7-8-9)	1,011,540	1,712,387	11,717,913	13,430,300

	SURPLUS (DEFICITS)	BY FUND YEAR		
Closed	210,147	(886,193)	11,425,888	10,539,695
MEL Unencumbered Surplus Account	121,226	163,904	540,026	703,930
2020	13,630	630,984	71,232	702,216
2021	137,891	66,689	(133,422)	(66,733)
2022	293,115	1,152,720	(185,812)	966,907
2023	235,530	584,283		584,283
TOTAL SURPLUS (DEFICITS)	1,011,540	1,712,387	11,717,912	13,430,299
TOTAL CASH				31,028,610

	CLAIM ANALYSIS BY	FUND YEAR		
TOTAL CLOSED YEAR CLAIMS	(103,173)	(79,223)	104,443,659	104,364,4
FUND YEAR 2020				
Paid Claims	37,385	358,667	4,985,660	5,344,3
Case Reserves	(22,028)	(685,067)	1,383,394	698,3
IBNR	(10,366)	(224,377)	492,703	268,3
Recoveries	(14)	(3,995)	(193,094)	(197,0
TOTAL FY 2020 CLAIMS	4,978	(554,772)	6,668,664	6,113,8
FUND YEAR 2021				
Paid Claims	43,373	667,073	3,728,080	4,395,3
Case Reserves	(10,477)	(6,315)	2,064,489	2,058,
IBNR	(33,886)	(501,014)	1,034,000	532,
Recoveries	-	0	0	
TOTAL FY 2021 CLAIMS	(990)	159,744	6,826,569	6,986,
FUND YEAR 2022				
Paid Claims	36,519	1,144,226	1,793,587	2,937,
Case Reserves	(21,753)	(397,899)	1,896,115	1,498,
IBNR	(155,953)	(1,571,009)	3,423,892	1,852,
Recoveries	-	0	0	
TOTAL FY 2022 CLAIMS	(141,188)	(824,683)	7,113,594	6,288,
FUND YEAR 2023				
Paid Claims	241,386	2,352,533		2,352,
Case Reserves	(93,291)	1,408,148		1,408,
IBNR	88,216	4,342,874		4,342,
Recoveries	-	0		
TOTAL FY 2023 CLAIMS	236,311	8,103,555		8,103,
MBINED TOTAL CLAIMS	(4,062)	6,804,621	125,052,485	131,857,1

Fund Year 2020 Claims reflect anticipated recoverable amounts from the MEL of \$268,338 (Paid: \$197,088, Reserves: \$71,250)

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#### TRI-COUNTY MUNICIPAL FUND FINANCIAL FAST TRACK REPORT AS OF February 29, 2024

	THIS MONTH	YTD	PRIOR YEAR END	FUND BALANCE
1. UNDERWRITING INCOME	1,585,468	3,170,935	307,699,613	310,870,548
2. CLAIM EXPENSES				
Paid Claims	250,367	467,381	116,308,709	116,776,090
Case Reserves	388,030	872,379	8,634,752	9,507,131
IBNR	(57,801)	(170,426)	7,110,734	6,940,308
Recoveries		(3,467)	(197,088)	(200,555)
TOTAL CLAIMS	580,595	1,165,868	131,857,107	133,022,974
3. EXPENSES				
Excess Premiums	589,849	1,179,697	87,701,368	88,881,065
Administrative	303,892	544,797	56,811,641	57,356,438
TOTAL EXPENSES	893,741	1,724,494	144,513,010	146,237,503
4. UNDERWRITING PROFIT (1-2-3)	111,132	280,574	31,329,497	31,610,071
5. INVESTMENT INCOME	(206,039)	148,194	11,500,874	11,649,068
6. DIVIDEND INCOME	0	0	1,267,669	1,267,669
7. STATUTORY PROFIT (4+5+6)	(94,907)	428,768	44,098,040	44,526,808
8. DIVIDEND	0	0	26,261,211	26,261,211
9 RCF & MEL Additional Assessments	0	0	2,892,327	2,892,327
10. STATUTORY SURPLUS (7-8-9)	(94,907)	428,768	14,944,502	15,373,270
11. Unrealized Gain (Loss)	(145,193)	(110,029)	(1,514,202)	(1,624,231)
12. GAAP SURPLUS (w/o Investment in Joir	(240,100)	318,738	13,430,300	13,749,039

	SURPLUS (DEFICITS)	BY FUND YEAR		
Closed	(26,723)	17,798	10,539,695	10,557,493
MEL Unencumbered Surplus Account	(3,173)	2,242	703,930	706,172
2020	(3,068)	2,172	702,216	704,388
2021	(4,807)	3,569	(66,733)	(63,164)
2022	(8,662)	6,173	966,907	973,080
2023	(12,927)	9,628	584,283	593,911
2024	102,986	277,158		277,158
TOTAL SURPLUS (DEFICITS)	43,625	318,738	13,430,299	13,749,038
TOTAL CASH				35,761,256

<b>CI ΔΙΜ</b>	ANALYSIS	<b>BY FUND</b>	YFAR
CLAIN		0110100	1671

TOTAL CLOSED YEAR CLAIMS	53	4,783	104,364,437	104,369,
FUND YEAR 2020				
Paid Claims	54,890	64,777	5,344,327	5,409,
Case Reserves	98,097	136,292	698,327	834,
IBNR	(152,987)	(197,602)	268,326	70,
Recoveries	-	(3,467)	(197,088)	(200,
TOTAL FY 2020 CLAIMS	0	0	6,113,891	6,113
FUND YEAR 2021				
Paid Claims	29,485	80,878	4,395,153	4,476
Case Reserves	(26,162)	122,071	2,058,174	2,180
IBNR	(3,324)	(202,948)	532,986	330
Recoveries	-	0	0	
TOTAL FY 2021 CLAIMS	0	(0)	6,986,313	6,986
FUND YEAR 2022				
Paid Claims	53,921	70,216	2,937,813	3,008
Case Reserves	(118,914)	(102,876)	1,498,215	1,395
IBNR	64,993	32,660	1,852,883	1,885
Recoveries	-	0	0	
TOTAL FY 2022 CLAIMS	0	0	6,288,911	6,288
FUND YEAR 2023				
Paid Claims	52,877	184,731	2,352,533	2,537
Case Reserves	180,447	362,620	1,408,148	1,770
IBNR	(233,325)	(547,351)	4,342,874	3,795
Recoveries	-	0	0	
TOTAL FY 2023 CLAIMS	0	0	8,103,555	8,103
FUND YEAR 2024				
Paid Claims	59,140	61,997		61
Case Reserves	254,561	354,273		354
IBNR	266,842	744,816		744
Recoveries		0		
TOTAL FY 2024 CLAIMS	580,543	1,161,085		1,161
MBINED TOTAL CLAIMS	580,595	1,165,868	131,857,107	133,022,9

This report is based upon information which has not been audited nor certified by an actuary and as such may not truly represent the condition of the fund. Fund Year 2020 Claims reflect anticipated recoverable amount from the MEL of \$248,017 (Paid: \$200,555, Reserves: \$47,462)

# Gloucester, Salem, Cumberland Counties Municipal Joint Insurance Fund

# Monthly Regulatory Filing Check List

# Fund Year 2024 for the Month of March

ITEM	FILING STATUS
Meeting Minutes	4/23/24
Bylaws Amendments	N/A
Risk Management Program Changes	N/A
New Member Filings	N/A
Supplemental Assessments/Contributions	N/A
Budget Amendments (transfers, etc.)	N/A
Surplus Distribution (refunds/dividends)	N/A
Changes/Amendments/Additions to Service Providers	N/A
Executive Committee Changes	N/A

#### Gloucester, Salem, Cumberland Counties Municipal Joint Insurance Fund <u>Annual</u> Regulatory Filing Check List Year: January 1, 2024 – December 31, 2024

ITEM	FILING STATUS
Ethics Filings (Notification to FG's and Prof's)	4/3/24
Renewal Resolutions and Indemnity & Trust Agreements	
Budget and Actuarial Certification/Opinion Letter	1/6/24
Annual Assessments/Contributions	1/6/24
Supplemental Assessments/Contributions	
Risk Management Program	1/24/24
Annual Certified Audit	
List of Fund Commissioners & Executive Committee	1/24/24
Identity of Administrator	1/24/24
Identity of Treasurer	1/24/24
Excess Insurance /Group Purchase Insurance/Reinsurance Policies	1/24/24
Member Withdrawals	
Exhibit A - Certification of JIF Fund Professionals	1/24/24
Exhibit B - Certification of JIF Data Forms	
Exhibit D - New Member Filings	
New Service Providers	1/24/24
Annual Reorganization Resolutions, including Cash Management Plan	1/24/24

Professionals	Contract	Gen Ins	Fidelity	E&O	Surety
Actuary – Actuarial Advantage	Х	1/1/25	N/A	7/16/24	N/A
Administrative Consultant PERMA	Х	12/10/24	N/A	12/10/24	N/A
Administrator - AJG	Х	10/1/24	5/1/20	10/1/24	N/A
Attorney (including Subro.) - DeWeese	Х	9/1/24	N/A	9/1/24	N/A
Asset Manager – Wilmington Trust	Х	5/1/23	JIF	5/1/23	N/A
Auditor - Bowman	Х	1/1/25	N/A	1/1/25	N/A
Claims Administrator Qual-Lynx	Х	4/29/24	4/30/22	4/29/24	12/31/18
Managed Care - QualCare	Х	4/29/24	N/A	4/29/24	N/A
Payroll Auditor - Bowman	Х	1/1/25	N/A	N/A	N/A
Property Appraiser - Assetworks	Х	9/27/24	N/A	9/27/24	N/A
Safety Director – JA Montgomery	Х	12/10/24	N/A	12/10/24	N/A
Underwriting Manager- Conner Strong	Х	12/10/24	N/A	12/10/24	N/A
Technology Risk Svcs – Wintsec	Х	4/11/24	N/A	4/11/24	N/A
Website – Joyce Media	Х	NA	NA	NA	NA
Wellness Director - Schiffer	Х	N/A	N/A	N/A	N/A
Treasurer - Tontarski	Х	N/A	5/1/18	N/A	JIF
<b>Recording Secretary</b> - Kristie	Х	N/A	N/A	N/A	N/A
Law Enforcement RMC Chris Winter	Х	3/31/24	N/A	N/A	N/A

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							Gloucester,			nties Munici ve Program		rance Fund								
		1		-						-		_			_				-	<u> </u>
Member	<i>a</i> :	Opening	"Bonus" SIP	Jan	Feb	March	April	May	June	July	August	Sept.	October	Nov.	Dec.	Paid	Total	Ending	Date	Award
Municipality	Size	Balance	Funds	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2025	Paid	Balance	Encumber	Lunch
Carneys Point Township	M	3,200.00	1,000.00				4,200.00										4,200.00	0.00		N/A
Clayton Borough	M	3,200.00	1,000.00				4,200.00										4,200.00	0.00		N/A
Deptford Township	XL	4,500.00	750.00														0.00	5,250.00		N/A
Elk Township	S	2,500.00	500.00				3,000.00										3,000.00	0.00		N/A
Elsinboro Township	XS	2,000.00	750.00														0.00	2,750.00		N/A
Fairfield Township	S	2,500.00	500.00				3,000.00										3,000.00	0.00		N/A
Franklin Township	L	3,800.00	500.00				4,300.00										4,300.00	0.00		N/A
Glassboro Borough	XL	4,500.00	750.00				5,250.00										5,250.00	0.00		
Greenwich Township	M	3,200.00	750.00				3,950.00										3,950.00	0.00		N/A
Harrison Township	М	3,200.00	250.00				3,450.00										3,450.00	0.00		
Hopewell Township	S	2,500.00	500.00														0.00	3,000.00		N/A
Logan Township	M	3,200.00	750.00														0.00	3,950.00		N/A
Lower Alloways Creek T	S	2,500.00	500.00														0.00	3,000.00		N/A
Mannington Township	XS	2,000.00	250.00				2,250.00										2,250.00	0.00		N/A
Mantua Township	L	3,800.00	250.00				4,050.00										4,050.00	0.00		N/A
Monroe Township	XL	4,500.00	750.00				5,250.00										5,250.00	0.00		N/A
National Park Borough	XS	2,000.00	1,000.00														0.00	3,000.00		N/A
Oldmans Township	XS	2,000.00	1,000.00														0.00	3,000.00		N/A
Paulsboro Borough	M	3,200.00	500.00														0.00	3,700.00		N/A
Penns Grove Borough	M	3,200.00	750.00				3,950.00										3,950.00	0.00		N/A
Pennsville Township	L	3,800.00	500.00				4,300.00										4,300.00	0.00		N/A
Pilesgrove Township	XS	2,000.00	500.00				2,500.00										2,500.00	0.00		N/A
Pitman Borough	L	3,800.00	1,000.00				4,800.00										4,800.00	0.00		N/A
Quinton Township	XS	2,000.00	750.00				2,750.00										2,750.00	0.00		N/A
Shiloh Borough	XS	2,000.00	0.00														0.00	2,000.00		N/A
South Harrison Township	XS	2,000.00	1,000.00				3,000.00										3,000.00	0.00		N/A
Swedesboro Borough	S	2,500.00	750.00														0.00	3,250.00		N/A
Upper Pittsgrove Townsh	XS	2.000.00	250.00				2,250.00										2.250.00	0.00		N/A
Vineland City	XL	4,500.00	1.000.00				,						l				0.00	5,500.00		N/A
Washington Township	XL	4,500.00	1,000.00				5,500.00								1		5,500.00	0.00		N/A
Wenonah Borough	XS	2.000.00	500.00				2,500.00								1		2,500.00	0.00		N/A
West Deptford Townshin	XL	4,500.00	750.00				5,250.00										5.250.00	0.00		N/A
Westville Borough	M	3,200.00	1.000.00				.,						l				0.00	4,200,00		N/A
Woodbury City	L	3,800.00	1,000.00				1 1								1		0.00	4,800.00		N/A
Woodbury Heights Boro	M	3,200.00	500.00														0.00	3,700.00		N/A
Woolwich Township	M	3,200.00	750.00														0.00	3,950.00		
Total By Line	141	110,500.00	24.250.00	0.00	0.00	0.00	79,700.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	79,700.00	55.050.00	1	<u> </u>

					Glo	ucester, Sal		and Countie Optional Sat	-	Joint Insura	nce Fund						
Member	Opening	Jan	Feb	March	April	May	June	July	August	Sept.	Oct.	Nov.	Dec.	Paid	Total YTD	Remaining	Date
Municipality	Balance	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2025	Expenses	Balance	Encumbered
Carneys Point Township	2,500.00														0.00	2,500.00	
Clayton Borough	2,500.00														0.00	2,500.00	
Deptford Township	4,500.00														0.00	4,500.00	
Elk Township	1,500.00														0.00	1,500.00	
Elsinboro Township	750.00														0.00	750.00	
Fairfield Township	1,500.00														0.00	1,500.00	
Franklin Township	3,500.00														0.00	3,500.00	
Glassboro Borough	4,500.00														0.00	4,500.00	
Greenwich Township	3,500.00														0.00	3,500.00	
Harrison Township	2,500.00														0.00	2,500.00	
Hopewell Township	1,500.00														0.00	1,500.00	
Logan Township	2,500.00														0.00	2,500.00	
Lower Alloways Creek Townsl	2,500.00			557.50											557.50	1,942.50	
Mannington Township	750.00														0.00	750.00	
Mantua Township	3,500.00														0.00	3,500.00	
Monroe Township	4,500.00														0.00	4,500.00	
National Park Borough	1,500.00														0.00	1,500.00	
Oldmans Township	750.00														0.00	750.00	
Paulsboro Borough	3,500.00														0.00	3,500.00	
Penns Grove Borough	3,500.00														0.00	3,500.00	
Pennsville Township	3,500.00														0.00	3,500.00	
Pilesgrove Township	750.00														0.00	750.00	
Pitman Borough	3,500.00														0.00	3,500.00	
Quinton Township	750.00														0.00	750.00	04/09/24
Shiloh Borough	750.00														0.00	750.00	
South Harrison Township	750.00														0.00	750.00	
Swedesboro Borough	1,500.00														0.00	1,500.00	
Upper Pittsgrove Township	750.00														0.00	750.00	
Vineland City	2,500.00														0.00	2,500.00	
Washington Township	4,500.00														0.00	4,500.00	
Wenonah Borough	1,500.00														0.00	1,500.00	
West Deptford Township	4,500.00														0.00	4,500.00	
Westville Borough	2,500.00														0.00	2,500.00	
Woodbury City	3,500.00														0.00	3,500.00	
Woodbury Heights Borough	2,500.00														0.00	2,500.00	
Woolwich Township	1,500.00														0.00	1,500.00	
Total By Line	\$87,000.00	\$0.00	\$0.00	\$557.50	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$557.50	86,442.50	

					Glo	ucester, Sale	em, Cumberl 2024 We		es Municipal ntive Progra		ance Fund						
Member	Opening	Jan	Feb	March	April	May	June	July	August	Sept.	Oct.	Nov.	Dec.	Paid	Total YTD	Ending	Date
Municipality	Balance	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2025	Expenses	Balance	Encumbered
Carneys Point Township	1,000.00														0.00	1,000.00	
Clayton Borough	1,000.00														0.00	1,000.00	
Deptford Township	1,500.00														0.00	1,500.00	
Elk Township	750.00														0.00	750.00	
Elsinboro Township	500.00														0.00	500.00	
Fairfield Township	750.00														0.00	750.00	
Franklin Township	1,250.00														0.00	1,250.00	
Glassboro Borough	1,500.00														0.00	1,500.00	
Greenwich Township	1,000.00														0.00	1,000.00	
Harrison Township	1,000.00														0.00	1,000.00	
Hopewell Township	750.00														0.00	750.00	
Logan Township	1,000.00														0.00	1,000.00	
Lower Alloways Creek To	1,000.00														0.00	1,000.00	
Mannington Township	500.00														0.00	500.00	
Mantua Township	1,250.00														0.00	1,250.00	
Monroe Township	1,500.00														0.00	1,500.00	
National Park Borough	500.00														0.00	500.00	
Oldmans Township	500.00														0.00	500.00	
Paulsboro Borough	1,000.00														0.00	1,000.00	
Penns Grove Borough	1,250.00														0.00	1,250.00	
Pennsville Township	1,250.00														0.00	1,250.00	
Pilesgrove Township	500.00		38.98		235.03										274.01	225.99	
Pitman Borough	1,250.00				85.55										85.55	1,164.45	
Quinton Township	500.00														0.00	500.00	04/09/24
Shiloh Borough	500.00														0.00	500.00	
South Harrison Township	500.00														0.00	500.00	
Swedesboro Borough	750.00														0.00	750.00	
Upper Pittsgrove Township	500.00														0.00	500.00	
Vineland City	1,500.00														0.00	1,500.00	
Washington Township	1,500.00														0.00	1,500.00	
Wenonah Borough	750.00														0.00	750.00	
West Deptford Township	1,500.00														0.00	1,500.00	
Westville Borough	1,000.00														0.00	1,000.00	
Woodbury City	1,250.00														0.00	1,250.00	
Woodbury Heights Boroug	1,000.00														0.00	1,000.00	
Woolwich Township	1,000.00														0.00	1,000.00	
Total By Line	\$34,750.00	\$0.00	\$38.98	\$0.00	\$320.58	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$359.56	\$34,390.44	

				Glouces	ster, Salen	n, Cumber	land Cour	ties Muni	icipal Join	t Insuranc	e Fund						
					20	024 EPL/C	yber Risk	Managen	nent Budg	jet							
Member	Opening	Jan	Feb	March	April	May	June	July	August	September	October	November	December	Paid in	Total YTD	Ending	Date
Municipality	Balance	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2025	Expenses	Balance	Encumbered
Carneys Point Township	2,000.00														0.00	2,000.00	
Clayton Borough	2,000.00														0.00	2,000.00	
Deptford Township	3,000.00														0.00	3,000.00	
Elk Township	1,500.00														0.00	1,500.00	
Elsinboro Township	1,000.00														0.00	1,000.00	
Fairfield Township	1,500.00														0.00	1,500.00	
Franklin Township	2,500.00			2,500.00											2,500.00	0.00	
Glassboro Borough	3,000.00														0.00	3,000.00	
Greenwich Township	2,000.00														0.00	2,000.00	
Harrison Township	2,000.00														0.00	2,000.00	
Hopewell Township	1,500.00														0.00	1,500.00	
Logan Township	2,000.00														0.00	2,000.00	
Lower Alloways Creek Toy	2,000.00														0.00	2,000.00	
Mannington Township	1,000.00														0.00	1,000.00	
Mantua Township	2,500.00														0.00	2,500.00	
Monroe Township	3,000.00														0.00	3,000.00	
National Park Borough	1,500.00														0.00	1,500.00	
Oldmans Township	1,000.00														0.00	1,000.00	
Paulsboro Borough	2,000.00														0.00	2,000.00	
Penns Grove Borough	2,500.00														0.00	2,500.00	
Pennsville Township	2,500.00														0.00	2,500.00	
Pilesgrove Township	1,000.00														0.00	1,000.00	
Pitman Borough	2,500.00				2,500.00										2,500.00	0.00	
Quinton Township	1,000.00														0.00	1,000.00	4/9/2024
Shiloh Borough	500.00														0.00	500.00	
South Harrison Township	1,000.00														0.00	1,000.00	
Swedesboro Borough	1,500.00														0.00	1,500.00	
Upper Pittsgrove Township	1,000.00														0.00	1,000.00	
Vineland City	3,000.00														0.00	3,000.00	
Washington Township	3,000.00														0.00	3,000.00	
Wenonah Borough	1,500.00														0.00	1,500.00	
West Deptford Township	3,000.00														0.00	3,000.00	
Westville Borough	2,000.00														0.00	2,000.00	
Woodbury City	2,500.00														0.00	2,500.00	
Woodbury Heights Boroug	2,000.00														0.00	2,000.00	
Woolwich Township	2,000.00														0.00	2,000.00	
Total By Line	69,500.00	0.00	0.00	2,500.00	2,500.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,000.00	64,500.00	

Data Valued As of :			April 3, 2024	ĺ				
	Ľ	'						
Total Participating Members	$\downarrow$	<u> </u> '	36	l		<u> </u>	]	<b> </b>
Complaint	₽	<u> </u> '	34	<b> </b>				<u> </u>
Percent Compliant	+	<b>├───</b> ┦	<b>34</b> 94.44%		+	+		
reiden dompnam	++				+	+		<u> </u>
		[]	[]					
	Ľ	<u>↓</u> '	<u> </u>	01/01/24		Ţ	2024	 
		Checklist	Compliant	EPL			POL	Co-Insurance
Member Name	*	Submitted	Compliant	Deductible	+		POL	01/01/24
CARNEYS POINT	₽	Yes	Yes	\$ 20,000	-	S	20,000	0%
CARNEYS POINT CLAYTON	₽	Yes	Yes	\$ 20,000 \$ 20,000		ծ \$	20,000	20% of 1st 250K
DEPTFORD	₽	Yes	Yes	\$ 20,000 \$ 50,000		ֆ \$	20,000	20% of 1st 250K 20% of 1st 250K
ELK	₽	Yes	Yes	\$ 50,000 \$ 20,000		ֆ \$	20,000	20% of 1st 250K 20% of 1st 100K
ELSINBORO	$\left  + \right $	Yes	Yes	\$ 20,000 \$ 20,000		ֆ \$	20,000	20% of 1st 100K
FAIRFIELD TOWNSHIP T	₽	Yes	Yes	\$ 20,000 \$ 2,500		э \$	20,000	0%
FRANKLIN TOWNSHIP T	₽	Yes	Yes	\$ 2,500 \$ 75,000		э \$	2,500	20% of 1st 250K
GLASSBORO	₽	Yes	Yes	\$ 75,000		э \$	20,000	20% of 1st 250K
GREENWICH	H	Yes	Yes	\$ 20,000		φ \$	20,000	20% of 1st 250K
HARRISON	H	Yes	Yes	\$ 20,000 \$ 15,000		φ \$	20,000	0%
HOPEWELL TOWNSHIP	$\downarrow \downarrow$	Yes	Yes	\$ 15,000		φ \$	5,000	0%
LOGAN	Ħ	Yes	Yes	\$ 20,000		\$	20,000	0%
LOWER ALLOWAYS CREEK	Ħ	Yes	Yes	\$ 20,000		\$	20,000	20% of 1st 100K
MANNINGTON TOWNSHIP	Ħ	Yes	Yes	\$ 20,000		\$	20,000	20% of 1st 250K
MANTUA	Ħ	Yes	Yes	\$ 20,000		\$	20,000	0%
MONROE	Ħ	Yes	Yes	\$ 50,000		\$	50,000	20% of 1st 250K
NATIONAL PARK BOROUGH	$\uparrow$	No	No	\$ 100,000		\$	20,000	20% of 1st 2Mil/20% of 1st 250K POL
OLDMANS	Ħ	Yes	Yes	\$ 2,500		\$	2,500	0%
PAULSBORO	Ħ	Yes	Yes	\$ 20,000		\$	20,000	20% of 1st 250K
PENNS GROVE	$\square$	Yes	Yes	\$ 20,000		\$	20,000	20% of 1st 250K
PENNSVILLE	$\square$	Yes	Yes	\$ 20,000		\$	20,000	20% of 1st 250K
PILESGROVE	$\square$	Yes	Yes	\$ 15,000		\$	15,000	0%
PITMAN	Ţ	Yes	Yes	\$ 20,000	<u> </u>	\$	20,000	20% of 1st 250K
QUINTON	Ţ	Yes	Yes	\$ 20,000		\$	20,000	0%
SHILOH	Ţ	No	No	\$ 100,000		\$	2,500	20% of 1st 2Mil for EPL/0% for POL
SOUTH HARRISON	Ţ	Yes	Yes	\$ 20,000		\$	20,000	20% of 1st 250K
SWEDESBORO BORO	⋣	Yes	Yes	\$ 10,000		\$	10,000	0%
UPPER PITTSGROVE	Ľ	Yes	Yes	\$ 20,000		\$	20,000	20% of 1st 250K
VINELAND		Yes	Yes	\$ 75,000		\$	75,000	20% of 1st 250K
WASHINGTON TOWNSHIP T	<u> </u>	Yes	Yes	\$ 50,000		\$	50,000	20% of 1st 250K
WENONAH	Ľ	Yes	Yes	\$ 2,500		\$	2,500	0%
WEST DEPTFORD	$\downarrow$	Yes	Yes	\$ 20,000		\$	20,000	20% of 1st 250K
WESTVILLE	$\downarrow$	Yes	Yes	\$ 5,000		\$	5,000	0%
WOODBURY		Yes	Yes	\$ 20,000		\$	20,000	0%
WOODBURY HEIGHTS	Ľ	Yes	Yes	\$ 2,500		\$	2,500	0%
WOOLWICH		Yes	Yes	\$ 20,000	\$50,000 Police Deductible	\$	20,000	20% of 1st 250K
	11	í '	<u>[                                    </u>	<u> </u>				 ↓

## MEL STATUTORY BONDs as of 4/3/24

Name	Applicant	:tive Statutory Bo	Bond Position 1		oval Status Posi		cond Positic	Bond Position 2	:tive Date Positi	oval Status Posi D	elete Date Pc Status
Carneys Point Township	Linda S. Jones	No	Treasurer	01/01/2007	Approved	07/01/2021					Approved
Carneys Point Township	Marie Stout	No	Tax Collector	01/01/2017	Approved	01/01/2017					Approved
Carneys Point Township	Elizabeth A. Ruhl	No	Tax Collector	01/01/2014	Approved	01/01/2017					Approved
Carneys Point Township	Jennifer Koeturius	No	Tax Collector	01/01/2018	Approved	12/31/2022					Approve
Carneys Point Township	Autumn Davis	No	Treasurer	07/01/2021	Approved	06/15/2022					Approve
Carneys Point Township	Ashley Crist	No	Treasurer	06/12/2022	Approved	08/01/2023					Approve
Carneys Point Township	Dawn Allen	Yes	Tax Collector	01/01/2023	Approved						Approve
Carneys Point Township	Bonnie Anne Kelly	Yes	Treasurer	01/01/2024	Approved						Approve
Clayton Borough	Donna M. Nestore	Yes	Tax Collector	01/01/2008	Approved		Yes	Utility Clerk	01/01/2008	Approved	Approve
Deptford Township	Nina R. Lamb	No	Library Treasurer	01/01/2009	Approved	01/01/2021					Approve
Deptford Township	Kimberly Kwasizur	Yes	Treasurer	10/22/2012	Approved						Approve
Deptford Township	Diane Kusmanick	No	Tax Collector	01/01/2013	Approved	08/31/2018					Approve
Deptford Township	Christine Greenwood	No	CFO (Assuming Treasurer Duties)	01/01/2018	Pending	10/01/2018					Pending
Deptford Township	Fotini Iliadis	No	Tax Collector	08/31/2018	Approved	08/01/2022					Approved
Deptford Township	Desiree Laning	No	Library Treasurer	01/01/2021	Approved	01/01/2022					Approved
Deptford Township	Christina Helder	No	Tax Collector	08/01/2022	Approved	09/12/2022					Approve
Deptford Township	Kathleen Diorio	Yes	Tax Collector	09/12/2022	Approved	001 101 2022					Approve
Deptford Township	Patrice D'Ottaviano	Yes	Library Treasurer	01/01/2023	Approved						Approve
Elk Township	Stephen P. Considine	Yes	Treasurer	01/01/2009	Approved						Approve
Elk Township	Susan E. Defrancesco	Yes	Tax Collector	12/13/2007	Approved						Approve
Elsinboro Township	Joanne M. Eddy	No	Tax Collector	12/31/2014	Approved	04/01/2017					Approve
Elsinboro Township	Elizabeth Clark Wallender	Yes	Tax Collector	10/16/2017	Approved	04/01/2017					Approve
Fairfield Township	Carla Smith	Yes	Tax Collector	01/01/2012							
					Approved						Approve
Fairfield Township Fairfield Township	Neil Young Lois Buttner	Yes No	CFO (Assuming Treasurer Duties) Treasurer	06/08/2017 01/01/2012	Approved	08/14/2015					Approve
					Approved						Approve
Franklin Township	Elizabeth Ruhl	No	Tax Collector	01/01/2017	Approved	08/15/2019					Approve
Franklin Township	Charles Owens	No	CFO (Assuming Treasurer Duties)	06/22/2016	Approved	04/16/2018					Approve
Franklin Township	Karen Shover	No	Library Treasurer	01/01/2014	Approved	08/31/2020					Approve
Franklin Township	Debra Fourre Stacer	No	Treasurer	01/01/2015	Approved	07/22/2016					Approve
Franklin Township	Joanna Potopchuk	No	Tax Collector	01/01/2015	Approved	01/01/2017					Approve
Franklin Township	Katie B Coleman	No	CFO (Assuming Treasurer Duties)	04/16/2018	Approved	12/31/2019					Approve
Franklin Township	Patrick Hegarty	No	Tax Collector	09/25/2019	Approved	06/11/2022					Approve
Franklin Township	Cynthia LoGuidice	No	CFO (Assuming Treasurer Duties)	12/27/2019	Approved	04/30/2021					Approve
Franklin Township	David Emmons	Yes	Library Treasurer	09/01/2020	Approved						Approve
Franklin Township	Richard Wright	No	CFO (Assuming Treasurer Duties)	08/03/2021	Approved	10/31/2021					Approve
Franklin Township	Robin Sarlo	Yes	CFO (Assuming Treasurer Duties)	09/14/2021	Approved						Approve
Franklin Township	Gina Hayes	Yes	Tax Collector	06/11/2022	Approved						Approve
Glassboro Borough	Rosemary A. Turner	No	Tax Collector	01/01/2008	Approved	05/28/2021					Approve
Glassboro Borough	Karyn Paccione	Yes	CFO (Assuming Treasurer Duties)	07/01/2011	Approved						Approve
Glassboro Borough	Mark Godfrey	Yes	Tax Collector	05/28/2021	Approved						Approve
Greenwich Township	Merrie Schmidt	No	Treasurer	01/01/2007	Approved	10/01/2021					Approve
Greenwich Township	Suzanne D. Pierce	Yes	Tax Collector	03/02/2015	Approved						Approve
Greenwich Township	Michael Kwasizur	No	CFO (Assuming Treasurer Duties)	10/01/2021	Approved	02/18/2022					Approve
Greenwich Township	Kelsey Mitchell	Yes	CFO (Assuming Treasurer Duties)	03/14/2022	Approved						Approve
Harrison Township	Maria Berkett	No	Tax Collector	07/17/2017	Approved	12/31/2019					Approve
Harrison Township	Dawn Michelle Allen	No	Tax Collector	09/10/2007	Approved	02/13/2023	Yes	Utility Clerk	09/10/2007	Approved	02/13/2023 Approve
Harrison Township	Yvonne Bullock	No	CFO (Assuming Treasurer Duties)	01/01/2007	Approved	02/23/2023					Approve
Harrison Township	Shawn Glynn	Yes	CFO (Assuming Treasurer Duties)	02/23/2023	Approved						Approve
Harrison Township	Patrick Hegarty	Yes	Tax Collector	02/13/2023	Approved						Approve
Hopewell Township	Neil Young	Yes	CFO (Assuming Treasurer Duties)	01/01/2020	Approved						Approve

## MEL STATUTORY BONDs as of 4/3/24

Name	Applicant	:tive Statutory Bo	Bond Position 1	ective Date Positio	oval Status Posi	lete Date Position	ond Positic	Bond Position 2	tive Date Positi	val Status Posi	i Delete Date Pc Status
Logan Township	Rosanne Pyle	Yes	Tax Collector	01/01/2011	Approved						Approved
Logan Township	Robert Best	No	CFO (Assuming Treasurer Duties)	12/31/2012	Approved	03/31/2017					Approved
Logan Township	William Pine	Yes	CFO (Assuming Treasurer Duties)	01/04/2017	Approved						Approved
Lower Alloways Creek Township	Dawn M. Allen	Yes	Tax Collector	01/01/2010	Approved						Approved
ower Alloways Creek Township	Kevin S. Clour	Yes	Treasurer	01/01/2011	Approved						Approved
Mannington Township	Linda S. Jones	No	Treasurer	01/01/2011	Approved	08/10/2023					Approve
Mannington Township	Suzanne Pierce	Yes	Tax Collector	01/01/2017	Approved						Approve
Mannington Township	Lynne H. Stiles	No	Tax Collector	01/01/2009	Approved	01/01/2017					Approve
Mannington Township	Diane Elwell	Yes	CFO (Assuming Treasurer Duties)	01/01/2023	Approved						Approve
Mantua Township	Alice M. Kellmyer	Yes	Tax Collector	01/01/2009	Approved						Approve
Mantua Township	Gayle L. Tschopp	No	Treasurer	01/01/2009	Approved	11/01/2021					Approve
Mantua Township	Candice Pennewell	No	CFO (Assuming Treasurer Duties)	11/01/2021	Approved	01/31/2023					Approve
Mantua Township	Merrie Schmidt	No	CFO (Assuming Treasurer Duties)	01/31/2023	Approved	08/24/2023					Approve
Mantua Township	Karyn Paccione	Yes	CFO (Assuming Treasurer Duties)	04/11/2023	Approved	,,					Approve
Monroe Township	Karyn Paccione	No	CFO (Assuming Treasurer Duties)	09/08/2014	Approved	12/31/2018					Approve
Monroe Township	Joanna Potopchuk	Yes	Tax Collector	08/01/2015	Approved	12/51/2010					Approve
Monroe Township	Joan Rumpf	No	Tax Collector	01/01/2012	Approved	08/01/2015					Approve
Monroe Township	Lorraine M Boyer	Yes	CFO (Assuming Treasurer Duties)	01/01/2012	Approved	00/01/2015					Approve
National Park Borough	Victoria Holstrom	Yes	Tax Collector	01/01/2013	Approved						Approve
National Park Borough	Kimberly Kwasizur	Yes	Treasurer	01/01/2023	Approved						Approve
Oldmans Township	Anne Deeck	No	Tax Collector	09/09/2015		02/28/2020					
Oldmans Township	James R. Hackett	No	CFO (Assuming Treasurer Duties)		Approved	12/31/2018	Yes	Utility Clerk	01/01/2007	Ammanuad	Approve
		NO	, ,	01/01/2007	Approved	06/30/2015	res	Offility Clerk	01/01/2007	Approved	12/31/2018 Approve
Oldmans Township	Margie Schieber		Tax Collector	01/01/2007	Approved						Approve
Oldmans Township	Shawn Glynn	No	Utility Clerk	01/01/2019	Approved	07/12/2019					Approve
Oldmans Township	Pamela Lewis	No	Tax Collector	02/25/2020	Approved	07/07/2020			00/14/2 /2010	A	Approve
Oldmans Township	Diane Elwell	Yes	CFO (Assuming Treasurer Duties)	09/16/2019	Approved	/ /	Yes	Utility Clerk	09/16/2019	Approved	Approve
Oldmans Township	Susan DeFrancesco	No	Tax Collector	07/08/2020	Approved	02/15/2021					Approve
Oldmans Township	Kathleen Diorio	Yes	Tax Collector	02/15/2021	Approved						Approve
Paulsboro Borough	Rita M. Costenbader	No	Utility Clerk	01/01/2007	Approved	04/08/2019					Approve
Paulsboro Borough	Lorraine Boyer	No	CFO (Assuming Treasurer Duties)	04/08/2015	Approved	02/01/2019					Approve
Paulsboro Borough	Georjean Widener	No	Tax Collector	08/01/2014	Approved	02/01/2024					Approve
Paulsboro Borough	Susan Jacobucci	No	CFO (Assuming Treasurer Duties)	02/01/2019	Approved	10/01/2019					Approve
Paulsboro Borough	Judson Moore Jr	No	CFO (Assuming Treasurer Duties)	10/01/2019	Approved	06/15/2022					Approve
Paulsboro Borough	Temple McBride	Yes	Utility Clerk	04/18/2019	Approved						Approve
Paulsboro Borough	Susan Jacobucci	Yes	CFO (Assuming Treasurer Duties)	02/01/2022	Approved						Approve
Paulsboro Borough	Mackenzi Kelly	Yes	Tax Collector	02/01/2024	Approved						Approve
Penns Grove Borough	Marie Stout	No	Tax Collector	01/01/2017	Approved	01/01/2018					Approve
Penns Grove Borough	Anne McCarthy	No	Tax Collector	01/01/2013	Approved	01/01/2015					Approve
Penns Grove Borough	Elizabeth A. Ruhl	No	Tax Collector	01/01/2015	Approved	12/31/2016					Approve
Penns Grove Borough	Jennifer Koeturius	Yes	Tax Collector	01/01/2018	Approved						Approve
Pennsville Township	John F. Willadsen	Yes	CFO (Assuming Treasurer Duties)	01/01/2010	Approved						Approve
Pennsville Township	Lauren E. Schoonmaker	Yes	Tax Collector	01/01/2010	Approved						Approve
Pilesgrove Township	Kimberly Fleetwood	No	Treasurer	01/01/2007	Approved	05/31/2018					Approve
Pilesgrove Township	Donna L. Denham	No	Tax Collector	06/09/2009	Approved	05/31/2018					Approve
Pilesgrove Township	Jennifer Koeturius	No	Tax Collector	06/01/2018	Approved	03/30/2019					Approve
Pilesgrove Township	Marie Stout	No	CFO (Assuming Treasurer Duties)	04/01/2017	Approved	10/01/2020					Approve
Pilesgrove Township	Dawn M Allen	No	Tax Collector	04/01/2019	Approved	03/31/2021					Approve
Pilesgrove Township	Kelsey Mitchell	Yes	CFO (Assuming Treasurer Duties)	10/01/2020	Approved		Yes	Library Treasurer	10/01/2020	Approved	Approve
Pilesgrove Township	Suzanne D. Pierce	Yes	Tax Collector	04/01/2020	Approved		105	List ary freasaler	10/01/2020	, ppioreu	Approve

## MEL STATUTORY BONDs as of 4/3/24

Name		:tive Statutory Bo	Bond Position 1	ective Date Positio			cond Posi	tio Bond Position 2 :	tive Date Posit	oval Status Posi De	
Pitman Borough	Margaret Ware	No	Library Treasurer	03/07/2014	Approved	06/21/2022					Approved
Pitman Borough	Sheila Garrison	No	Tax Collector	11/13/2017	Approved	04/02/2019					Approved
Pitman Borough	Stephen P Considine	No	CFO (Assuming Treasurer Duties)	01/01/2007	Approved	02/01/2024					Approved
Pitman Borough	Beth A. Walls	No	Tax Collector	01/01/2007	Approved	08/29/2018					Approved
Pitman Borough	Conchetta A. Anderson	No	Utility Clerk	08/28/2017	Approved	08/03/2021					Approved
Pitman Borough	Elizabeth Ruhl	Yes	Tax Collector	05/07/2019	Approved						Approved
Pitman Borough	Andrea Whilden	No	Utility Clerk	08/30/2021	Approved	07/13/2022					Approved
Pitman Borough	Carol Camacho	No	Library Treasurer	07/01/2022	Approved	07/24/2023					Approved
Pitman Borough	Lynn Hoffman	No	Utility Clerk	09/07/2022	Approved	01/01/2024					Approved
Pitman Borough	Dolores Novin	Yes	Library Treasurer	07/24/2023	Approved	01/01/2024					Approved
Pitman Borough	Alicia Krumenacker	Yes	Utility Clerk	01/01/2024	Approved						Approved
-	Colette Bachich	Yes		01/01/2024							
Pitman Borough	Dawn Michelle Allen		CFO (Assuming Treasurer Duties)	06/02/2008	Approved		Vee	Utility Clerk	06/02/2008	Ammanuad	Approved
Quinton Township		Yes	Tax Collector		Approved		Yes	Utility Clerk	06/02/2008	Approved	Approved
Quinton Township	Diane L. S. Elwell	Yes	CFO (Assuming Treasurer Duties)	01/01/2007	Approved						Approved
Shiloh Borough	Elizabeth Wallender	Yes	Tax Collector	01/01/2007	Approved						Approved
Shiloh Borough	Ronald L. Campbell Sr.	Yes	Treasurer	01/01/2007	Approved						Approved
South Harrison Township	Victoria Holmstrom	Yes	Tax Collector	08/26/2013	Approved		Yes	ssuming Treasurer	01/01/2024		Approved
Swedesboro Borough	Lois M. Elder	No	Treasurer	01/01/2011	Approved	01/01/2019					Approved
Swedesboro Borough	Kimberly Fleetwood	No	Tax Collector	03/07/2011	Approved	12/01/2021					Approved
Swedesboro Borough	Lois Yarrington	No	Treasurer	01/01/2019	Approved	01/10/2022					Approved
Swedesboro Borough	Mark Godfrey	Yes	Tax Collector	12/01/2021	Approved						Approved
Swedesboro Borough	Jena Dolbow	No	Treasurer	01/10/2022	Approved	03/18/2024					Approved
Swedesboro Borough	Tracy Dubbs	Yes	Treasurer	03/18/2024	Approved						Approved
Upper Pittsgrove Township	Susan E. DeFrancesco	Yes	Tax Collector	01/01/2007	Approved		Yes	Treasurer	01/01/2007	Approved	Approved
Vineland City	Carmen DiGiorgio	Yes	Treasurer	01/01/2022	Approved		Yes	Tax Collector	01/01/2022	••	Approved
Washington Township	Colette Bachich	Yes	CFO (Assuming Treasurer Duties)	12/01/2017	Approved						Approved
Washington Township	James D'Auria	No	Treasurer	07/28/2014	Approved	11/30/2017					Approved
Washington Township	Robin D. Sarlo	No	Tax Collector	06/10/2015	Approved	04/01/2019					Approved
Washington Township	Anne Deeck	No	Tax Collector	07/01/2014	Approved	06/09/2015					Approved
Washington Township	Sheila Batten	Yes	Tax Collector	04/03/2019	Approved	00/03/2013					Approved
Wenonah Borough	Karen Sweeney	Yes	Treasurer		Approved						
0	,			07/01/2007		07/04/0040					Approved
Wenonah Borough	Beth A. Walls	No	Tax Collector	09/29/2014	Approved	07/01/2018					Approved
Wenonah Borough	Lawrence J Nightlinger Jr.	No	Tax Collector	03/21/2011	Approved	09/22/2014					Approved
Wenonah Borough	Kim Jaworski	Yes	Tax Collector	07/01/2018	Approved						Approved
West Deptford Township	Michael Kwasizur	Yes	CFO (Assuming Treasurer Duties)	10/01/2018	Approved						Approved
West Deptford Township	Penny Sheehan	No	Tax Collector	01/01/2018	Approved	09/15/2021					Approved
West Deptford Township	Jennifer Dukelow	No	Tax Collector	09/15/2021	Approved	01/01/2023					Approved
West Deptford Township	Mary Beth Gill	Yes	Tax Collector	01/01/2023	Approved						Approved
Westville Borough	Nicole O'Hara	Yes	Tax Collector	08/01/2017	Approved						Approved
Westville Borough	Ryan Giles	No	Treasurer	04/05/2017	Approved	01/01/2018					Approved
Westville Borough	Friz H. Sims Jr	No		04/14/2009	Approved	06/23/2020					Approved
Westville Borough	Christine A. Helder	No	Tax Collector	01/01/2007	Approved	08/01/2017					Approved
Westville Borough	William Bittner	No	Treasurer	01/01/2015	Approved	05/01/2017					Approved
Westville Borough	Kathleen Carroll	Yes	Treasurer	01/01/2018	Approved						Approved
Westville Borough	Joseph Bobiak	No	Treasurer	06/23/2020	P.P. 1. 24	02/09/2022					P.P
Woodbury City	Theresa Mulvenna	Yes	Tax Collector	08/01/2017	Approved	52,05,2022	Yes	Utility Clerk	08/01/2017	Approved	Approved
Woodbury City	Cheryl Slack	No	Library Treasurer	01/01/2007	Approved	12/27/2021	105	othey clerk	30, 01, 2017		Approved
Woodbury City	Robert Law	No	CFO (Assuming Treasurer Duties)	01/01/2007	Approved	04/24/2018					Approved
Woodbury City	orraine Roberts (married name ch		Tax Collector	01/01/2007		08/01/2017	Yes	Utility Clerk	01/01/2007	Approved	08/01/2017 Approved
		-			Approved		res	Ounty Clerk	01/01/200/	Abbioned	
Woodbury City	Richard E. Wright Jr	No	CFO (Assuming Treasurer Duties)	04/24/2018	Approved	07/18/2020					Approved
Woodbury City	Robert Law	Yes	CFO (Assuming Treasurer Duties)	07/18/2020	Approved						Approved
Woodbury City	Janet Mcmaster	Yes	Library Treasurer	01/01/2022	Approved						Approved
Woodbury Heights Borough	Victoria Holmstrom	Yes	Treasurer	01/06/2012	Approved		Yes	Tax Collector	01/06/2012	Approved	Approved
Woolwich Township	Kim Jaworski	Yes	Tax Collector	10/27/2011	Approved						Approved
Woolwich Township	William Pine	No	CFO (Assuming Treasurer Duties)	01/01/2011	Approved	01/01/2020					Approved
Woolwich Township	Julie Iacovelli	No	Treasurer	01/01/2020	Approved	03/23/2022					Approved
Woolwich Township	Britni Beecken	Yes	Treasurer	01/01/2022	Pending						Pending

	Glouce	ester. Salem. Cumberla	nd Counties Municipal Joint Insurance Fund
			rd Park Approval Status
			-
Member	Stage	Status	Notes
Municipality	ege		
Alloway			
Carney's Pt.			
Clayton		Removed	Skateboard park removed as of 2023
Deptford			
Elk			
Elsinboro			
Fairfield			
Franklin			
Glassboro			
Greenwich			
Harrison			
Logan		Removed	Skateboard park removed as of 11/17/09
Lower Alloways Creek			
Mannington			
Mantua			
Monroe		Approved	
Oldmans			
Paulsboro			
Penns Grove			
Pennsville		Approved	
Pilesgrove			
Pitman			
Quinton			
Shiloh			
S. Harrison			
Swedesboro			
U. Pittsgrove			
Vineland			
Washington Twp		Removed	Skateboard park removed as of 12/31/2014
Wenonah			
West Deptford		Removed	8/21/18 torn down
Westville			
Woodbury	Inquiry	Active	Letter explaining program sent to RMC on 2/22/05. Per MEL Underwriter - Not a Skatepark - No Approval Required.
Woodbury Heights			
Woodstown			
Woolwich			
36			

#### Appellate Division Rules That Claimants in Certain Circumstances Do Not Have to Reimburse an Employer's Lien From a Third Party Recovery Until the End of the Workers' Compensation Case

#### John H. Geaney March 25, 2024

The unreported case of <u>New Jersey Transit Corp. v. Joseph</u>, No. A-1194-22 (App. Div. March 19, 2024) has thrown a wrench into the common understanding of when to resolve third party liens in New Jersey. The facts that are supplied in the case are not detailed. Darshelle Joseph was injured on October 23, 2019, during the course of his employment with New Jersey Transit. The opinion notes that NJ Transit's carrier notified Joseph on November 11, 2019, of its lien rights as to any third party recovery. The letter also advised Mr. Joseph to contact the carrier if he should retain an attorney in a third-party case. The Appellate Division observed that there was no indication in the record whether Mr. Joseph notified either NJ Transit or its carrier of the third-party action, nor does the opinion discuss what, if anything, the third party attorney knew about NJ Transit's lien when the third party case settled.

NJ Transit paid \$7,112.90 in workers' compensation medical and temporary disability benefits to petitioner, Darshelle Joseph. The workers' compensation case had not yet been resolved. Mr. Joseph sued the tortfeasor and recovered \$14,000 in settlement with his uninsured motorist insurance policy in December 2021. His attorney disbursed the full \$14,000 settlement amount less counsel fees and costs of \$15.10 to Mr. Joseph. No repayment was made to the New Jersey Transit for its medical and temporary disability benefits lien as of the date of the third party settlement.

NJ Transit filed a verified complaint in civil court seeking reimbursement of its statutory lien. It is noted in the decision that the trial court did not hear oral arguments but ruled on the briefs submitted, denying NJ Transit's application for lien reimbursement as being "premature."

The trial court and Appellate Division disagreed with NJ Transit's argument that the employer's statutory lien must be satisfied immediately upon resolution of the third-party settlement. The Appellate Division said, "Thus, the statute makes no mention of when the employer's lien must be satisfied, but it makes clear the specific amount of the lien cannot be determined until the employer's liability is finalized." The Court was referring to N.J.S.A. 34:15-40(b) which states:

b) If the sum recovered by the employee ... from the third person ... is equivalent to or greater than the liability of the employer ... under this statute, the employer ... shall be released from such liability and shall be entitled to be reimbursed ... for the medical expenses incurred and compensation payments theretofore paid to the injured employee ... less employee's expenses of suit and attorney's fee as hereinafter defined.

The Court read the above paragraph as being directly applicable to this case because the \$14,000 civil recovery was higher than the \$7,112.90 paid in medical and temporary disability benefits but the court also noted that the workers' compensation case had not yet concluded. The Court said, "*Thus, there is no requirement the employer's lien must be paid following recovery from a third-party tortfeasor. Indeed, it cannot be fully satisfied until any associated workers' compensation action is finalized and the employer's liability under the Act is determined. Thus, an employer's unperfected statutory lien is not required to be satisfied immediately upon the injured employee's recovery from a third-party tortfeasor."* 

The comment that the Court made about an "unperfected lien" is important to understand for all workers' compensation practitioners. The Court was referring to N.J.S.A. 34:15-40(d), which provides that the employer or its carrier may serve notice on the third-party defendant or its insurance carrier of its lien rights as to any third-party recovery arising from the work injury. When that notice is provided, the third-party defendant or its insurance carrier may not make settlement payments to the injured employee in the civil action until the workers' compensation lien is satisfied. This notice provision is what the Court meant by "perfection" of lien rights. The Court said that in this case, there was no proof of any perfection of lien rights.

Current practice in New Jersey is contrary to this decision. When a third-party settlement occurs – even if the workers' compensation case is ongoing – the lien is resolved as to the amount of the third-party recovery. In a case like this, the third-party attorney would repay two thirds of \$7,112.90 minus statutory costs, and then the employee would continue to pay one third of future benefits until the amount of the workers' compensation benefits would reach \$14,000 (which was the amount of the UM settlement). Thereafter the employer would pay dollar for dollar on any future benefits. The employer is not actually paying workers' compensation benefits up to the amount of the \$14,000 settlement. Rather the employer is making its contribution to plaintiff's counsel fee in the third party case.

The Court acknowledged that the underlying principle behind N.J.S.A. 34:15-40 was to prevent double recoveries. In this case the plaintiff made a double recovery because he received his \$7,112.90 and kept two thirds of the \$14,000 UM settlement. The Court seemed to be suggesting that this problem of double recovery could be addressed at the end of the workers' compensation case depending on how much more money NJ Transit has to pay to resolve the workers' compensation claim. The flaw in that argument is that if NJ Transit should close the file with only a few thousand more dollars in payments, a double recovery will occur and NJ Transit will not receive repayment of its lien.

The Appellate Division was concerned about the fact that NJ Transit's lien was not protected in this case because the entire \$14,000 settlement was disbursed without holding funds in escrow to satisfy the lien. It said, "As long as the funds to pay the lien are protected – either deposited into court or deposited in an attorney trust account –

there is no prejudice to NJ Transit." The Court remanded the case to the trial court to take steps to protect NJ Transit's lien. None of this would have been necessary had the lien been taken care of at the time of the third party settlement.

This case is focused on an important issue: namely, the timing of lien repayments when a third-party settlement occurs during an unresolved and ongoing workers' compensation case. The general principles discussed in this case are far more important to focus on than the outcome in this Appellate Division case because the record here is so sparse. The opinion does not mention what contact there was, if any, between plaintiff and his lawyer and NJ Transit before the third-party settlement funds were disbursed.

We all know that third-party settlements occur all the time during ongoing workers' compensation cases. The Court correctly observed that "perfected" liens must be repaid to the employer at the time of the third-party settlement if notice has been given to the third-party defendant or its carrier of the employer's lien rights. In that situation, there can be no attempt to delay repayment until the end of the workers' compensation case. Now let's consider so-called unperfected liens where the third-party defendant and its carrier are not notified of lien rights before they disburse payments. If both plaintiff's attorney and the plaintiff have actual notice of the employer's lien rights at the time of settlement of the third-party case, why would the result be different? Why would there be an opportunity to delay repayment until the workers' compensation case should end – which might be several more years? It is the actual notice that should matter. It would be inconsistent to read the statute to mean that a lawyer and plaintiff with actual notice of the current lien amount should be held to a different legal standard than a third-party defendant or its carrier with respect to the timing of reimbursement.

#### A Brief History of the New Jersey Workers' Compensation Act

#### John H. Geaney April 3, 2024

For those who do not like workers' compensation, blame Otto Von Bismarck. Yes, the man known as the Iron Chancellor, who united all the kingdoms and states into one Germany, passed the first modern workers' compensation law in 1874. Other western European nations soon followed, and between 1911 and 1920 every state in America adopted a workers' compensation law, all of which borrowed from Bismarck's first modern law. On April 4, 2024, New Jersey marks its 113<sup>th</sup> year of workers' compensation. Wisconsin was the first state to pass a workers' compensation law in 1911. Nine more states, including New Jersey, followed in 1911.

The significance of having a workers' compensation law can only be appreciated if you consider how injuries were treated before 1911. Former Director of the Division of Workers' Compensation, Peter Calderone, wrote an excellent article in 2011 explaining what life was like before modern workers' compensation laws. If an employee's injury was caused by his own negligence, or by a co-employee's negligence or was just a fact

of business life, the employer paid no workers' compensation benefits. That meant no medical treatment was offered, no lost wages and no benefits were voluntarily paid. Fault was the main defense in all cases. Work injuries quickly led to impoverishment for families.

Since there was no workers' compensation law until 1911, injured workers would hire litigation lawyers who would sue the employer for medical care and damages. Courts in every state were jam packed with thousands of such cases. Employers would sometimes win the suits and sometimes lose and pay high jury awards. The process was slow and both labor groups and employers were unhappy with the system.

While Bismarck may have started the concept of the modern workers' compensation law, New Jersey owes its own unique version of workers' compensation law mostly to one man named Walter Edge, who grew up in Pleasantville, Atlantic County, New Jersey and who started his first newspaper as a ten-year-old boy. At age 17, he purchased the Dorland Agency, an advertising business, and turned it into an international advertising company with offices in the United States and Europe. He founded the Atlantic City Press at age 22, which he sold for an enormous profit. He got into politics at age 21. He was elected to the Assembly at age 36 in 1909 and became a state senator in 1910. Edge was so passionate about creating a New Jersey workers' compensation law that he traveled to Germany and other western European countries to learn how each country's system worked. When he returned from Europe, he had in his mind a plan for a New Jersey workers' compensation law.

Edge sponsored the first New Jersey workers' compensation law in 1911 and lobbied colleagues in both parties to support it. The legislation would take workers' compensation out of civil courts and create an administrative remedy. Edge wrote in 2011: "It is generally conceded that 20 per cent of all litigation today, clogging the machinery of our courts, consists of suits between employer and employee." The legislation was passed with bipartisan support in the Assembly and Senate on April 3, 1911, and then signed into law on April 4, 1911 by Governor Woodrow Wilson.

New Jersey labor groups hailed the law's main features, which were to eliminate fault as an issue for receiving compensation benefits and to provide prompt medical benefits after an injury along with temporary disability and partial permanent disability benefits in certain cases. Edge wrote in 1911, ". . . *American citizenship and humanity does not allow an injured man to walk about the streets uncared for; as, at great expense, the public is maintaining, mainly through charity, many institutions to properly look after unfortunate people. The public is paying the bill.*" Provisions also covered permanent and total disability benefits and dependency benefits. In return for agreeing to a no-fault system, employers received what they wanted. That was an end the right of an employee to sue his or her employer or co-employee in civil court. This provision is referred to as the "exclusive remedy."

Walter Edge would go on to pass many other laws that made a difference to New Jersey residents — both labor groups and employers. When North and South Jersey could not agree on major capital projects, he managed to forge a compromise that would lead to the construction of the Ben Franklin Bridge and the Holland Tunnel. He became an early ally of Enoch "Nucky" Johnson (the character on whom "Boardwalk Empire's" Nucky Thompson was based). In fact, Johnson became Edge's campaign manager for Governor in 1916. Johnson was a Republican power broker in Atlantic County, and Edge was also able to get the support of the state's leading Democrat, Mayor Frank Hague of Hudson County fame. Hague thought the Democratic candidate too liberal for his tastes. Edge won and became Governor, eventually serving two terms as Governor of New Jersey, separated by 25 years. What does this biographical history of Walter Edge have to do with workers' compensation? Not much, but perhaps consider this a minor deviation.

From 1911 to 1979, there really were few changes to the New Jersey Workers' Compensation Act. Walter Edge's vision of workers' compensation in 1911 has stood the test of time. There has only been one major overhaul of New Jersey's law, and that took place in 1979. The overhaul was necessary because New Jersey's benefit rates were extremely low and were not keeping up with inflation. An award of 50% permanent partial disability amounted to only \$11,000 in 1979. Even back then, that was not a lot of money. In 1980 the same award more than tripled to \$36,900. Today an award of 50% permanent partial disability for a high wage earner amounts to over \$226,000. For their part, employers were unhappy with the endless exceptions to the going-and-coming rule and the unpredictable standards for occupational disease claims and also lobbied for change in 1979. The Legislature passed dozens of major changes to the Act including the following:

- 1. Significant rate hikes for temporary disability and permanent partial disability benefits starting in 1980;
- 2. Tightening the standards for occupational disease claims to include the requirement that the petitioner show proof of a medical condition that is produced by causes which are characteristic of or peculiar to work in a material degree;
- 3. Creating more stringent medical/legal requirements for cardiovascular and cerebrovascular claims;
- 4. Requiring proof by objective medical evidence to support any claim for permanent partial disability and eliminating awards based solely on subjective complaints;
- 5. Narrowing the countless exceptions to the former "going-and-coming rule" and adopting the "premises rule" instead.

Following these and many other amendments, the Supreme Court weighed in on its interpretation of key provisions passed in 1979, including <u>Perez v. Pantasote</u>, <u>Hellwig</u> <u>v. J. F. Rast & Co., Inc.</u>, <u>Saunderlin v. E.I. DuPont Co.</u>, and <u>Jumpp v. City of Ventnor</u>.

Where does New Jersey workers' compensation stand today, 113 years after Walter Edge wrote the first workers' compensation law in the state? It remains very much where it stood in 1911 as buttressed by the 1979 amendments. If one were to list the five main pillars of the New Jersey Workers' Compensation Act that differentiate our law from that of other states, they would be these:

- A. Permanent partial disability benefits even for workers who are able to return to their job on a full-time basis with no restriction so long as they have proof of a substantial limitation of non-work activities;
- B. The absence of any medical fee schedule;
- C. Employer-directed medical care;
- D. The employer's right to terminate medical and temporary disability benefits at MMI;
- E. The right of an injured worker to reopen his or her case for further medical, temporary and permanent disability benefits.

All these aspects of the law were set in motion in 1911. Other states have several of these features in their law, but no other state has all five of them. The state that is closest to New Jersey's system is Missouri. Perhaps because Walter Edge was a moderate politician who routinely reached out to both sides of the political aisle throughout his career, he was able to craft legislation that offered advantages to both employees and employers. Neither employers nor employees like every aspect of the New Jersey law. Few can dispute, however, that New Jersey has a better social policy behind its law. The overwhelming majority of injured workers do return to work. The New Jersey Act has its critics. One of the most serious criticisms is that New Jersey has the highest workers' compensation medical costs in the nation. Overall, however, the New Jersey Act is more balanced than workers' compensation laws of most states and remains true to the spirit of the original 1911 law.

# Land Use Training Certification

Member **Carneys** Point Clayton Deptford Elk Elsinboro Fairfield Franklin Glassboro Harrison Hopewell Logan Lower Alloways Creek Mannington Oldmans Pennsgrove Pennsville Pilesgrove Pitman Quinton South Harrison Swedesboro Vineland Wenonah Westville Woodbury Heights Woolwich



# TO: Elected Officials, Fund Commissioners, & Municipal Clerks, ACM, BURLCO, & TRICO JIFs

FROM: Paul A. Forlenza, MGA, RMC, Executive Director

DATE: January 4, 2024

#### RE: 2023 -2024 Elected Officials Training Invitation

For more than 20 years, the ACM, BURLCO, & TRICO JIFs have offered our elected officials the opportunity to participate in annual voluntary training. The 2023-2024 Elected Officials Training will take place online via the MEL Safety Institute (MSI). This 45-minute training video provides important information on the challenges facing local elected leaders in managing local government risks and tools available to assist our members. Instructions on how to access this training are attached.

The online training format allows for participation by all our elected officials, and the convenience of completing this training when their schedule permits, prior to the May 1, 2024 deadline. By utilizing the MEL Safety Institute, my office will be able to better track the completion of the training and document the credits due to members' assessments.

Within a week or so of completing the online training, those that complete the course will receive an email from my office highlighting the various risk management programs discussed during the training and how they can be accessed by our members.

Please remember that for every elected official that completes the training, their municipality will earn a \$250 credit towards your municipality's 2024 MEL Assessment (capped at 5% of your 2024 MEL Assessment). Also, your highest ranking administrative official is eligible to earn this credit by completing the course.

On a final note, if you attended the Elected Officials Training at the League of Municipalities in November 2023, you will receive credit for the training.

Thank you for your attention to this matter. As always, please feel free to contact me should you have any questions.

File: MEL/2024/Elected Officials Training Tab: Initiation

# 2023-2024 ELECTED OFFICIALS RISK MANAGEMENT SEMINAR



This seminar is designed to provide a general understanding of the legal principles pertaining to governmental operations. Municipal Elected Officials, Authority Commissioners, and a member's Chief Executive Officer (i.e., Municipal Manager/Administrator or Executive Director) who completes this course by May 2024 may qualify for a \$250 credit (capped at approx. 5% of MEL assessment) in their local unit 2024 assessment.

#### Login to LMS

- 1. Click to access the MSI Learning Management System.
- 2. If you have previously taken MSI classes, enter your username and password.
- 3. If you are new or do not know your username/password, check with your Training Administrator, or call the MSI Help Line at (866) 661-5120.
- 4. Click the **Request Training button** on the top right of your **Home Screen**.
- 5. Select the check box to the right of the course **2023-2024 Elected Officials Risk Management Seminar.**
- 6. Scroll to the bottom of the page to submit your selection.
- 7. The course now shows in the **Assigned** section of your **Home Screen**.
- 8. Click the program name to launch the course.
- 9. Upon completion of the course, a screen with your **Certificate of Completion** will appear and can be printed.
- The course and certificate will now appear in the Completed section of your Home Screen. Learning transcripts are automatically updated in the MEL Safety Institute's Learning Management System.

If you have questions or need assistance, contact the *Andrea Felip at 856-552-4740* or <u>afelip@jamontgomery.com</u>.

							2024		) Meeting	g Attenda	ance								
Municipality	Name	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24		Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	# FC Attended	#ALT Attended	# Meetings	% FC Attended	%ALT Attended	Combined Attendance
(Mtg Occurred=Y	)	Y	Y	Y												3			
Carneys Point	Brown/Bomba	FC	FC	FC										3	0	3	100%	0%	100%
Clayton	Miller/Vondran	FC	FC	FC										3	0	3	100%	0%	100%
Deptford	Emmons/Hack	FC	FC	FC										3	0	3	100%	0%	100%
Elk	King-Sammons/Pine	Alt	FC	FC										2	1	3	67%	33%	100%
Elsinboro	Hogate/McAllister	FC	FC	N/A										2	0	3	67%	0%	67%
Fairfield	Burden/Flores	FC	Alt	FC										2	1	3	67%	33%	100%
Franklin	Freijomil/Hegarty	FC	FC	FC										3	0	3	100%	0%	100%
Glassboro	Pierpont/Villano	FC	FC	FC										3	0	3	100%	0%	100%
Greenwich	Jeffers/Chila	FC	FC	N/A										2	0	3	67%	0%	67%
Harrison	Chambers/Schools	Alt	Alt	Alt										0	3	3	0%	100%	100%
Hopewell	Hitchner/Pace	N/A	N/A	N/A										0	0	3	0%	0%	0%
Logan	Pine/Smith	FC	FC	FC										3	0	3	100%	0%	100%
Lower Alloways C	k Clour/Campbell	N/A	FC	FC										2	0	3	67%	0%	67%
Mannington	Eber/Mitchell	N/A	FC	N/A										1	0	3	33%	0%	33%
Mantua	Bileci/LeVine	FC	FC	FC										3	0	3	100%	0%	100%
Monroe	Darcangelo/DeHart	FC	FC	FC										3	0	3	100%	0%	100%
National Park	Gunn/	FC	FC	FC										3	0	3	100%	0%	100%
Oldmans	Moore/Ferrell	N/A	N/A	FC										1	0	3	33%	0%	33%
Paulsboro	Jacobucci/Schoch	N/A	FC	FC										2	0	3	67%	0%	67%
Penns Grove	Scott/Marinaro	FC	FC	FC										3	0	3	100%	0%	100%
Pennsville	Neu/Hourigan	FC	FC	FC										3	0	3	100%	0%	100%
Pilesgrove	Fackler/Bonowski	N/A	FC	FC										2	0	3	67%	0%	67%
Pitman	Razze/McCafferty	FC	FC	FC										3	0	3	100%	0%	100%
Quinton	Sperry/Uzdanovics	FC	FC	FC										3	0	3	100%	0%	100%
Shiloh	Campbell/Bruso	N/A	N/A	N/A										0	0	3	0%	0%	0%
South Harrison	Diaz/Richardson	FC	FC	FC										3	0	3	100%	0%	100%
Swedesboro	Dolbow/Fromm	FC	FC	FC										3	0	3	100%	0%	100%
Upper Pittsgrove	Cimprich/Seery	N/A	FC	N/A										1	0	3	33%	0%	33%
Vineland	Celebre/Gomez	FC	FC	Alt										2	1	3	67%	33%	100%
Washington	Bachich/Riiff	FC	N/A	FC										2	0	3	67%	0%	67%
· · · · ·	Sweeney/Newman	PC N/A	FC	FC										2	0	3	67%	0%	67%
Wenonah	Rost/Kwasizur	-	FC	_										3	0	3			
West Deptford		FC		FC	-									-	-	-	100%	0%	100%
Westville	O'Hara/Giles	FC	FC	FC										3	0	3	100%	0%	100%
Woodbury	Swanson/Pennypacker	FC	Alt	FC										2	1	3	67%	33%	100%
Woodbury Heights		FC	FC	FC										3	0	3	100%	0%	100%
Woolwich	DiBella/Bertino	FC	FC	FC							66		66	3	0	3	100%	0%	100%
36	j -	27	32	30	36	36	36	36	36	36	36	36	36	82	7	108	76%	6%	82%
		75%	89%	83%	100%	100%	100%	100%	100%	100%	100%	100%	100%	1					

 N/A
 No representation for this municipality

 FC
 Fund Commissioner in attendance

 ALT
 Alt. Fund Commissioner in attendance

# **Questions about employment issues?** Call the New MEL **Employment Practices Helpline**

The MEL Safety Institute is pleased to announce the establishment of a NEW MEL Employment Practices Helpline (EPL), a dedicated resource to guide members on employment related issues.

The MEL EPL Helpline is staffed by attorneys that specialize in New Jersey employment law and understand the MEL JIF system. The three law firms staffing the EPL Helpline are affiliated with local Joint Insurance Funds (JIFs).

Who can use the EPL Helpline? MEL member municipalities will select and approve two individuals to use the helpline.

What hours is the EPL Helpline available? The helpline will be staffed during normal business hours, 9 a.m. – 5 p.m. Voicemail can be left afterhours for a callback.

What kinds of issues can be addressed? Any employment related topics or policies and procedures related to issues such as:

- Hiring
- Termination

- Discrimination
- Promotion/Demotion
- Harassment
- And more...

What are the MEL EPL Helpline numbers? MEL members can choose to call any of the MEL EPL Helpline firms listed below.

#### **MEL EPL HELPLINE:** 732-583-7474

Jodi Howlett Cleary Giacobbe Alfieri Jacobs LLC 955 State Route 34, Suite 200 Matawan, NJ 07747955

#### **MEL EPL HELPLINE:** 609-522-5599

David S. DeWeese The DeWeese Law Firm 3200 Pacific Avenue Wildwood, New Jersey 08260

## **MEL EPL HELPLINE:**

973-334-1900

Fred Semrau Dorsey & Semrau 714 Main Street Boonton, NJ 07005



What happens after the call? The attorney will provide the member with transcript of the call that includes recommendations. If the issue is beyond the scope of the MEL EPL Helpline the attorney will provide direction to the member on where to get appropriate assistance. All calls are confidential.



#### **EPL Helpline Checklist** Authorized Contact Person(s)

TOWN	AUTHORIZED CONTACT PERSON	ADDITIONAL CONTACT PERSON
Carneys Point Township	Tim Pine	Ken Brown
Clayton Borough	Sue Miller, Administrator	Donna Nestore, CFO
Deptford Township	Thomas Newman	Dina Zawadski, Clerk
Elk Township	Debora Pine, Clerk	Stephen Considine, CFO
Elsinboro Township	Doug Hogate	N/A
Fairfield Township	Michael Burden	Marvin Pierce, Jr. , Mayor
Franklin Township	Barbara Freijomil	Matthew Finley
Glassboro Borough	Valerie Villano	Clark Pierpont
Greenwich Township	Jeff Godfrey	Lou Damminger
Harrison Township	Dennis Chambers, Deputy Administrator	Julie Undercuffler
Hopewell Township	N/A	Kelsey Bayzick
Logan Township	Ashley Garozzo	Will Pine, CFO
Lower Alloways Creek	Ronald Campbell, Sr.	Kevin Clour, FC
Township		
Mannington Township	Esther Mitchell, Clerk	Donald Asay
Mantua Township	Jenica Bileci	Candice Pennewell
Monroe Township	Jill McCrea	Christine Scola
National Park Borough	Joy Dunn	Mark Cooper
Oldmans Township	David Murphy	Melinda Taylor, Clerk
Paulsboro Borough	Susan Jacobucci	Gary Kille, Police Chief
Penns Grove Borough	Jack Surrency, B.A.	Stephen Labb, CFO
Pennsville Township	Daniel Neu, Mayor	Heather McManus
Pilesgrove Township	Melissa Fackler	Kevin Eachus
Pitman Borough	Sandra McCafferty	Michael Razze, Mayor
Quinton Township	Marty Uzdanovics, Clerk	Marjorie Sperry
Shiloh Borough	Ronald Campbell, Sr, Clerk	Dallus Bruso, Council President
South Harrison Township	Lindsay Kranz	N/A
Swedesboro Borough	Lois Elder	Thomas W. Fromm, Mayor
Upper Pittsgrove Township	Linda Buzby, Clerk	Krissy DeFrehn, Deputy Clerk
Vineland City	Marisol Dukes	Robert Dickenson
Washington Township	Colette Bachich	Janine Smiley
Wenonah Borough	Jessica Dominy	Karen Sweeney, Administrator
West Deptford	Michael Kwasizur, CFO	Lauren Sedberry
Westville Borough	Ryan Giles, Admin	Kathleen Carroll, Deputy Municipal Clerk
Woodbury City	John Leech	Robert Law
Woodbury Heights Borough	Cara Witasick	Vikki Holmstrom
Woolwich Township	Jane DiBella, Administrator	Craig Frederick

#### Gloucester, Salem, Cumberland Counties Municipal Joint Insurance Fund

P.O. Box 490, Marlton, New Jersey 08053 · P:856-446-9100 · F:856-446-9149 · www.tricojif.org

# <u>GLOUCESTER, SALEM, CUMBERLAND COUNTIES</u> <u>MUNICIPAL JOINT INSURANCE FUND</u>

#### APRIL 2024 CLOSED CASES

1.) Maenner v. Township of Mantua-This matter involved the Plaintiff's allegations contained in Superior Court of New Jersey, Gloucester County Complaint arising from an incident which occurred on September 13, 2022. The Plaintiff, Nancy Maenner, alleged that she was falsely accused of shoplifting from the Home Depot located at 320 Bridgeton Pike, in the Township of Mantua. The Plaintiff further alleged that Township of Mantua Police Corporal Layton posted her picture on Facebook seeking the public's assistance in identifying a shoplifting subject. The Plaintiff alleged that when she became alerted to the Facebook post, she immediately contacted Corporal Layton who scheduled a time for her report to the Mantua Police Station where she was provided with a Summons indicating that she had shoplifted \$600.00 worth of DeWalt products from Home Depot. The Plaintiff further alleged that the Municipal Court Complaint against her was subsequently dismissed. The Plaintiff alleged that as a result of the actions and/or inactions of the members of the Township of Mantua Police Department, she has incurred a substantial loss of income, and that she been subjected to extreme emotional The Plaintiff was seeking damages in the amount of distress and humiliation. \$300,000.00. The case was assigned to Timothy R. Bieg, Esquire of Madden & Madden, P.A., on October 26, 2023. Defense Counsel accepted the Assignment and he proceeded with the filing of an Answer to the Plaintiff's Complaint with the Court on behalf of the insured on November 21, 2023. Defense Counsel continued with the exchange of limited Discovery. On January 10, 2024, Defense Counsel proceeded with the filing of a Motion to Dismiss the Plaintiff's Complaint which was ultimately granted on February 2, 2024 based upon the Plaintiff's failure to comply with the New Jersey Tort Claims Act, dismissing the Plaintiff's Complaint against the insured without prejudice. To date, the Plaintiff has failed to take action to reinstate the matter against the insured and Defense Counsel has closed his file.

#### GLOUCESTER SALEM CUMBERLAND COUNTIES MUNICIPAL JOINT INSURANCE FUND RESOLUTION #2024-\_\_\_\_

#### A RESOLUTION ADOPTING THE REVISED TRICOJIF LITIGATION MANAGEMENT GUIDELINES.

WHEREAS, the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund has been organized pursuant to N.J.S.A. 40A:10-36 et. seq.; and

**WHEREAS**, the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund (ACMJIF) is duly constituted as a Municipal Self Insurance Fund to provide insurance coverage to its member municipalities; and

**WHEREAS**, the Fund Commissioners of the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund have determined that the ACMJIF is distinguished from commercial insurance providers by virtue of the fact that it is formed by municipalities, it is funded by public monies appropriated by the member municipalities, it serves a public purpose and is responsible for the discharge of its function in a manner consistent with policies applicable to municipal government; and

WHEREAS, upon the recommendation of the Fund Solicitor and the Claims Review Committee, the Fund Commissioners of the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund have determined that it is appropriate to adopt the revised TRICOJIF Litigation Management Guidelines; and

**WHEREAS**, the Fund Solicitor has previously provided a draft of these revised Litigation Management Guidelines to the Claims Review Committee of the TRICOJIF for their review and approval, and the Claims Review Committee of the TRICOJIF has recommended the adoption of these revised Guidelines by the Fund Commissioners, a copy of which are attached hereto; and

WHEREAS, the Commissioners of the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund have deemed it appropriate to adopt these revised TRICOJIF Litigation Management Guidelines.

**NOW THEREFORE BE IT RESOLVED,** by the Commissioners of the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund, assembled at a public session April 22, 2024, that:

1. The Litigation Management Guidelines which are attached hereto are hereby adopted as the Litigation Management Guidelines of the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund.

**BE IT FURTHER RESOLVED** that copies of this Resolution shall be provided to the Executive Director, Fund Solicitor, Claims Administrator and all Assigned Defense Counsel and Approved Associates of the TRICOJIF Defense Panel for their information and attention.

This Resolution was duly adopted by the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund at a public meeting held on April 22, 2024.

#### GLOUCESTER SALEM CUMBERLAND COUNTIES MUNICIPAL JOINT INSURANCE FUND

Attest: \_\_\_\_\_

Secretary

By:\_\_\_\_\_

Chairperson

Date: April 22, 2024

# LITIGATION MANAGEMENT GUIDELINES



GLOUCESTER, SALEM, CUMBERLAND COUNTIES MUNICIPAL JOINT INSURANCE FUND

#### PREFACE

Since the inception of the Gloucester, Salem, Cumberland Counties Municipal Joint Insurance Fund (TRICOJIF) in 1991, the number of Member Municipalities in the TRICOJIF has grown from nine (9) to the current number of thirty-six (36) Municipalities in 2024.

The Municipal Joint Insurance Fund concept has continued to be very successful throughout the State of New Jersey, and the operation of these Funds has resulted in millions of dollars of monetary savings to not only the Member Municipalities but also the taxpayers of these Municipalities. The TRICOJIF's proactive, effective and efficient handling and management of the claims on behalf of its Member Municipalities has produced and continues to produce outstanding results.

The adoption of an aggressive and consistent Litigation Management Philosophy by the Fund has been very effective in discouraging Plaintiffs' Attorneys and potential Plaintiffs from asserting claims against the Member Municipalities and their Employees. In addition, the philosophy adopted by the Fund has resulted in a significant reduction in the number of claims received, filed and paid. Immediately upon the receipt of notice of a potential claim, the Claims Administrator and the Fund Solicitor each perform extensive investigations and attempt to identify and establish defenses. Thereafter, once the litigation has commenced, the Fund Solicitor, Assigned Defense Counsel (ADC) and the Claims Administrator identify the cases in which the Member Municipality has strong liability defenses, and the Fund determines that those cases will be aggressively defended. In those cases, ADC is directed to serve the Plaintiff's Attorneys with frivolous lawsuit notices (R. 1:4-8), and file Motions to Dismiss prior to filing responsive pleadings. If those strategies are unsuccessful, upon the completion of discovery, ADC is directed to file Motions for Summary Judgment. These strategies are effectively utilized to obtain the dismissal of these cases at the earliest stages possible. Our Litigation Philosophy is that the concept of settling a case, which the Fund has determined has strong liability defenses, for the cost of litigation is rarely an option. This philosophy has been very successful in sending the message to the potential Plaintiffs and to the Plaintiffs' Attorneys that settlement monies will not be paid on cases where there are strong liability defenses available to the Member Municipality. This Litigation Philosophy has effectively discouraged the filing of claims against our Member Municipalities, and our goal is to continue that trend into the future. In those cases where the Fund Solicitor, ADC and the Claims Administrator have identified that the Member Municipality has liability issues, the Fund has endeavored to expeditiously attempt to settle the case reasonably, and if that is not possible, the Fund will engage Fund approved Mediators to assist with the reasonable resolution of the case without incurring substantial legal expenses to defend the claim.

Our Fund Professionals (Fund Solicitor, ADC and Claims Administrator) each play very important roles in the successful litigation of claims; however, the ADC occupies the trenches, and the Fund and the Member Municipalities rely upon their representation and guidance for their ultimate successes in litigating the claims. Because of the importance of ADC's role, every three (3) years, the Fund advertises, through Requests for Qualifications (RFQs), the position of ADC for the Fund, and in response to that RFQ, the Fund receives numerous proposals from the best Insurance Defense Firms in South Jersey to serve as ADCs for the Fund. The Fund thoroughly reviews and evaluates each of these proposals in order to determine which firms and attorneys shall be awarded Contracts to serve as the ADC for the Fund. The Fund is fortunate to have the best and the brightest defense attorneys in South Jersey defending cases on behalf of our Member Municipalities and their employees.

The Fund has determined that one of the key components in the effective and efficient defense of claims is for our Fund Professionals to actively engage in regular communications regarding the handling of the claims. The Fund Solicitor conducts annual meetings with ADC and their Approved Associates, and annual meetings with the Supervisors and Adjusters from the Claims Administrator's Office to review and discuss current claims, trends and legal issues; to review and discuss the performance of the Litigation Management Team; to identify and address any communication issues and/or claims handling issues; and to improve the overall performance of the Fund Professionals in the handling and administration of the claims. In addition to the daily communications and meetings, these Litigation Management Guidelines are intended to be an invaluable tool to insure the efficient, effective and consistent management of all of our claims.

It is essential that each of the Contracted ADC and their Approved Associates review these Litigation Management Guidelines regularly, and that they have their support staff also regularly familiarize themselves with these Guidelines to ensure compliance in the best interest of the Fund and the Member Municipalities.

As always, it is the goal of all of the Fund Professionals to continue to work together as a team in the aggressive, effective and efficient management of litigated matters on behalf of the Member Municipalities and their employees and elected officials.

David S. DeWeese, Esquire Fund Solicitor, TRICOJIF

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# GLOUCESTER, SALEM, CUMBERLAND COUNTIES MUNICIPAL JOINT INSURANCE FUND LITIGATION MANAGEMENT GUIDELINES

#### I. INTRODUCTION.

The purpose of these Litigation Management Guidelines is to emphasize, delineate and support the TRICOJIF's Litigation Management Philosophy, to specifically describe the roles and relationships of the Fund Professionals, the Member Municipalities and their employees and elected officials to the litigation process and to supplement the TRICOJIF Bylaws, Plan of Risk Management and other policies established by the Fund's Executive Committee.

The Fund recognizes that the total cost of defending, administering, managing and resolving litigated claims can be very expensive, and therefore, through the RFQ process, the Fund has been providing, and is determined to continue to provide, quality ADC, at very reasonable hourly rates, as an essential part of our Litigation Management program. In order to ensure high quality representation together with controlling the costs of litigation, the Fund has established and adopted these Litigation Management Guidelines which will serve the best interests of the Member Municipalities, the Fund Professionals (Fund Solicitor, ADC and Claims Administrator) and the Fund. These Litigation Management Guidelines will provide the Fund Professionals (Fund Solicitor, ADC and Claims Administrator) and the roles, duties and responsibilities of the Litigation Management Team throughout the process of defending claims and litigation. The Fund firmly believes that the establishment of these Litigation Management Guidelines is essential to providing the framework for our Litigation Team to successfully defend claims and for the continued success of the Fund.

The Fund is confident that outstanding, effective and efficient claims and litigation defense will be provided for our Member Municipalities when the Litigation Management Team combines all of their skills and resources and effectively communicate with one another from the inception of a claim through the ultimate disposition of the claim. It is imperative that every expense incurred during the claims and litigation process is determined to be reasonable, necessary and required to effectively and efficiently defend and resolve each and every claim. Our "loss experience" is comprised of two factors: loss and expense. It is our goal to control both of these factors while still adhering to our Litigation Management Philosophy. Therefore, a collaborative effort by the Litigation Management Team in the claims management and litigation management process is essential to accomplishing this goal. Jointly, the Team shall endeavor to identify and clarify all pertinent issues at the earliest possible stage of a claim. Thereafter, once the litigation strategy has been established, it is imperative that this "Team" shall immediately proceed toward an expeditious, efficient, cost effective and just disposition of a claim. Disposition of a claim at the earliest possible date is highly desirable, and is in the best interest of our Member Municipalities.

#### II. ROLE OF CLAIMS ADMINISTRATOR.

The Claims Administrator (CAS) or the TRICOJIF is an integral member of the Litigation Management Team. The CAS and their staff are the Claims Manager for the Fund, and they are charged with the responsibility of the initial investigation, management and handling of claims prior to litigation being filed. In addition, they are charged with the responsibility of vigilantly and proactively anticipating and initiating all reasonable action necessary to investigate the claims and control the claims and its cost for the Fund and its Member Municipalities. It is for these reasons that the CAS will always retain primary responsibility for the management of a claim from its inception through final disposition. The CAS will work closely with our Fund Solicitor and the ADC, and they will continually monitor all assignments; provide input to the Fund Solicitor and ADC regarding the litigation strategies; prepare all Payment Authority Requests (PARs) for submission to the Claims Review Committee; participate in Mediations and Arbitrations; and upon the conclusion of a claim, provide the Member Municipalities with a copy of the Complaint, Court Order Dismissing the case (if applicable) and any Settlement Agreement and/or Release and Settlement Check (if applicable).

Upon the receipt of a claim, the CAS shall be responsible to immediately and thoroughly investigate the claim and determine the appropriate coverages for the claim under the TRICOJIF policies of insurance. The CAS shall issue coverage letters to Member Municipalities within ten (10) days of their receipt of the claim explaining the coverage determination for matters under the General Liability Policy (GL), the Automobile Liability Policy (AL), the Police Civil Rights matters under the GL Policy, the Property Damage Policy (PD) and the Employment Practices Liability and Public Officials Liability Policy (EPL/POL). If the claim may be covered under the EPL/POL Policy, the CAS shall also, within ten (10) days of their receipt of the claim, provide notice of the claim to the Claims Administrator for the EPL/POL Policy with copies to the Fund Solicitor for a coverage determination by the EPL/POL carrier. The Municipal Claims Coordinators for the respective Member Municipalities should be utilized by the CAS to obtain all required information and documentation in order to analyze and effectively prepare for the defense of the claim. The CAS should contact the Fund Solicitor for any assistance required in the investigation and evaluation of a claim. In addition, the CAS should consult with the Fund Solicitor regarding any potential pre-suit assignments to ADC. If a claim, on a file where suit has not been commenced, is being presented for Payment Authority Request (PAR) to the Claims Review Committee, the CAS shall, at least thirty (30) days prior to the Claims Review Committee Meeting and the presentation of the PAR, provide a copy of the file to the Fund Solicitor so that the Fund Solicitor can properly evaluate the claim and provide their legal opinion to the CAS prior to the presentation of the PAR to the Claims Review Committee. If the claim cannot be settled by the CAS, with the assistance of the Fund Solicitor, prior to suit, the CAS, upon the receipt of a filed Complaint, shall request that the Fund Solicitor assign a member of the ADC Panel to handle the defense of the Member Municipality and/or their employee(s) in the litigation. The assignment shall be communicated by the Fund Solicitor to ADC, in writing, with copies to the CAS and the Member Municipality and/or their employees who have been named as Defendants, and the Fund Solicitor shall provide the ADC with detailed instructions regarding the handling of the claim.

The CAS shall immediately provide ADC with a complete copy of their file, and thereafter, they shall assist the ADC in conducting any further investigation as is deemed necessary to evaluate the liability and damages exposure of the Member Municipality, and thereafter, based upon that liability and damages determination, the CAS and ADC with the Fund Solicitor shall develop a litigation strategy for the appropriate handling of the matter.

Prior to suit being filed, it is the CAS's responsibility to investigate, negotiate and settle claims in accordance with the maximum amount the "Certifying and Appointing Officer" may approve under the TRICOJIF's Risk Management Plan. However, once suit is filed, all of the further investigation and negotiations will be coordinated by the ADC, in consultation with the Fund Solicitor and the CAS after receiving the required authority from the Claims Review Committee. The ADC shall keep the Adjuster, the Supervisor of the CAS and the Fund Solicitor apprised of the status of all settlement negotiations.

When a settlement cannot be negotiated or it is determined that the claim will be aggressively defended, the CAS shall work closely with the ADC to complete all Discovery and then prepare the matter for the filing of a Summary Judgment Motion as expeditiously as possible. For cases in which the potential damages are significant, the CAS shall provide detailed quarterly reports of such claims to the Executive Director's Office, the Fund Solicitor, the Fund Solicitor for the Municipal Excess Liability (MEL) and the Claims and Litigation Manager for the MEL in accordance with the established "Large Loss" reporting requirements as outlined in their Contract and as required by the MEL.

When there is a proposed settlement of a claim, the CAS and the ADC shall be certain to immediately inform the appropriate representatives of the Member Municipality (Fund Commissioner, Claims Coordinator, Municipal Administrator and/or Municipal Clerk and the Municipal Solicitor for the Municipality) of the proposed terms of the settlement prior to finalizing the settlement. In addition, at the conclusion of the matter, the Member Municipality shall be provided by the CAS with a copy of the Complaint, Court Order Dismissing the case (if applicable) and any Settlement Agreement and/or Release and Settlement Check (if applicable).

# III. ROLE OF ASSIGNED DEFENSE COUNSEL AND APPROVED ASSOCIATES.

The TRICOJIF awards Contracts annually to ADC based upon an RFQ process that occurs every three (3) years. The ADC and their Approved Associates that are selected by the TRICOJIF after the RFQ process are the only Attorneys permitted to represent the TRICOJIF's Member Municipalities and /or employees, unless exceptional circumstances arise and the Fund Solicitor, with the approval of the Executive Committee of the TRICOJIF, determines that other Attorneys are required to provide representation on a particular matter. Therefore, ADC shall only utilize the ADC and the Approved Associates that are designated in their Contract with the TRICOJIF. If the contracted ADC, during the term of their Contract, desires to add additional ADC and/or Approved Associates to their Contract, ADC must submit the request to the Fund Solicitor together with the Resume of the individual or individuals being requested to be added. The Fund Solicitor shall review and evaluate the request, and if he determines that the request should be approved, he will present the request to the TRICOJIF Claims Review Committee in the form of a draft of a Resolution for their recommendation to the TRICOJIF Executive Committee. If the TRICOJIF Claims Review Committee recommends the addition to the ADC's Contract, the TRICOJIF Executive Committee shall vote on the Resolution, and if approved, the ADC and/or Approved Associate shall be added to the ADC's Contract.

The ADC who has been assigned to handle the litigation on behalf of a Member Municipality and/or its employee(s) owes the Member Municipality/employee the highest degree of care and good faith during his or her professional legal representation of that entity and/or individual. The Fund's contractual duty to provide a defense to the Member Municipality encompasses the expectation, by both the Member Municipality and the Fund, that ADC will use their best efforts to avoid or limit the liability of the Member Municipality, and to avoid or limit any assessment of damages against the Member Municipality. In all matters, the Fund expects that ADC will abide by the New Jersey's Rules of Professional Conduct and the TRICOJIF's Conflict of Interest Policy (attached hereto), and that the ADC will diligently, effectively and efficiently provide zealous representation of the Member Municipality and/or employee.

Once ADC has been assigned to defend a claim, the Fund expects ADC to take a very aggressive approach in the handling of the case. If warranted, it is required that Motions to Dismiss and Motions for Summary Judgment are to be filed at the earliest date possible in the litigation. In cases where it is determined that the litigation is frivolous (for example, based upon a lack of jurisdiction or otherwise), ADC shall immediately provide notice to the Plaintiff's Attorney in accordance with *R*. 1:4-8. Likewise, if the filing of a Motion to Dismiss is deemed to be appropriate, it should be filed at the earliest date possible. It is imperative that Motions for Summary Judgment are filed immediately upon the expiration of the Discovery End Date (DED), if not sooner. Those Motions should assert all of the available and applicable Title 59 defenses and any and all other defenses that are available in each particular case. It should be clear that the aggressive, pro-active approach of our ADC toward the pursuit of the early dismissal of cases will be expected and required.

It is expected by the Fund that time entries for extensive legal research will not appear on billings/invoices/memos from either the ADC or an Approved Associate. The Fund Solicitor maintains a Brief and Opinions Bank containing effective briefs and judicial decisions dealing with commonly litigated issues. This Brief and Opinion Bank is accessible by all ADC and Approved Associates. These briefs and opinions, together with the vast experience of our ADC in the defense of municipalities, should eliminate and control any extensive legal research expenses. If legal research is determined to be required, ADC must obtain the prior approval from the Fund Solicitor to conduct the legal research, and ADC should be prepared to provide an accurate estimate for the time required to perform the research to the Fund Solicitor.

There are certain litigation expenses that require ADC to obtain the prior approval from the CAS and the Fund Solicitor. Those expenses include but are not limited to expert's fees, the expense and costs associated with depositions that take place outside of the State of New Jersey and investigator's fees and expenses. ADC must submit a request for the approval of these litigation expenses at least sixty (60) days prior to the date required for the expense to be incurred.

On all litigated matters and all pre-suit assignments, ADC shall submit to the CAS and the Fund Solicitor the following: initial summary and analysis of the file after reviewing pleadings and the CAS file, written summaries of all discovery (Interrogatories, Requests for Production of Documents, Requests for Admission and Depositions); written summaries of all medical records received; written summaries and analysis of all expert opinions and reports received; written summaries prior to and after all mediation sessions; written summaries prior to and after any Arbitration Hearing; written summaries of any judicial decisions on Motions and written summaries of all settlement recommendations and/or negotiations. The goal of ADC shall be to provide these summaries within ten (10) days of the occurrence of the event. In addition, ADC shall regularly review their litigation budget as contained in their Reports, and they shall revise the budget when it is determined to be necessary. Any budget revision shall be accompanied by a detailed explanation for the revision.

When it has been determined that there is a proposal that may cause a claim to be settled, it shall be the primary responsibility of ADC to inform the appropriate representatives of the Member Municipality (Fund Commissioner, Claims Coordinator, Municipal Administrator and/or Municipal Clerk and the Municipal Solicitor for the Municipality) of the terms of the proposed settlement prior to finalizing the settlement. In addition, the Member Municipality shall be provided with copies of all executed Settlement and/or Release documents. Finally, upon the disposition of the claim, other than by settlement, the ADC shall immediately communicate this disposition to the appropriate representatives of the Member Municipality, and thereafter provide them with copies of any and all Court Orders memorializing the disposition.

While the Contracts between the TRICOJIF and ADC permit billing entries by Paralegals, the tasks billed by ADC's Paralegals shall be limited, and any clerical work which is performed by Paralegals shall not be billed.

Established procedures for the authorization of the delegation of litigation tasks by the ADC to Approved Associates have previously been adopted by the TRICOJIF. Those procedures are incorporated into these Litigation Management Guidelines and they are set forth below, and they should be strictly adhered to by all ADC and Approved Associates.

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#### PROCEDURES FOR THE AUTHORIZED DELEGATION OF LITIGATION TASKS BY ASSIGNED DEFENSE COUNSEL

- 1.) The Gloucester, Salem, Cumberland Counties Municipal Joint Insurance Fund (TRICOJIF) shall, by Resolution, annually award Contracts to all the Assigned Defense Counsel (ADC) and their Approved Associates that are permitted to provide representation of the TRICOJIF's Member Municipalities and/or their employees and/or their elected officials in accordance with the procedures set forth below.
- 2.) "Assigned Defense Counsel" shall be defined as very experienced and qualified defense attorneys who are partners in their Law Firms, and who have been approved after an RFQ process by a Resolution of the Executive Committee of the TRICOJIF to be awarded a Contract to serve as ADC to provide representation to the Member Municipalities of the TRICOJIF and/or their employees and/or their elected officials in General Liability, Automobile Liability, Police Civil Rights and Workers' Compensation matters.
- 3.) "Approved Associates" shall be defined as those individual attorneys, who are Associates of Assigned Defense Counsel's Law Firm, who are approved by a Resolution of the Executive Committee of the TRICOJIF, and may be assigned by Assigned Defense Counsel to perform certain authorized litigation tasks as herein delineated.
- 4.) When the Fund Solicitor issues an Assignment Letter to ADC, he/she should thoroughly review the Complaint and any CAS file materials received, perform the appropriate in-house conflict of interest review, and, if it is determined that no conflict exists, ADC shall forward an executed Acceptance of Assignment to the Fund Solicitor, the Claims Administrator Supervisor and the Claims Administrator Adjuster assigned to the file.
- 5.) ADC shall initially determine whether a *R*. 1:4-8 Frivolous Lawsuit Notice should be issued and whether a Motion to Dismiss should be filed, and if so, ADC shall draft, serve and/or file the Notice and Motion. ADC shall prepare and completely review the Answer that is to be filed with the Court to ensure that the appropriate Answers, Separate Defenses, Crossclaims and Third Party Claims have been included. All Answers are to be executed by the ADC only. While Approved Associates may assist in the preparation of the first draft of the Answer, the Answer must be reviewed, approved and executed by ADC prior to being filed with the Court.
- 6.) Written Discovery requests and responses may be drafted by Approved Associates; however, the drafts must be reviewed, approved and executed by ADC.
- 7.) The forwarding of Subpoenas, legal research projects, compilation of medical records, appearances at Scheduling Conferences, and discovery motion practice may be handled by an Approved Associate under the supervision of ADC. All discovery motions must be reviewed, approved and executed by ADC.
- 8.) ADC shall attend all meetings with representatives of the Member Municipality, and Approved Associates who have performed work on the matter shall be permitted to also attend these meetings.

- 9.) The ADC must attend all Discovery Depositions of the Plaintiffs, representatives of the Member Municipalities, and all expert Depositions. With regard to Discovery Depositions of fact witnesses to the litigation, the ADC should make every effort to attend said Depositions; however, if the ADC is unable to attend (due to a Trial commitment or is otherwise unavailable), an Approved Associate may attend and handle those Depositions with the prior approval of the Fund Solicitor.
- 10.) All Briefs in support of Motions for Summary Judgment must be prepared and executed by ADC. While an Approved Associate may assist in the preparation of the Brief, the ADC shall be primarily responsible for the preparation, review and execution of all Briefs submitted to the Court.
- 11.) ADC shall attend all Oral Arguments on Motions for Summary Judgment. There shall be no exceptions. However, Approved Associates who have performed work on the matter shall be permitted to also attend oral arguments on the Motion.
- 12.) All Arbitration and Mediation Statements must be prepared and executed by the ADC, and all Arbitration Hearings and Mediation sessions must be attended by the ADC. However, Approved Associates who have performed work on the matter shall be permitted to also attend Mediation sessions and Arbitration Hearings.
- 13.) All Settlement Conferences must be attended by the ADC. However, Approved Associates who have performed work on the matter shall be permitted to also attend the Settlement Conferences.
- 14.) All *de bene esse* Depositions must be conducted by the ADC. However, Approved Associates who have performed work on the matter shall be permitted to also attend the Depositions.
- 15.) All Appearances, Hearings, and Conferences in Workers' Compensation Court must be attended by ADC unless there has been prior approval granted by the Fund Solicitor for an Approved Associate to cover the appearance. However, Approved Associates who have performed work on the matter shall be permitted to also attend all Workers' Compensation Court Hearings and Conferences.
- 16.) All Trials must be attended and conducted by the Assigned Defense Counsel. There shall be no exceptions. However, Approved Associates who have performed work on the matter shall be permitted to also all Trials.

#### **IV. FUND SOLICITOR.**

The Fund Solicitor shall have the exclusive responsibility for the selection and assignment of ADC to all claims and litigation matters subject to the provisions of the Bylaws of the Fund. The Fund Solicitor shall assign and designate ADC to the handling and defense of the Member Municipalities and/or their employees and/or their elected officials from the ADC who have entered into Contracts with the TRICOJIF for that particular year and which have been annually approved by Resolution of the Executive Committee of the TRICOJIF. The Fund Solicitor shall be responsible to monitor and evaluate the performance of all of the ADC and Approved Associates, and he or she shall provide the Claims Review Committee and the Executive Committee of the TRICOJIF with an Annual Defense Panel Report, which analyzes the performance of the ADC and Approved Associates over the prior year. The Fund Solicitor shall actively participate and be involved in every claim and litigated matter on behalf of the TRICOJIF and the Member Municipalities, and he or she shall also perform evaluations of: the liability and damages issues in each case; the litigation strategies to be employed by ADC; the settlement values of cases; and the negotiation of the settlement of all cases. The Fund Solicitor shall have the responsibility to assist the CAS in the pre-litigation investigation and evaluation of claims, and he or she shall also monitor the performance and billings of all ADC and Approved Associates, and shall generally supervise, monitor and assist in the management of all claims and litigated matters. The Fund Solicitor shall actively resolve all issues and disputes between the CAS and ADC so as to ensure the orderly implementation and maintenance of the policies and guidelines outlined herein. Whenever necessary, the Fund Solicitor shall act as the liaison between the Fund, ADC, CAS and the Member Municipalities and their employees and elected officials.

At least annually, the Fund Solicitor shall organize a meeting with all ADC and Approved Associates to review current legal trends, these Litigation Management Guidelines and the policies, procedures and guidelines of the Fund as they relate to the efficient and effective defense of claims. In addition, the Fund Solicitor shall meet periodically with representatives of the CAS to discuss and evaluate the performance of ADC and Approved Associates, provide updates in the law that affect the claims against the Fund's member municipalities, provide advice on the handling of specific claims, and discuss the litigation strategies of the Fund. Finally, the Fund Solicitor shall periodically review and update the Litigation Management Guidelines.

## V. INTERACTION OF ALL PARTIES WITH THE GOAL OF PROMPT DISPOSITION.

The effective and efficient disposition of claims is dependent upon the communication, cooperation and assistance between the Fund Professionals (Fund Solicitor, ADC and CAS) who comprise the "Litigation Management Team". Each of these Fund Professionals shall be responsible for his or her designated assigned duties, responsibilities and tasks as delineated in these Litigation Management Guidelines, and it is essential that the Fund Professionals communicate and cooperate with one another in order to accomplish the effective, efficient and successful management of these claims.

The Fund Solicitor, ADC and the CAS each share the common goal of the prompt and effective disposition of all claims and any litigated matters. An exchange of ideas and opinions by the "Litigation Management Team" is not only encouraged, but is required, in order to not only properly identify and evaluate the liability and damages issues for each claim, but also outline the most effective claims management and litigation strategies available to defend the claim in the best interest of the Fund, the Member Municipalities and their employees and elected officials. The collaborative efforts of the Fund Solicitor, the ADC and the CAS, through regular communications, are necessary for effective and successful claims management.

Upon the assignment of a claim by the Fund Solicitor to ADC, the CAS and the Municipal Claims Coordinator for the Member Municipality shall immediately provide the ADC and the Fund Solicitor with all of the investigative documents and information gathered prior to the assignment of ADC in order to avoid the duplication of efforts by ADC. ADC should thereafter promptly advise and supply the Fund Solicitor and the CAS with all pertinent documents and information that he or she has obtained through their investigation of the claim. If additional investigation is determined to be required, the Fund Solicitor, the CAS, and the ADC shall collectively determine how the task will be accomplished most efficiently and who will accomplish the task. Regular communications must then continue between the members of the "Litigation Management Team" with a constant view toward the aggressive defense of the claim with the ultimate goal being the effective and timely disposition of the claim. The expeditious disposition of claims against the Fund is most often accomplished through the service of R. 1:4-8 Notices, the filing of Motions to Dismiss and the filing of Motions for Summary Judgment. However, there are some claims, based upon the identification of liability issues and/or the presence of significant injuries, that the exploration of the settlement of the claim is the best course of action. In these cases, the goal is to attempt to settle the claim early in the litigation process which may require the assistance of a Mediator. The Fund has identified Mediators who are very effective in settling cases, and it is in the best interest of the Fund and the Member Municipalities to direct these types of cases to these Mediators. The primary responsibility for determining the appropriate settlement authority shall be with the Fund Solicitor after consultation with the ADC and the CAS and as recommended by the Claims Review Committee, for approval by the Executive Committee, subject to the provisions of the Bylaws of the Fund and the Risk Management Program. It shall be the responsibility of the "Litigation Management Team" to effectively communicate to the Claims Review Committee and the Executive Committee the reasons why a case should be settled together with their respective opinions regarding the fair settlement value of the case. It shall then be determined by the Team how to best handle the settlement negotiations with the Plaintiff's Attorney.

As detailed previously in these Litigation Management Guidelines, if it is determined that there are liability issues and/or damages issues on a particular claim, and the Plaintiff's Attorney is not reasonable in his/her valuation of the claim, then the Mediation process shall be utilized. Through the collective efforts of the Fund Solicitor, ADC and the CAS, an appropriate Mediator shall be selected for each claim, and the matter shall proceed expeditiously with the goal being to dispose of the claim early in the litigation process prior to incurring substantial legal expenses.

## VI. FEES, COSTS, AND EXPENSES.

All ADC for the Fund have been chosen for their experience in aggressively defending municipalities, municipal employees and municipal elected officials in litigation, and for their vast knowledge of municipal law with emphasis on Title 59 and related issues. Therefore, it is expected that *pro-forma* briefs, motions, interrogatories, etc. should be billed accordingly. ADC is encouraged to utilize the Brief and Opinion Bank that has been established and maintained by the Fund Solicitor for the preparation of all briefs in support of Motions to Dismiss and Motion for Summary Judgment and Trial Briefs.

However, where a unique issue is involved and extraordinary research has been determined to be required, the ADC shall promptly notify the Fund Solicitor of their request and ADC shall provide the Fund Solicitor with a detailed explanation and justification for the request. The prior approval of the Fund Solicitor is required before incurring the expense and the ADC shall also provide an accurate estimate of the time that will be required to perform and complete the research. All conclusions, results and/or memoranda from the legal research should be submitted to the Fund Solicitor and CAS for their review.

On each claim, the ADC shall submit to the Fund Solicitor and the CAS the Quarterly Summary Invoices together with the Quarterly Litigation Report, and the ADC shall also simultaneously submit to the Fund Solicitor the "Confidential and Privileged Memo" containing all billing, itemized with detailed entries describing the work performed and delineating the time spent for each entry in onetenth of an hour increments with no reference to the monetary value of the increments. The date, description of the services rendered, and identity of the persons providing such service must be provided for each entry. The Fund should not be billed by Assigned Defense Counsel for the preparation of any Reports required by these Litigation Management Guidelines. Appropriate documentation must be provided for all out-of-pocket costs and disbursements. Each Summary Invoice shall reflect the current period outstanding fees plus cumulative paid fees and expenses from the inception of the legal activities of the claim. The Fund Solicitor shall review all "Confidential and Privileged Memos" to determine the appropriateness of the entries and the time allocated to each entry. The Fund Solicitor shall direct any questions and/or issues with the Memo directly to ADC. Once the Fund Solicitor has approved the "Confidential and Privileged Memo", he shall forward the Memo to the CAS for their subsequent review and approval. Any Billing Guidelines that are approved by the Fund shall be strictly adhered to by all ADC.

ADC shall not bill the Fund for office expenses such as postage, copies, mileage, tolls, legal research services, etc.. If an extraordinary expense is anticipated, the ADC shall request the approval of the Fund Solicitor prior to incurring any such expense, and said approval shall only be provided in extraordinary circumstances.

## VII. REVIEW OF LEGAL SERVICES.

Occasionally, the Fund may audit and review the legal product of ADC. It is expected that ADC will cooperate with the Fund and make available all files requested for review.

The review will address the overall quality of the legal work performed including the following:

- 1. Services performed by ADC:
  - a. Was contact promptly made with the representatives of the member municipality and the CAS?
  - b. Did the ADC follow the initial instructions and guidelines set forth by the CAS and the Fund Solicitor?
  - c. Were responsive pleadings filed in a timely manner?
  - d. Did ADC report recommendations for defending the claim to the CAS and the Fund Solicitor in a timely manner?
  - e. Did ADC perform any research that required prior authorization, and did the Fund benefit from the research?
  - f. Did the ADC promptly perform and provide reports regarding all reasonable and necessary discovery?
  - g. Did ADC effectively communicate with all necessary parties at all stages of the litigation?
  - h. Did ADC aggressively move the case to a conclusion and was there a constant attempt to seek early disposition?
  - i. Did ADC submit required reports, billings and budgets on a complete and timely basis, and were these reports, billings and budgets accurate?
  - j. Did ADC promptly file the appropriate Motions to Change Venue, Dismiss the Complaint and or For Summary Judgment?
  - k. Did ADC effectively and timely communicate the disposition of the claim to the Member Municipality, and provide the Member Municipality with copies of all of the settlement documents?
- 2. The legal fees for the legal services rendered compared with the legal work performed:
  - a. Were the time and event entries contained in the "Confidential and Privileged" Memos in accordance with the Litigation Management Guidelines and were the time entries reasonable?

- b. Were the time and event entries itemized to one-tenth of an hour?
- c. Were the time and event entries submitted quarterly in accordance with the Litigation management Guidelines?
- d. Were the time and event entries excessive for the work that was performed?
- e. Were the services performed and/or the legal fees charged commensurate with the complexity of the case assigned?
- f. Were the time and event entries for each task appropriate?
- g. Were the costs billed appropriately and did the ADC receive approval from the Fund Solicitor prior to incurring the costs?

## VIII. CONCLUSION.

The purpose of these Litigation Management Guidelines is to detail the expectations of the CAS, ADC, Approved Associates and the Fund Solicitor in the handling of claims on behalf of the Fund and the Member Municipalities. It has been determined that adherence to these Guidelines will result in the most efficient and effective handling and disposition of litigation, and will also produce a cost-effective benefit to the Member Municipalities of the Fund. The Fund firmly believes that an aggressive and consistent Litigation Management Philosophy that is consistently implemented by the Litigation Management Team, in accordance with these Litigation Management Guidelines, is in the best interest of the Fund and its Member Municipalities.

#### SAMPLE ASSIGNMENT LETTER

\_\_\_\_\_, 2024

Attorney Address

Re:

Dear \_\_\_\_:

Enclosed herewith please find a copy of a Summons and Complaint which have been filed in the above-captioned matter in the Superior Court of New Jersey, County of \_\_\_\_\_\_. I am assigning the defense of this matter to you on behalf of the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund (TRICOJIF) member, \_\_\_\_\_\_.

This matter arises from the Plaintiff's allegations as contained in the Complaint that on

Initially, I would request that you immediately make the appropriate investigation in your office to determine whether a conflict exists regarding this matter. Please advise Qual-Lynx, as well as my office, as soon as possible, if a conflict does, in fact, exist.

Please adhere to the Litigation Management Guidelines of the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund in the handling of this matter. In accordance with those Guidelines, the Initial Acceptance of Assignment should be returned immediately, the Thirty (30) Day Report will be due on , and the Sixty (60) Day Report will be due on

The Qual-Lynx Claims Adjuster handling this matter is \_\_\_\_\_, and \_\_\_\_, Claim Supervisor, and I should be provided with copies of all reports regarding this matter.

All billings must be submitted quarterly, with the original bill going to the claims adjuster and copies to this office and the claims supervisor. The bills must be attached to the quarterly report as outlined in the Litigation Management Guidelines.

Be advised that all Independent Investigations, Independent Medical Examinations and Expert Witnesses which may be required in this matter are to be coordinated through the Claims Adjuster and Claims Supervisor from Qual Lynx.

Attorney Re: Date Page Two

Within five (5) to ten (10) days, you will be receiving a copy of the Qual Lynx file concerning this matter. If you have not received this information within said time period, please contact me immediately.

As I am sure you are aware, these General Liability matters are reviewed on a monthly basis by the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund Executive Committee. Therefore, any settlement authority in this matter must be approved by the Committee, which in some cases may take up to thirty (30) days.

Finally, be advised that the Municipal Claim Coordinator for \_\_\_\_\_\_ is \_\_\_\_\_, at \_\_\_\_\_. Any requests for information for answers to Interrogatories and the scheduling of Depositions should be arranged through said Municipal Claims Coordinator.

If you have any questions or need for additional information, please do not hesitate to contact me.

Very truly yours, *THE DEWEESE LAW FIRM, P.C.* 

David S. DeWeese

DSD/b	
Enclosure	
cc:	, Executive Director, ACMJIF
	, Qual Lynx Account Manager
	, Qual Lynx Claim Supervisor
	, Claim Adjuster, Qual Lynx Associates
	, Fund Commissioner
	, Municipal Claim Coordinator

## OUTLINE OF REPORTS TO BE SUBMITTED BY ASSIGNED DEFENSE COUNSEL TO THE CLAIMS ADMINISTRATOR AND THE FUND SOLICITOR

- I. <u>Initial Acceptance of Assignment</u>. To be returned immediately upon receipt of assignment. (Form)
- II. <u>Thirty (30) Day Report</u>. To be completed within thirty (30) days of the Assignment. (Form)
- III. <u>Sixty (60) Day Report</u>. This Report is identical to the Thirty (30) Day Report. The Thirty (30) Day Report should be copied and that portion which was not completed should be answered and any changes necessary should also be made to the form. All additions and/or revisions should be highlighted in "BOLD". (Form)
- IV. <u>Quarterly Report</u>. These Reports are due at the end of every quarter subsequent to the filing of the Sixty (60) Day Report. The Report should indicate the status since the last report and the tasks that are anticipated to be completed in the next quarter. (Form)
- V. <u>Discovery Completion Report</u>. This Report is a narrative that is due within ten (10) days of the Discovery End Date. The items to be contained in this Report are as follows:
  - A. General statement of facts, with references to the relevant interrogatory answers and testimony at depositions;
  - B. Assessment of liability, with reference to Statutory Law and Case Law, if necessary;
  - C. Assessment of damages, with reference to the method of determination and a detailed description of the Plaintiff's injuries and the Plaintiff's current condition. If possible, the determination of damages should be broken down into the various components, such as pain and suffering, lost wages, loss of services, property damage, etc.
  - D. Assessment of the credibility of all parties and witnesses.
  - E. Recommendations of Assigned Defense Counsel. For example, is the case able to be settled? Should it be settled or should the case proceed to Arbitration or Mediation? Are there any Motions that should be filed, and if so, what type of Motion should be filed and when will it be filed? What is the likelihood of success on any Motion to be filed?
- VI. <u>Pre-Arbitration/Pre-Mediation Report</u>. This Report must be submitted at least fifteen (15) days prior to any scheduled Mediation and/or Arbitration. (Form)
- VII. <u>Post-Arbitration/Post-Mediation Report</u>. This report must be submitted within seven (7) days after the Mediation and/or Arbitration. This Report should not be a review of all of the facts of the case, but instead it should indicate who attended the session, Assigned Defense Counsel's impressions of all individuals who were present, Assigned Defense Counsel's evaluation of the Mediator or Arbitrators, the results of the Mediation/Arbitration, the rationale of the Arbitrators in arriving at their decision or the opinion of the Mediator as to the fair settlement value of the case, and Assigned Defense Counsel's recommendations as to whether the case should be settled or whether the case should proceed to Trial. (Form)
- VIII. <u>Pre-Trial Report</u>. This Report must be submitted at least thirty (30) days prior to the scheduled date for Trial. (Form)

- IX. <u>Miscellaneous Reports</u>. The Assigned Defense Counsel should advise the Claims Administrator's staff and the Fund Solicitor when a significant event or change in Assigned Defense Counsel's analysis occurs during the course of the litigation. For example, if a witness suddenly appears who can have a determinative effect on liability or damages, or if facts are determined that might adversely impact the claim or the defense of any party, notice should be provided immediately. This Report should be communicated by way of correspondence. Additionally, the Claims Administrator's staff and the Fund Solicitor must immediately receive copies of all Motions filed by any party, the return dates of the same as well as the dates of all other scheduled appearances, such as Arbitration, Mediation, Oral Argument, etc.
- X. <u>Post-Litigation Analysis</u>. To be submitted within ten (10) working days of the completion of the litigation, whether the case was settled, dismissed, or tried to a verdict. (Form)

Please note that the original of all reports, along with any enclosures, is to be forwarded to the Claims Adjuster assigned to the claim. A copy of the Reports, with copies of enclosures, must be emailed to the Fund Solicitor, and a copy of the Reports <u>only</u> is to be emailed to the Claims Supervisor. The Claim Administrator's staff and the Fund Solicitor should receive copies of all pleadings.

## **INITIAL ACCEPTANCE OF ASSIGNMENT**

CA	PTION:						
ME	MBER	MUNICIPA	LITY/EMPL	OYEE:			
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DA	<b>FE OF</b> ]	LOSS:					
						D TO HANDL	
то	THE	GLOUCES	TER SALE	M CUMB	ERLAND	COUNTIES	MUNICIP

## TO THE GLOUCESTER SALEM CUMBERLAND COUNTIES MUNICIPAL JOINT INSURANCE FUND:

Ι	have	been	assigned	the	above	captioned	matter	to	defend	the	litigat	ion	on	behalf	of
								•	Our	Law	Firm	here	by	makes	the
fo	llowin	g repres	sentations t	to the	Glouce	ster Salem (	Cumberla	and	Counties	Muni	icipal J	oint I	nsu	rance Fu	ind:
1.	As	signed	Defense	e (	Counsel	who	shall	be	respor	nsible	for	th	is	file	is:

2. The Approved Associate(s) who will also perform work on this file is (are):

3. The Assigned Defense Counsel, the Approved Associate(s) and this law firm have the experience and requisite ability necessary to handle this matter.

4. The Assigned Defense Counsel, the Approved Associate(s) and this law firm will have the time available to properly represent the member municipality and/or its employee(s), including the preparation for and attendance at all depositions, hearings, and trial.

5. The Assigned Defense Counsel, the Approved Associate(s) and this law firm will comply with the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund's Litigation Management Guidelines and all of the policies and procedures relating to litigation (including billing procedures).

6. The Assigned Defense Counsel, Approved Associate(s) and this law firm have no ethical or legal conflicts that would disqualify the firm or the attorney(s) from representing the defendants insured by the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund in the pending litigation.

Law Firm:		
BY:		
	Esquire	
Date:	_	

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Original:	Claims Adjuster	(with enclosures)
cc:	Fund Solicitor: David S. DeWee Claims Supervisor:	se, Esquire (with enclosures) (without enclosures)
	_ 30 Day Report (Due _ 60 Day Report (Due	

## DEFENSE ATTORNEY'S SUIT STATUS REPORT

THE COMPLETED THIRTY -DAY REPORT SHOULD BE COPIED AND USED AS THE BASIS FOR THE SIXTY-DAY REPORT.
(Attach extra sheets, if necessary)
DATE OF REPORT:
CAPTION:
MEMBER MUNICIPALITY/EMPLOYEE:
QUAL LYNX CLAIM NO:
DATE OF LOSS:
A. GENERAL INFORMATION
A. 1. <u>PLAINTIFF</u> Name:
Age:
Marital Status:
No. of Dependents:
A. 2. <u>CO-DEFENDANT(S)</u>
A. 3. THIRD PARTY DEFENDANT (S)
A. 4. Have you received the contents of the file from Qual Lynx?
Yes No
A. 5. Does the file contain all information and/or documentation necessary to evaluate the liability and damages issues in this case?
Yes No
If not, what information and documentation is required?
<b>B. LITIGATION INFORMATION</b>
B. 1.       Court:         Venue:       Jury Trial:       Yes No         Bifurcation:       Yes No

	Designated Trial Counsel:
This Defe	endant:
Co-Deren	idant(\$):
Plaintiff:	try Defendant(a)
Plaintiff's	ty Defendant(s):s Attorney's Experience:
B. 3.	Date Complaint Filed:
Date Ans	wer Filed:
Date Cros	
Date Thir	d Party Claim Filed:
Names of	Third-Party Defendant (s):
riivolous	Lawsuit Notice (K. 1.4-8) to Flaintin's Attorney.
B. 4.	Plaintiff's Cause(s) of Action (Negligence, wrongful death, civil rights, property damage, etc.)
	Interrogatories Propounded Yes No
Date Ans	wers to Interrogatories propounded by this Party are due:
CO-Delei	lualits
T IIII u F al	ly Detendant(S)
Parties up	oon whom Interrogatories were propounded:
	Depositions Scheduled: Yes No
Date(s): _	d Witnesses to be democed
r arties an	d Witnesses to be deposed:
B. 7.	Discovery End Date:
B. 8.	Anticipated Trial Date:
B. 9. P	laintiff's Demand for Damages: (Pursuant to <u>R.4:52</u> )
	C. PRELIMINARY LITIGATION STRATEGY
C. 1.	Should any party (ies) be added Yes No
	ate name(s) and what has been (will be) done to add said party(ies):
C. 2.	Is (Are) there any unknown party(ies)? Yes No y been appropriately noted at time Answer filed? Yes No
Have they	been appropriately noted at time Answer filed? Yes No
Are any s	pecial investigative services required to determine identity? Yes No
Explain:	
·	
	25
	25

C. 3. Will any preliminary Motions be required? (Venue, Jurisdiction, Motion to Dismiss, Title 59 defenses, Summary Judgment, etc.)? State nature of Motion, factual basis for same, and return date or anticipated return date
C. 4. Besides the standard negligence defenses, have any special defenses been asserted (e.g., Title 59 defenses)? Yes No If Yes, state the nature of the defense and factual basis for same
C. 5. Do you suggest any additional investigation? Yes No If Yes, explain in further detail:
C. 6. Are any Motions by any party (including this Defendant) to be anticipated at the completion of discovery? Yes No If Yes, set forth nature of Motion and basis for same.
When do you anticipate that these Motions will be filed?
C. 7. Do you anticipate the need for any type of expert witnesses on behalf of this Defendant? (e.g., independent medical examination, accident reconstruction, police professional, etc.)? Yes No If Yes, explain in further detail:
C. 8. Do you have any comments or suggestions regarding the preliminary litigation strategy?

C. 9. Do you recommend that this matter be submitted to Mediation? If so, when would you anticipate that the Mediation Process would commence and who would you recommend as the Mediator?

## D. DEFENSE ATTORNEY'S ASSESSMENT OF EXPOSURE

D. 1. <u>DAMAGES</u> Pain and suffering: Lost Wages: Punitive: Property Damage: Per Quod:

D. 2.		
D. 3. If Yes, giv the plainti	Liability as against this defendant: Ye ye your assessment of percentage of liabili ff's contributory and/or comparative negli	No No ity of this defendant, co-defendants, third party defendants, and igence and the factual basis for same:
If No, set	· ·	se this assessment:
Has your a Yes If Yes, exp		d since the initial assessment?
30 Day Re	Your assessment of the value of this caseport	se today:
30 Day Re	Recommended settlement offer today: eport eport	
Through t	completion of discovery: completion of ESP/Arbitration: rial:	- 
Should the	e Initial Budget be revised, and if so, why	·
D. 8. Explain:	Have there been any settlement negotia	tions? Yes No
	MISCELLANEOUS COM	MENTS BY DEFENSE ATTORNEY
		ASSIGNED DEFENSE COUNSEL
		Defense Attorney (30-Day Report)
		Defense Attorney (60-Day Report)
Original: cc:	Claims Administrator: Fund Solicitor: David S. DeWeese Claims Supervisor:	, Esquire (with enclosures) (without enclosures)

## **QUARTERLY LITIGATION REPORT**

#### TO BE FILED BY THE END OF EACH CALENDAR QUARTER SUBSEQUENT TO THE SUBMISSION OF THE SIXTY (60) DAY REPORT (Attach extra sheets, if necessary)

DATE	OF REPORT:
САРТ	ION:
MEM	BER MUNICIPALITY/EMPLOYEE:
QUAL	LYNX CLAIM NO:
DATE	OF LOSS:
1.	Date of last report submitted.
2.	Have all interrogatories propounded on behalf of this Defendant been answered? YesNo If No, set forth the name(s) of the party(ies) with overdue answers, when the answers were due, and what is being done to obtain answers:
3.	Has discovery been completed? YesNo
4.	State, in narrative form, what has transpired since the submission of the last report.
5.	What actions do you intend to take within the next calendar quarter in regard to this matter?
6.	Have any settlement negotiations taken place since the submission of the last report YesNo Explain:
7.	Do you anticipate filing any Motions, such as a Motion to Dismiss or a Motion for Summary Judgment in the matter? YesNo If so, when do you anticipate filing the Motion?
8.	Are you recommending that this matter be submitted to Mediation? Yes <u>No</u> If so, when will the matter be submitted to Mediation?
9.	Has anything happened since the submission of your last report that would change your assessment of liabilit

. Has anything happened since the submission of your last report that would change your assessment of liability or damages or your litigation budget? Yes\_\_\_\_\_ No\_\_\_\_\_ Explain:

- Do you anticipate the need for any type of expert witness on behalf of this defendant (e.g. independent medical examination, accident reconstruction, police professional, etc.)?
   Yes \_\_\_\_\_ No \_\_\_\_\_
   Explain:
- 11. Miscellaneous comments of defense counsel:
- 12. Attach quarterly billing to this report.

Assigned Defense Counsel: \_\_\_\_\_

BY: \_\_\_\_\_

Esquire

Original:	Claims Administrator:	(with enclosures)
cc:	Fund Solicitor: David S. DeWeese, Esquire (with enclosures)	. ,
	Claims Supervisor: (without enclosures)	

## PRE-ARBITRATION/PRE-MEDIATION REPORT

#### TO BE SUBMITTED AT LEAST FIFTEEN (15) WORKING DAYS BEFORE THE SCHEDULED ARBITRATION/MEDIATION (Attach extra sheets, if necessary)

DATE	OF REPORT:
САРТ	ION:
MEM	BER MUNICIPALITY/EMPLOYEE:
QUAL	LYNX CLAIM NO:
DATE	OF LOSS:
1.	Scheduled Date of Arbitration/Mediation:
2.	Is this matter ready to proceed to Arbitration/Mediation? Yes No
	If No, set forth why:
3.	Name of the Attorney who will be preparing the Arbitration/Mediation Memorandum and appearing at the Arbitration: If different from original attorney, state why:
4.	If representatives/witnesses are to be present at the Arbitration/Mediation, have proper arrangements been made for their attendance, including the service of subpoenas? YesNo If No, set forth why:
5.	Have representatives of the Member Municipality received notice of the date for the Arbitration/ Mediation? If so, who received notice?
6.	Who will be appearing at the Arbitration/Mediation on behalf of the Member Municipality?
7.	Attach copy of any Arbitration/Mediation Memorandum that you intend to submit to the Arbitrators/Mediator.
8.	Miscellaneous comments of Assigned Defense Counsel:
	Assigned Defense Counsel:
	BY:
	BY:Esquire
Origina cc:	al: Claims Administrator: (with enclosures) Fund Solicitor: David S. DeWeese, Esquire (with enclosures) Claims Supervisor: (without enclosures)

#### POST ARBITRATION/POST MEDIATION REPORT

#### TO BE SUBMITTED WITHIN FIVE (5) DAYS UPON COMPLETION OF ARBITRATION (Attach extra sheets, if necessary)

DATE OF REPORT:	
CAPTION:	
MEMBER MUNICIPALITY/EMPLOYEE:	
QUAL LYNX CLAIM NO:	
DATE OF LOSS:	

- 1. What was the assessment of liability placed on each of the parties by the Arbitrators? Describe their analysis of the liability issues:
- 2. Attach copy of the Report of Arbitration containing the decision of the Arbitrators.
- 3. What was the assessment of the Plaintiff's damages by the Arbitrators? Be certain to clarify whether the assessment of damages was for the full value of the Plaintiff's injuries or if the figure was simply the amount the Arbitrators determined the Plaintiff should receive.
- 4. Who attended the Arbitration on behalf of the Member Municipality?
- 5. What were the names of the Arbitrators?

Describe the experience of the Arbitrators, if known:

- In your opinion, did the Arbitrators fully comprehend the factual and/or legal issues? Yes\_\_\_\_\_No\_\_\_\_\_
   If answer is No, explain:
- 7. Does plaintiff's attorney indicate a willingness to settle this matter at the figure set forth by the Arbitrators? Yes <u>No</u> If No, set forth what he would be willing to settle the case for and any reasoning he gave you therefor:
- In your opinion, should the case be settled for the amount set forth by the Arbitrators?
   Yes \_\_\_\_\_ No \_\_\_\_
   Explain, with reference to your opinion as to whether or not the case should be settled, and the amount which you would propose to offer.

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- 9. Should a Trial De Novo be requested and filed on behalf of the client? Yes No Explain and indicate the date by which the Trial De Novo must be filed.
- 10. Were you satisfied with results of Arbitration? Yes\_\_\_\_No\_\_\_\_ Explain:
- 11. Did the results of the Arbitration change your assessment of this case? Yes\_\_\_\_No\_\_\_\_ Explain:
- 12. Additional comments by Assigned Defense Counsel:

Assigned Defense Counsel: \_\_\_\_\_

BY: \_\_\_\_\_

Esquire

#### PLEASE ADJUST THE CONTENT OF THIS REPORT FOR MEDIATIONS.

## PRE-TRIAL REPORT

#### TO BE SUBMITTED AT LEAST THIRTY (30) DAYS PRIOR TO THE FIRST SCHEDULED DATE FOR TRIAL (Attach extra sheets, if necessary)

DATE	OF REPORT:		
САРТ	ION:		
MEM	BER MUNICIPALITY/EMPLOYEE:		
QUAL	LYNX CLAIM NO:		
DATE	OF LOSS:		
1.	Is this matter ready to proceed to trial? YesNo If No, explain:		
2.	Scheduled Trial Date: Name of Judge:		
3.	Have arrangements been made for all witnesses, including expert witnesses, to appea trial? YesNo If No, explain:	r at the	time of
	Will there be any de bene esse depositions?		
	Of whom?		
4.	<ul> <li>Will any requests be made for special jury instructions?</li> <li>Yes <u>No</u> No</li> <li>Explain: (If special request to be made, attached copies of same.)</li> <li>Will you submit <i>voir dire</i> questions for the jury?</li> </ul>		
	If so, please attach copies.		
	Have you prepared a Witness List? If so, please attach a copy.		
5.	Should any attempt be made to settle this matter prior to trial? YesNo Explain:		
6.	Will you submit voir dire questions for the jury? If so, please attach copies.		
7.	Have you prepared a witness list? If so, please attach a copy.		
8.	Should any additional attempts be made to settle this matter prior to trial? Explain.		

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- 9. Have representatives of the Member Municipality received notice of the trial date? If so, who received the notice?
- 10. As succinctly as possible, set forth your trial strategy.
- 11. What is your assessment of the probability of success if the matter proceeds to Trial?
- 12. Who (Assigned Defense Counsel) will be handling the Trial on behalf of the member?

Assigned Defense Counsel: \_\_\_\_\_

BY: \_\_\_\_\_

Esquire

Original:	Claims Administrator:	(with enclosures)
cc:	Fund Solicitor: David S. DeWeese, Esquire (with enclosures)	· · · · · ·
	Claims Supervisor:	(without enclosures)

## POST-LITIGATION ANALYSIS

#### TO BE SUBMITTED WITHIN TEN (10) DAYS OF COMPLETION OF LITIGATION (Attach extra sheets, if necessary)

DATE OF REPORT:	
CAP	ΓΙΟΝ:
MEN	IBER MUNICIPALITY/EMPLOYEE:
QUA	L LYNX CLAIM NO:
DAT	E OF LOSS:
1.	This case was concluded by: Settlement, Dismissal, or Jury Verdict
2.	Set forth the final terms resulting from the Settlement or Trial of this matter:
3.	How did this result compare with your analysis of the case throughout Litigation?
4.	Did this case conclude along the lines of the Arbitration/Mediation? Explain:
5.	If tried to verdict, do you anticipate anyone, including this party, filing an appeal? YesNo Explain:
6.	Did you receive proper cooperation from the Claims Administrator's office? YesNo Explain:

7. Do you have any recommendations how cooperation and communication between the Assigned Defense Counsel, the Fund Solicitor and the Claims Administrator' staff can be improved in the future?

- Did you receive proper cooperation from the Fund Solicitor's office? Yes\_\_\_\_\_No\_\_\_\_. Explain:
- 9. Do you have any recommendation as to how the relationship between the Assigned Defense Counsel and the Fund Solicitor can be improved in the future?
- 10. Were you satisfied with your and your firm's performance on behalf of the defendant in this matter?
   Yes No
   If No, explain:
- Did you receive proper support services, such as investigation, from the Claims Administrator?
   Yes No\_\_\_\_\_.
   If No, explain:
- 12. If any expert witnesses were utilized in representing this defendant, whether medical or non-Medical, please evaluate each expert witness in terms of knowledge, abilities, cooperation with the defense, and their credibility. Would you use this expert in the future?
   Yes No
   Yes No
   If No, explain:
- In dealing with the Municipal Claims Coordinator and Municipal representatives for the member municipality, did you receive their full cooperation?
   Yes No\_\_\_\_\_\_
   If No, explain:
- Were the representatives of the Member Municipality provided with notice of the outcome of the litigation?
   Yes No
   If so, who was provided with notice and how was the notice provided?
- 15. Please utilize this space to make any post-litigation comments you may have. These comments should include reference to the administrative procedures of the Fund, the degree of cooperation between and among the Assigned Defense Counsel, Claims Administrator's staff, Fund Solicitor and the Member Municipalities representatives.

Assigned Defense Counsel:

BY: \_\_\_\_\_Esquire

Original:	Claims Administrator:	(with enclosures)
cc:	Fund Solicitor: David S. DeWeese, Esquire (with enclosures)	
	Claims Supervisor:	(without enclosures)

## GLOUCESTER SALEM CUMBERLAND COUNTIES MUNICIPAL JOINT INSURANCE FUND CONFLICT OF INTEREST POLICY

The Commissioners of the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund have determined that the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund is distinguished from commercial insurance providers by virtue of the fact that it is formed by Municipalities, it is funded by public monies (Taxpayer Dollars) appropriated by the Member Municipalities, it serves a public purpose and is responsible for the discharge of its function in a manner consistent with the ethical policies applicable to Municipal Government. As a result, the Fund has adopted a policy applicable to potential conflicts of interest by the officials and professional staff of the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund.

## **Findings:**

1. The Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund is a joint enterprise of the following municipalities:

Alloway Township, Carneys Point Township, Borough of Clayton, Deptford Township, East Greenwich Township, Elk Township, Elsinboro Township, Fairfield Township, Franklin Township, Borough of Glassboro, Greenwich Township, Harrison Township, Logan Township, Lower Alloways Creek, Mannington Township, Mantua Township, Monroe Township, Oldmans Township, Borough of Paulsboro, Borough of Penns Grove, Pennsville Township, Pilesgrove Township, Borough of Pitman, Quinton Township, Shiloh Borough, South Harrison Township, Borough of Swedesboro, Upper Pittsgrove Township, Vineland City, Washington Township, Borough of Wenonah, Borough of Westville, City of Woodbury, Borough of Woodbury Heights, Borough of Woodstown, Woolwich Township, providing those municipalities with General Liability, Police Professional, Property, Workers' Compensation, Cyber Liability and Employment Practices Liability and Public Officials Liability coverage.

2. The municipalities which are members of the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund are jointly responsible for the defense and payment of claims against each other in accordance with the standards and limitations applicable to the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund.

3. While in some aspects of its activity the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund functions in a manner similar to that of a commercial insurance provider, it is clearly distinguished by the fact that it is created by the Member Municipalities; it is governed by Fund Commissioners appointed by the Member Municipalities; its funding is provided exclusively by the Member Municipalities and thereby constitutes public funds; those associated with the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund are compensated with those public funds; the function of the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund is to fulfill a public purpose by providing insurance coverage exclusively to its Member Municipalities; there is a need for those appointed by the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund to freely discuss and evaluate potential liability exposures of the Member Municipalities and to receive information on municipal activities and operations in the same manner as those directly appointed by the Member Municipalities to advise them; and the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund is bound by many of the same laws and regulations applicable to Municipalities with regard to financial records, public contracts and public meetings.

## **Conflict of Interest Policy**

4. It is hereby determined by the Fund Commissioners of the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund that it is in the best interests of the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund and the Member Municipalities to establish a policy regarding potential conflicts of interest affecting those appointed or retained by the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund.

5. It is further determined that it would be inappropriate for an individual appointed or retained by the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund, or for any person owning or employed by the business entity with which the appointed individual is associated, to undertake the representation or appearance on behalf of a party in a matter or claim adverse to that of the Member Municipalities. The potential conflict of interest or appearance of a conflict of interest specifically extends to the assertion of claims against the Member Municipalities and to appearances before agencies of those Municipalities.

6. In determining the nature and extent of the conflict-of-interest policy, guidance can be drawn from the Opinions of the Advisory Committee on Professional Ethics that address the restrictions on Municipal Attorneys and those associated with their law offices and the reasons underlying those Opinions. In adopting this Policy, however, the Fund Commissioners of the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund are aware of Opinion No. 640 issued for attorneys by the Advisory Committee on Professional Ethics which compared a Municipal Joint Insurance Fund to a commercial insurance company and determined that there was not a conflict between representing a Joint Insurance Fund and appearing before a Municipal Agency. To the extent of the policy adopted by this Resolution, the Commissioners of the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund do not adopt the rationale of Opinion No. 640 and hereby determine that the nature of the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund; its creation by the Member Municipalities; its funding by the Member Municipalities; its governance by the Municipal Officials appointed by the Member Municipalities and the need to share confidential information regarding potential liabilities affecting the Member Municipalities is sufficient to present a potential conflict of interest or the potential for an appearance of a conflict of interest and that the same must be avoided by those associated with the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund.

#### **Exceptions.**

7. The general policy prohibiting those retained or appointed by the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund from appearing before agencies of the Member Municipalities shall not be applicable to the representation of parties in the Municipal Court for motor vehicle violations, including drunk driving, provided that the defense is not based upon and the parties are not asserting any claim against a police officer, a Municipal Employee or the Municipality for any alleged wrongful or improper action. It is noted that even traffic violations require sensitivity to potential conflicts, since charges arising out of a motor vehicle accident, could well result in a subsequent claim against the Municipality. Those situations which would present a conflict of interest between the representation of a client and the representation of municipal interests should be avoided. Claims against Member Municipalities will need to be evaluated and defended by the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund and the defense should not be compromised by the representation of a party asserting a claim.

8. The general policy prohibiting those retained or appointed by the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund from appearing before agencies of the Member Municipalities may be waived with regard to the representation of parties with minor development applications before the Planning Board or the Zoning Board of Adjustment. Where a person retained or appointed by the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund seeks to appear before the Planning Board or the Zoning Board of Adjustment of a Member Municipality for any relatively minor application, in which there is not a substantial adversarial relationship to the Municipality, a waiver of the conflict-of-interest policy may be requested for that application. The request for the waiver shall be reviewed by the Executive Director and the Solicitor for the Gloucester Salem Cumberland Counties Municipality in which the application is to be considered to the Gloucester Salem Cumberland Counties Municipal Joint Insurance Fund to determine whether a waiver shall be allowed in the particular matter after considering the nature of the application and whether any use or significant bulk variances are requested.

9. Nothing in the policy adopted herein shall bar an individual from representing or appearing for himself or herself or a member of his or her immediate family residing with him or her before any municipal agency.

# SAFETY DIRECTOR REPORT

## Gloucester, Salem, Cumberland Counties Municipal Joint Insurance Fund

- TO: Fund Commissioners, Safety Coordinators, and Risk Managers
- FROM: Keith Hummel, JIF Safety Director

DATE: April 3, 2024

J.A.Montgor

## J. A. MONTGOMERY CONSULTING SERVICE TEAM & LOSS CONTROL ACTIVITIES

Keith Hummel Associate Public Sector Director <u>khummel@jamontgomery.com</u> Office: 856-552-6862 Fax: 856-552-6863	Robert Garish Assistant Director Public Sector rgarish@jamontgomery.com Office: 856-552-4650 Cell: 609-947-9719	Jacqueline Cardenosa Risk Control Consultant jcardenosa@jamontgomery.com Office: 856-552-6888
Thomas Reilly Risk Control Consultant <u>treilly@jamontgomery.com</u> Office: 856-446-9205	Mailing Address: TRIAD 1828 CENTRE Cooper Street, 18 <sup>th</sup> Floor Camden, NJ 08102 P.O. Box 99106 Camden, NJ 08101	Melissa Meccariello Administrative Assistant <u>mmeccariello@jamontgomery.com</u> Office: 856-479-2070 Cell: 609-756-7333

## LOSS CONTROL SURVEYS

- Borough of Pitman on March 5, 2024
- Township of Hopewell on March 5, 2024
- Township of Monroe on March 7, 2024
- Borough of Paulsboro on March 15, 2024
- Township of Elk on March 19, 2024
- Borough of Swedesboro on March 20, 2024
- Township of Washington on March 21, 2024
- Township of Upper Pittsgrove on March 28, 2024

## LAW ENFORCEMENT LOSS CONTROL SURVEYS

• No Law Enforcement Loss Control Surveys were completed in March.

## MEETINGS ATTENDED

- Claims Committee Meeting on March 25, 2024
- Executive Fund Committee Meeting on March 25, 2024

## MEL SAFETY INSTITUTE (MSI)

All MSI communications will be distributed exclusively through the NJ MEL app, and an MSI Newsletter will be emailed to summarize the communications sent through the app.

If you would like to receive communications from MEL and MSI related to your position or operations, follow the directions to select from the list of available Push Notification "subscriptions." Click here for <u>NJ MEL App</u> <u>Directions</u>.

## MSI SAFETY DIRECTOR

- MSI Leadership Academy
- March Is Ladder Safety Month
- Fall Protection: Understanding Warranty Requirements
- MSI Expo: Morris County Public Safety Training Academy, Wednesday, April 3, 2024, 8:30 am
- Hand Laceration Prevention Best Practices
- Respirators: Counterfeit P100 Filters
- New LMS
- MSI LIVE Schedule

## MSI LAW ENFORCEMENT

- Juvenile's Right to Attorney Representation MSI LE Bulletin
- E-Bikes E-Scooters & Bicycle Considerations MSI LE Bulletin
- Work Zone Training MSI LE Training Announcement

#### MSI NOW

<u>MSI NOW</u> provides on-demand streaming videos and online classes that can be viewed 24/7 by our members. Topics pertain to many aspects of safety, risk control, employment practices, and supervision, and most can be viewed in under 20 minutes.

MSI NOW	
Municipality	Number of Videos
Hopewell	1
Lower Alloways Creek	1
Oldmans	3
Pennsville	10
Pilesgrove	4
Pitman	4
South Harrison	1
Swedesboro	1
Vineland	2
Woodbury	22
Woodbury Heights	2
Woolwich	4

#### MSI LIVE

<u>MSI LIVE</u> features real-time, instructor-led in-person, and virtual classes. Experienced instructors provide an interactive experience for the attendee on a broad spectrum of safety and risk control topics. Most MSI LIVE offerings have been awarded continuing education credits for municipal designations and certifications. The MSI LIVE catalog provides a description of the course, the intended audience, and available credits.

The <u>MSI LIVE Schedule</u> is available for registration. Please register early, under-attended classes will be canceled.

To maintain the integrity of the MSI classes and our ability to offer CEUs, we must abide by the rules of the State agency that issued the designation. Chief among those rules is the attendee of the class must attend the whole session. Attendees who enter the class more than 5 minutes late or leave early will not be awarded CEUs for the class or receive a certificate of completion.

For virtual classes, the MSI utilizes the Zoom platform to track the time each attendee logs in and logs out. Also, we can track participation, to demonstrate to the State agency the student also participated in polls, quizzes, and question & answer activities during the class. The MSI maintains these records to document our compliance with the State agency.

If you need assistance using the MSI Learning Management System, please call the MSI Helpdesk at 866-661-5120.

**NOTE:** We need to keep our list of MSI Training Administrators up-to-date. If there are any changes or deletions, or you need to appoint a new Training Administrator, please advise Andrea Felip at <u>afelip@jamontgomery.com</u>.

# LESSONS LEARNED FROM LOSSES

## APRIL 2024 NEWSLETTER SUBROGATION



- When the JIF pays a Property or Workers' Compensation claim it has a right to subrogate if it is believed that someone else caused or contributed to the damage or injury. Subrogation allows the JIF to recoup certain claim costs from an at-fault party.
- Qual-Lynx and the office of JIF Solicitor, David DeWeese, undertake these efforts.
- In 1<sup>st</sup> party property we seek all damages including your deductible.
- In Workers' Compensation, we seek the amount paid for medical treatment, lost wages, and the face value of an award.
- Any amount recovered reduces how much was paid on that claim and therefore reduces the amount of your town's overall claims payments which reduces your insurance costs.
- The assistance of the town can be an integral part of the level of success achieved.

## Example:

• An officer injured his elbow taking an intoxicated subject into custody. He underwent surgery to repair the injury and the total amount of the lien sought in subrogation against the intoxicated subject was almost \$54,000. We enlisted the help of the Solicitor's office as we were not finding success with our subrogation efforts. Their office had to file suit and the matter went to trial. The Judge found that the Defendant acted in a negligent manner, but we could not prove that the employee's injuries were caused by the Defendant's actions. The employee did not report the injury or seek medical treatment for almost a month and there was no mention of the injury in any of the incident reports.







**DATE**: April 05, 2024

## TO: The Members of the Executive Board of the TRICO Municipal JIF

## FROM: Christopher Winter L/E Risk Management Consultant

RE: TRICO Activities (March)

**1. Policy/Procedures**: Policy and Procedure requests have been received and will be forwarded to requesting agencies that will contain current L/E best practices, NJ AG Guideline and L/E Accreditation requirements.

## 2. Agency Visits:

Elk Twp. PD: Policy and Procedures discussed, assistance was requested with the agency.

Washington Twp. PD: Accreditation update, Police Licensing and progress, agency size and officer Pre-Employment

Monroe Twp. PD: Brief meeting to discuss JIF business with the recently appointed Chief of Police (Ryan Borkowski) A future meeting is being coordinated for April.

Additional visits are being scheduled.

• Consultative Visits were provided to identify and discuss agency concerns, training, policy and procedures,trends and requests. L/E RMC services were outlined and provided to Chiefs and Command members present. Police

agency's with Command changes were a priority and visited as well. Additional agency visits are being scheduled at this time to continue to build relationships with the Law Enforcement agencies within the TRICO JIF.

**3. Training:** No training scheduled at this time, however training topics are being considered for future training dates. Additionally, a course is being discussed and reviewed to assist agency Resiliency Officers, to be conducted by Dr. Kelly, Ph.D., ABPP. and Captain William Walsh, Voorhees PD.

4. Law Enforcement Bulletins / Newsletters: No Bulletins distributed.

**5. TRICO JIF Law Enforcement Committee:** A L/E Committee has been formulated with three (3) Police Chiefs from each county to represent (JIF) police agencies in Gloucester and Salem County. I plan to meet with them on a quarterly basis virtually to discuss trends, concerns, training, policy and procedure assistance, potential risk and liability issues and L/E Accreditation guidance etc. This is being developed to maintain an ongoing forum throughout the year as an extension of the County Chiefs Associations, to identify areas as previously mentioned and to reduce potential risks. Chiefs selected to date are from Mantua PD, Clayton PD and Glassboro for Gloucester County, Carney's Point PD for Cumberland County to date. An Initial meeting is being coordinated at this time for Gloucrester and Salem County in April.

## 6. Meetings Attended:

TRICOExecutive Claim Meeting	03/25/2024
TRICO Executive Meeting	03/25/2024

Sincerely,

Christopher J. Winter Sr., CPM Law Enforcement RMC ACM, BURLCO, and TRICO JIF 609-780-4769 <u>chriswinter1429@gmail.com</u>

#### GLOUCESTER, SALEM AND CUMBERLAND COUNTIES MUNICIPAL JOINT INSURANCE FUND Targeting Wellness Monthly Report

TO:	Municipal Fund Commissioners, Safety Coordinators, and Risk Managers
FROM:	Debby Schiffer, JIF Wellness Director
DATE:	April 22, 2024 Gloucester County Library, Mullica Hill
Contact Information:	debby_schiffer@targetingwellness.com 856-322-1220

#### **APRIL WELLNESS INITIATIVES**

I am very pleased with the level of connection so many of your Wellness Coordinators maintain with me. Their dedication and tireless efforts to bring wellness to all employees is honorable and greatly appreciated. They are a joy to work with. Thank you!

#### Wellness Activities Planned or Explored (so far):

- Elk Twp planning a cooking demo and presentation with the Food Bank
- **Deptford** Wellness Day in May focusing on Skin Cancer Prevention. Vendors and presentations scheduled. Jefferson offering the DermaScan.
- Glassboro planning presentation for Administration
- **Pennsville** Offered a Spring Step Challenge. Planning activities for the year including onsite cancer mobility van, presentation on skin cancer prevention, and hydration challenge
- **Pitman** Stress management Challenge completed and successful. Planning a plant based cooking demo in April.
- Mantua Chair massage and Somatic Release event in April.
- Upper Pittsgrove New Wellness & Safety Coordinator. Shared a Gratitude inspired video during Safety Committee meeting and focus on that theme for April through a journaling "challenge" and distribution of kindness cards to anyone they wish.
- West Deptford Fruit/Snack Day. Plans for the upcoming months
- Westville planning of ideas for the year including challenges, chair massage, presentations, cooking demo and chair yoga/stretch
- City of Woodbury list of ideas to share with various departments for feedback and level of interest
- Monroe Spring into Fitness Photo Challenge for March. April Stress Less Schedule a chair massage. Also 5R's to reduce and cope with stress better. Pick one or more each week: Relax, Rethink, Release, Reduce and Reorganize. May is Showing Kindness with the distribution of kindness cards to anyone you wish. Event held on second Wednesday of every month = Wellness Wednesday.

#### Stay tuned for more wellness adventure!

#### Wellness 2024 Planning Meetings:

<u>Wellness Advisory Committee (WAC)</u>: The following towns are part of the committee: Clayton, Pennsville, and Monroe Twp.

The next meeting: Thurs, May 16th 9:30am

<u>Wellness Coordinator Brainstorming Sessions</u>: I had my first of three (3) virtual Brainstorming sessions for peer sharing and support. This was NOT MANDATORY.

The next meeting may be moved from May 9th to June 14th

<u>JIF Round Table Virtual Meeting</u>: Tuesday, April 30<sup>th</sup> beginning at 10am. Please have your Wellness Coordinators attend this short presentation acknowledging their efforts and highlighting any changes they need to know.

### New Resources:

Rutgers Speakers Bureau - Various topics available through Rutgers Faculty

**Jefferson Health -** Free online Classes & Events on various health topics. They also have a Mobile Cancer Screening. I am looking into details regarding this and more.

**Cigna Wellness in Motion –** I have reached out to get more details and will update, as information becomes available.

**Penn Medicine Virtua Cancer Program –** I will be reaching out to find more information on their speaker bureau and onsite services.

**ShopRite Registered Dietitians** – I will be having a discovery call with one of the dietitians to determine their scope of services available to the TRICO JIF members. I will provide an update.

Targeting Wellness Newsletter – 2024 Quarterly Themes

The April issue for Q2 was distributed later this week. . In addition, a short Mindful Minutes video was posted on the JIF website on simple stretches to do at your desk to release neck and shoulder tension.

As a reminder, the 2024 Quarterly themes will be built around *4 Essential Mindsets for Overall Well-being* and Q2 is Growth and Learning

Schedule of quarterly Essential Mindset themes for 2024:

Quarter 1 – Gratitude Quarter 2 – Growth & Learning Quarter 3 – Compassion Quarter 4 – Mindfulness

April National Health Awareness:

Earth Month (Earth Day April 22), National Cancer Control Month, Stress Awareness Month, Parkinson's Awareness Month, National Financial Literacy Month.

### JIF Website – NEW Wellness Section Drop-down Selection:

**Reminder - Multimedia by Deb**: On a minimum of once a quarter, I will be posting a short, informative audio or video clip, which I am calling "Mindful Minutes". My goal is to highlight a health fact or lifestyle behavior and provide a helpful tip or strategy on approaching or changing it for increase well-being. I am open to any suggestions on possible topics as this unfolds. If well received, my hope is to offer them more frequently.



April is a reminder that life is a beautiful, ever-renewing cycle. E.E. Cummings What seeds of hope and renewing are you planting for yourself?

# TARGETING WELLNESS NEWSLETTER<<</th>GOOD NEWS FOR GOOD HEALTH

# **Essential Mindsets for Overall Well-being**



"We can't become what we need to be by remaining what we are." - Oprah Winfrey This quarter is all about finding ways throughout our lives to keep growing and learning, exploring and experiencing. Every day we have opportunities, big or small, that help teach and show us ways to move towards our goals, our purpose, and get better at the skills that are important to us. Think big!

# QUARTER TWO GROWTH & LEARNING

April - June 2024

# >>> CONCEPT

Did you realize that 70% of the knowledge that propelled successful individuals to their current stature didn't stem from textbooks, but rather from life experiences? Another 20% is attributed to insights gained from interactions with others, leaving a mere 10% acquired through formal education like courses and books. It's evident: the bulk of our learning transpires through practical application.

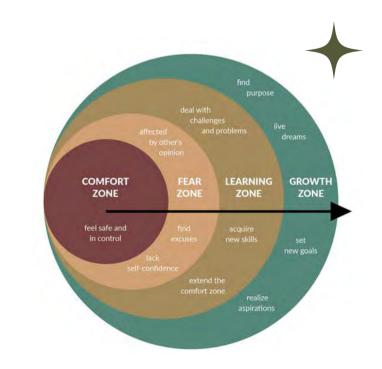
As we journey from childhood to adulthood, we carry forward both beneficial and detrimental lessons. Some ingrained notions, rooted in early experiences, may unknowingly hinder our progress today, tethering us with fears and perceived limitations. Remarkably, many of these subconscious teachings quietly influence our behaviors and decisions, shaping our interactions with others without us even realizing.

Yet, amidst these hidden influences, lies an opportunity for growth. Through cultivating self-awareness, we can learn to see the gifts within even the most adverse experiences. This requires a moment of reflection and practice, where we scrutinize past events, discerning when it's advantageous to relinquish old paradigms and embrace new perspectives. As we begin this next quarter, let's first revisit a fundamental concept introduced in January—the dichotomy between fixed and growth mindsets, as identified by psychologist Carol Dweck in her book, "Mindset."

When confronted with challenges, our mindset becomes the compass guiding us towards success or failure. Failure, often stemming from a fixed mindset, can manifest simply by avoiding experiences that threaten our sense of integrity. Instances of this may range from refraining from asking questions to avoid looking unintelligent to shying away from new opportunities for fear of imperfection.

However, embracing a growth mindset instills a desire to learn and grow, regardless of the possibility of making mistakes. **The focus shifts from seeking perfection to pursuing improvement.** This mindset fosters enhanced learning, diminishes anxiety, and cultivates resilience in the face of future challenges and setbacks.





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THE ILLITERATE OF THE 21ST CENTURY WILL NOT BE THOSE WHO CANNOT READ AND WRITE, BUT THOSE WHO CANNOT LEARN, UNLEARN, AND RELEARN." -Alvin Toffler.

# >>> THE THREE MAIN ZONES

When confronted with change or challenges, we find ourselves navigating three distinct zones: the comfort zone, panic zone, and growth or learning zone. The zone we inhabit significantly influences our experience and ultimately shapes our response to the situation at hand.

**Comfort Zone:** this is where we feel safe, secure and familiar. We operate within our known limitations and routines to maintain minimal stress or anxiety. Although this zone leads to a sense of ease, it can leave us stagnate and limited personally and professionally if we remain here in every situation that is uncomfortable.

**Panic Zone**: obviously when we are way outside our comfort zone, we are overwhelmed with stress and fear, feeling out of control. When pushed beyond our limits, boundaries, or skill set, we may experience extreme anxiety, struggling to cope. We may even resort to the survival mode of fight, flight or freeze. This is not a zone we want to gravitate towards yet understanding the reasons for this reaction is important to understand perhaps with the guidance of a trained therapist.

**Growth Zone**: here we venture beyond our comfort zone to tackle new challenges, experiences, and opportunities. While it may feel a bit scary, <u>it's also thrilling</u>. We take these chances because we want to learn and grow. Sure, it might feel uncomfortable as we step into unfamiliar territory, but deep down, we know it won't harm us. In fact, it has the potential to help us develop new skills and maybe even transform ourselves personally. As a result, a new "comfort zone" is created!

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# >>> GROWTH IS LIKE A LOTUS FLOWER

Like a lotus flower that begins its life in murky, muddy waters, growth often begins in adverse and challenging circumstances. The muddy environment represents the difficulties, obstacles and hardships we may face in life.

A lotus flower, despite the mud, grows upward towards the surface of the water which can be related to our journey of growth and personal development. In the lotus' pursuit of the sun, when we face and overcome our own challenges, it allows us to reach higher levels of confidence, resilience and success.

And despite the harsh and "ugly" conditions the lotus flower is forced to endure, it surfaces as a beautiful and pure white flower. Similarly, we bloom with inner strength, wisdom, and bravery when we push through the mud of transforming challenges and gain self awareness, fulfillment and a deeper connection to ourselves and others.



Just like the lotus flower, we can and do emerge from adversity and cultivate strength as we navigate life's challenges and strive for personal transformation.

# PRACTICE FOR APRIL

Our thoughts label our experiences as "bad" or "good". However, regardless of the label, there is a deeper meaning in the experience...a lesson or a gift. Taking the time to explore this is often the step we forget to take.

This steps were taken from the audiobook entitled, <u>"Happy For No Reason</u>" by Marci Stimoff.

# >>> LOOK FOR THE LESSON AND THE GIFT

You might contemplate doing this at the end of the day or right after a situation occurs that may be considered "bad".

- 1.Sit quietly by yourself perhaps with a journal or just simply close your eyes. Take a few deep breaths.
- Recall the situation that has caused you to feel wronged or didn't live up to your expectations (of yourself or others). Picture anyone who was involved with you at the time; picture the setting and what was said.
- 3. Imagine taking a few steps back and observing the situation from a distance, as though you were watching a movie.
- 4. What part of what happened can you take responsibility for? Did you ignore signs that should have clued you in that there was a problem? Did you act in a way that might have provoked the situation? Did your thoughts or actions escalate the situation? *Please try to do this with blameless discernment.* This is not to judge yourself or others. It's merely to use our experiences as potential learning opportunities.
- 5. Now, what is the lesson to learn from this? Perhaps you discover you need more patience or better boundaries. Perhaps being more open to listen and say less.
- 6.Ask yourself: If this were happening for a higher purpose, what would it be? Can you find the gift? If you can't that's okay. Perhaps in time you will.
- 7. Write down the most important thing you can do differently as a result of finding out the lesson or the gift.

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# Find ways to incorporate growth and learning in your day...

### >>> Listen to a new Podcast or Audiobook:

Incorporate this perhaps on your commute to and from work, while doing chores or going for a walk. Its a great way to learn new things on the go.

### >>>> Learn a new word:

Expand your vocabulary by learning a new word each day and trying to incorporate it into your conversations or writing.

#### >>> Experiment with new skills:

Allocate time to try out new skills or hobbies that pique your interest. Whether cooking a new recipe, learning a different language or trying a new sport, embracing novelty fosters growth.

#### >>> Embrace imperfection:

Accept that you are human and, therefore, imperfect. Understand that making mistakes is inevitable and does not diminish your value as a person. Have compassion for others who are human too. :-)

#### >>> Focus on the process, not just the outcome:

Shift your focus from solely evaluating outcomes to appreciating the process of learning and growth. Celebrate your efforts and progress, regardless of the outcome.



Pick whatever resonates with you. Try one or multiple, every day, once a week or even once during the month...the choice is yours. Take your time and enjoy the process. And remember not to judge yourself for not doing it perfectly. Practice living in a growth mindset.



promotes overall well-being!

# >>> Spring is the perfect time to focus on growth.

Spring is like a big, warm hug from Mother Nature, nudging us to stretch our limbs and embrace new beginnings. Think about it: longer days, sunnier skies, birds chirping their hearts out, and those little green buds popping up everywhere. It's nature's way of saying, "Hey, let's start fresh!"

So, what's on your springtime wish list? Maybe it's kicking off a fun exercise routine to shake off those winter blues (or pounds). Or finally booking that dream getaway you've been talking about forever. Whatever it is, it all starts with a tiny seed of an idea. But here's the thing about seeds – they need more than just wishful thinking. You gotta water them with daily doses of attention, patience, and a bit of TLC.

### In the content of this newsletter, planting a seed goes deeper than just the act of growing a plant or tree. It represents the potential for personal growth and transformation.

Ask yourself: Are you creating the right vibe for growth? Are you tending to your dreams with the care they deserve? Are you treating your body and mind to the good stuff – healthy food, movement, and plenty of Zzzs? And hey, are you keeping those pesky negative thoughts at bay, like pulling weeds from a garden?

Just like those seeds in the ground, you need nurturing to flourish. So, embrace the journey, knowing that growth takes time. And remember, every little seed you plant adds a splash of color to the beautiful garden of life.

"To plant a garden is to believe in tomorrow." Audrey Hepburn

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# Gloucester, Salem, Cumberland Counties Municipal JIF Managed Care Summary Report

2024

|                                                                              | March-24 | March-23 | 2024 March YTD | YTD March 23 |
|------------------------------------------------------------------------------|----------|----------|----------------|--------------|
| # of New Claims Reported                                                     | 28       | 43       | 94             | 141          |
| # of Report Only                                                             | 11       | 18       | 43             | 58           |
| % Report Only                                                                | 39%      | 42%      | 46%            | 41%          |
| # of Medical Only                                                            | 17       | 20       | 45             | 68           |
| # of Lost Time                                                               | 0        | 5        | 6              | 14           |
| Medical Only to Lost Time Ratio                                              | 100:00   | 75:25    | 88:12          | 83:17        |
| Claim Petition                                                               | 0        | 0        | 0              | 1            |
| COVID-19                                                                     | 0        | 0        | 1              | 6            |
| Average Days Reported To Qual-Lynx (Indemnity,<br>Medical Only, Report Only) | 11.7     | 3.5      | 4.8            | 9.0          |
| Average Days Reported To Employer (Indemnity,<br>Medical Only, Report Only)  | 1.3      | 1.3      | 0.6            | 1.0          |

| Nurse Case Management                  | March-24 | March-23 |
|----------------------------------------|----------|----------|
| # of Cases Assigned to Case Management | 34       | 35       |
| # of Cases >90 days                    | 31       | 25       |

| Savings          | March-24           | March-23  | 2024 March YTD | YTD March 23 |
|------------------|--------------------|-----------|----------------|--------------|
| Bill Count       | 253                | 270       | 574            | 663          |
| Provider Charges | \$203 <i>,</i> 982 | \$450,494 | \$486,192      | \$1,109,678  |
| Repriced Amount  | \$84,188           | \$214,483 | \$193,018      | \$417,481    |
| Savings \$       | \$119,794          | \$236,010 | \$293,175      | \$692,197    |
| % Savings        | 59%                | 52%       | 60%            | 62%          |

| QualCare Network Provider Penetration Rate | March-24 | March-23 | 2024 March YTD | YTD March 23 |
|--------------------------------------------|----------|----------|----------------|--------------|
| Bill Count                                 | 90%      | 85%      | 92%            | 88%          |
| Provider Charges                           | 90%      | 86%      | 93%            | 91%          |

| Exclusive Provider Panel Penetration Rate | March-24 | March-23 | 2024 March YTD | YTD March 23 |
|-------------------------------------------|----------|----------|----------------|--------------|
| Bill Count                                | 94%      | 86%      | 95%            | 90%          |
| Provider Charges                          | 97%      | 80%      | 98%            | 91%          |

| Transitional Duty Summary                    | 2024 March YTD | YTD March 23 |
|----------------------------------------------|----------------|--------------|
| % of Transitional Duty Days Worked           | 45             | % 56%        |
| \$ Saved By Accommodating                    | \$41,27        | 4 \$55,375   |
| % of Transitional Duty Days Not Accommodated | 55             | % 44%        |
| Cost Of Days Not Accommodated                | \$65,89        | 6 \$58,118   |



# Gloucester, Salem, Cumberland Counties Municipal JIF Average Days To Report By JIF Member (Indemnity, Medical Only, Report Only) 1/1/2024 - 3/31/2024

|                               | # Of Claims<br>Reported | Average Days<br>Reported To<br>Qual-Lynx | Average Days<br>Reported To<br>Employer |
|-------------------------------|-------------------------|------------------------------------------|-----------------------------------------|
| CLAYTON BOROUGH               | 2                       | 1.0                                      | 0.5                                     |
| DEPTFORD TOWNSHIP             | 7                       | 1.4                                      | 0.1                                     |
| FRANKLIN TOWNSHIP             | 5                       | 1.4                                      | 0.2                                     |
| GLASSBORO BOROUGH             | 9                       | 5.6                                      | 0.1                                     |
| GREENWICH TOWNSHIP            | 2                       | 0.5                                      | 0.5                                     |
| HARRISON TOWNSHIP             | 1                       | 0.0                                      | 0.0                                     |
| LOWER ALLOWAYS CREEK TOWNSHIP | 1                       | 3.0                                      | 0.0                                     |
| MANTUA TOWNSHIP               | 2                       | 2.5                                      | 0.0                                     |
| MONROE TOWNSHIP               | 6                       | 0.5                                      | 0.0                                     |
| PAULSBORO BOROUGH             | 2                       | 1.0                                      | 0.0                                     |
| PENNSVILLE TOWNSHIP           | 3                       | 3.3                                      | 0.3                                     |
| PITMAN BOROUGH                | 1                       | 1.0                                      | 0.0                                     |
| QUINTON TOWNSHIP              | 1                       | 2.0                                      | 1.0                                     |
| VINELAND CITY                 | 36                      | 1.9                                      | 0.8                                     |
| WASHINGTON TOWNSHIP           | 6                       | 2.5                                      | 2.2                                     |
| WENONAH BOROUGH               | 1                       | 252.0                                    | 1.0                                     |
| WEST DEPTFORD TOWNSHIP        | 4                       | 1.8                                      | 0.0                                     |
| WOODBURY CITY                 | 5                       | 2.8                                      | 0.4                                     |
| Grand Total                   | 94                      | 4.8                                      | 0.6                                     |



# Gloucester, Salem, Cumberland Counties Municipal JIF Claims Reported By Claim Type

| March 2024                     |                                |                            |     |  |  |
|--------------------------------|--------------------------------|----------------------------|-----|--|--|
| All Claims Reported            |                                |                            |     |  |  |
| # Of Average Days Average Days |                                |                            |     |  |  |
|                                | Claims Reported To Reported To |                            |     |  |  |
|                                | Reported                       | eported Qual-Lynx Employer |     |  |  |
| MEDICAL ONLY                   | 17                             | 18.4                       | 2.1 |  |  |
| REPORT ONLY                    | 11                             | 1.5                        | 0.0 |  |  |
| Grand Total                    | 28                             | 11.7                       | 1.3 |  |  |

| 1/1/2024 - 3/31/2024 |                                |                           |          |  |  |
|----------------------|--------------------------------|---------------------------|----------|--|--|
|                      | All Claims Reported            |                           |          |  |  |
|                      | # Of Average Days Average Days |                           |          |  |  |
|                      | Claims                         | s Reported To Reported To |          |  |  |
|                      | Reported                       | Qual-Lynx                 | Employer |  |  |
| INDEMNITY            | 6                              | 0.5                       | 0.3      |  |  |
| MEDICAL ONLY         | 45                             | 8.3                       | 1.0      |  |  |
| REPORT ONLY          | 43                             | 1.8                       | 0.1      |  |  |
| Grand Total          | 94                             | 4.8                       | 0.6      |  |  |

| Claims Reported - Not Covid-19 |          |             |              |  |  |
|--------------------------------|----------|-------------|--------------|--|--|
|                                |          |             | Average Days |  |  |
|                                | Claims   | Reported To | Reported To  |  |  |
|                                | Reported | Qual-Lynx   | Employer     |  |  |
| MEDICAL ONLY                   | 17       | 18.4        | 2.1          |  |  |
| REPORT ONLY                    | 11       | 1.5         | 0.0          |  |  |
| Grand Total                    | 28       | 11.7        | 1.3          |  |  |

| Claims Reported - Not Covid-19 |          |              |              |  |
|--------------------------------|----------|--------------|--------------|--|
|                                | # Of     | Average Days | Average Days |  |
|                                | Claims   | Reported To  | Reported To  |  |
|                                | Reported | Qual-Lynx    | Employer     |  |
| INDEMNITY                      | 6        | 0.5          | 0.3          |  |
| MEDICAL ONLY                   | 45       | 8.3          | 1.0          |  |
| REPORT ONLY                    | 42       | 1.7          | 0.1          |  |
| Grand Total                    | 93       | 4.8          | 0.6          |  |

**Covid-19 Claims Reported** 

None Reported

| Covid-19 Claims Reported |                                                          |           |          |  |
|--------------------------|----------------------------------------------------------|-----------|----------|--|
|                          | # OfAverage DaysAverage DaysClaimsReported ToReported To |           |          |  |
|                          | Reported                                                 | Qual-Lynx | Employer |  |
| REPORT ONLY              | 1                                                        | 7.0       | 1.0      |  |
| Grand Total              | 1                                                        | 7.0       | 1.0      |  |



# Gloucester, Salem, Cumberland Counties Municipal JIF Nurse Case Management Report March 2024

|                          | (         | Open         | Re        | -Open        |                    |
|--------------------------|-----------|--------------|-----------|--------------|--------------------|
|                          | INDEMNITY | MEDICAL ONLY | INDEMNITY | MEDICAL ONLY | <b>GRAND TOTAL</b> |
| BOROUGH OF NATIONAL PARK | 1         | 0            | 0         | 0            | 1                  |
| DEPTFORD TOWNSHIP        | 3         | 0            | 1         | 0            | 4                  |
| FRANKLIN TOWNSHIP        | 1         | 0            | 0         | 0            | 1                  |
| GLASSBORO BOROUGH        | 2         | 1            | 0         | 0            | 3                  |
| GREENWICH TOWNSHIP       | 1         | 0            | 0         | 0            | 1                  |
| LOGAN TOWNSHIP           | 1         | 0            | 0         | 0            | 1                  |
| MANTUA TOWNSHIP          | 2         | 0            | 1         | 0            | 3                  |
| MONROE TOWNSHIP          | 4         | 0            | 0         | 0            | 4                  |
| PENNS GROVE BOROUGH      | 1         | 0            | 0         | 0            | 1                  |
| VINELAND CITY            | 3         | 4            | 2         | 0            | 9                  |
| WASHINGTON TOWNSHIP      | 1         | 0            | 0         | 0            | 1                  |
| WEST DEPTFORD TOWNSHIP   | 1         | 0            | 0         | 0            | 1                  |
| WOODBURY CITY            | 3         | 0            | 1         | 0            | 4                  |
| Grand Total              | 24        | 5            | 5         | 0            | 34                 |

### # Of Claims Open to Nurse Case Management



# Gloucester, Salem, Cumberland Counties Municipal JIF Transitional Duty Summary Report 1/1/2024 - 3/31/2024

|                     | Transitional | Transitional | % Of<br>Transitional |               | Transitional  | % Of<br>Transitional |                  |
|---------------------|--------------|--------------|----------------------|---------------|---------------|----------------------|------------------|
|                     | Duty Days    | Duty Days    | Duty Days            | \$ Saved By   | Duty Days Not | Duty Days Not        | Cost Of Days Not |
|                     | Available    | Worked       | Worked               | Accommodating | Accommodated  | Accommodated         | Accommodated     |
| CLAYTON BOROUGH     | 20           | 0            | 0%                   | \$0           | 20            | 100%                 | \$863            |
| DEPTFORD TOWNSHIP   | 112          | 16           | 14%                  | \$2,063       | 96            | 86%                  | \$10,365         |
| GLASSBORO BOROUGH   | 85           | 0            | 0%                   | \$0           | 85            | 100%                 | \$10,068         |
| LOGAN TOWNSHIP      | 91           | 0            | 0%                   | \$0           | 91            | 100%                 | \$14,287         |
| MANTUA TOWNSHIP     | 71           | 71           | 100%                 | \$8,939       | 0             | 0%                   | \$0              |
| MONROE TOWNSHIP     | 76           | 30           | 39%                  | \$2,148       | 46            | 61%                  | \$1,925          |
| PAULSBORO BOROUGH   | 2            | 0            | 0%                   | \$0           | 2             | 100%                 | \$182            |
| PENNS GROVE BOROUGH | 28           | 4            | 14%                  | \$612         | 24            | 86%                  | \$3,672          |
| VINELAND CITY       | 324          | 324          | 100%                 | \$27,210      | 0             | 0%                   | \$0              |
| WASHINGTON TOWNSHIP | 100          | 0            | 0%                   | \$0           | 100           | 100%                 | \$14,891         |
| WOODBURY CITY       | 85           | 7            | 8%                   | \$302         | 78            | 92%                  | \$9,643          |
| Grand Total         | 994          | 452          | 45%                  | \$41,274      | 542           | 55%                  | \$65,896         |



# Gloucester, Salem, Cumberland Counties Municipal JIF PPO Savings Report March 2024

|                | Bill<br>Count | Provider<br>Charges | Repriced<br>Amount | \$ Savings | % Savings |
|----------------|---------------|---------------------|--------------------|------------|-----------|
| QualCare PPO   | 227           | \$184,499           | \$68,323           | \$116,176  | 63%       |
| Negotiated     | 4             | \$2,800             | \$1,800            | \$1,000    | 36%       |
| Out Of Network | 22            | \$16,683            | \$14,065           | \$2,618    | 16%       |
| Grand Total    | 253           | \$203,982           | \$84,188           | \$119,794  | 59%       |

|                            | EPO | QualCare<br>PPO | Negotiated | Out Of<br>Network | Grand<br>Total | \$ Savings |
|----------------------------|-----|-----------------|------------|-------------------|----------------|------------|
| Ambulance                  | 1   | 0               | 0          | 0                 | 1              | \$249      |
| Ambulatory Surgical Center | 0   | 3               | 0          | 0                 | 3              | \$17,508   |
| Anesthesiology             | 0   | 2               | 0          | 2                 | 4              | \$3,205    |
| Behavioral Health          | 1   | 0               | 4          | 2                 | 7              | \$1,165    |
| Durable Medical Equipment  | 4   | 0               | 0          | 3                 | 7              | \$467      |
| Emergency Medicine         | 0   | 0               | 0          | 11                | 11             | \$886      |
| Hospital                   | 0   | 11              | 0          | 0                 | 11             | \$11,922   |
| MRI/Radiology              | 11  | 3               | 0          | 3                 | 17             | \$8,434    |
| Neurosurgery               | 2   | 3               | 0          | 0                 | 5              | \$1,168    |
| Occupational Medicine      | 3   | 5               | 0          | 0                 | 8              | \$1,446    |
| Orthopedic Surgery         | 6   | 24              | 0          | 0                 | 30             | \$11,309   |
| Pain Management            | 0   | 4               | 0          | 0                 | 4              | \$2,746    |
| Physical Medicine & Rehab  | 3   | 1               | 0          | 0                 | 4              | \$2,871    |
| Physical therapy           | 121 | 0               | 0          | 0                 | 121            | \$54,884   |
| Physicians Fees            | 0   | 5               | 0          | 1                 | 6              | \$388      |
| Sports Medicine            | 1   | 0               | 0          | 0                 | 1              | \$16       |
| Urgent Care Center         | 13  | 0               | 0          | 0                 | 13             | \$1,132    |
| Grand Total                | 166 | 61              | 4          | 22                | 253            | \$119,794  |



# Gloucester, Salem, Cumberland Counties Municipal JIF PPO Savings Report 1/1/2024 - 3/31/2024

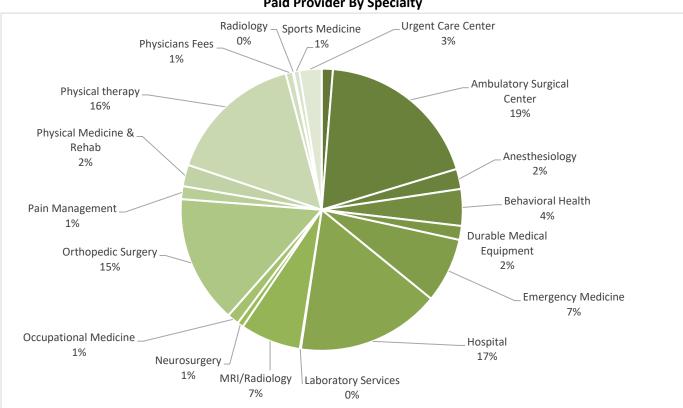
|                | Bill Count | Provider<br>Charges | Repriced<br>Amount | \$ Savings | %<br>Savings |
|----------------|------------|---------------------|--------------------|------------|--------------|
| Negotiated     | 9          | \$7,100             | \$4,850            | \$2,250    | 32%          |
| Out Of Network | 35         | \$26,670            | \$22,401           | \$4,269    | 16%          |
| QualCare PPO   | 530        | \$452,423           | \$165,767          | \$286,656  | 63%          |
| Grand Total    | 574        | \$486,192           | \$193,018          | \$293,175  | 60%          |

|                            | QualCare<br>PPO | EPO | Negotiated | Out Of<br>Network | Grand<br>Total | \$ Savings |
|----------------------------|-----------------|-----|------------|-------------------|----------------|------------|
| Ambulance                  | 0               | 2   | 0          | 2                 | 4              | \$502      |
| Ambulatory Surgical Center | 5               | 0   | 0          | 0                 | 5              | \$31,109   |
| Anesthesiology             | 4               | 0   | 0          | 3                 | 7              | \$4,573    |
| Behavioral Health          | 0               | 10  | 9          | 8                 | 27             | \$4,244    |
| Durable Medical Equipment  | 1               | 5   | 0          | 4                 | 10             | \$676      |
| Emergency Medicine         | 0               | 0   | 0          | 14                | 14             | \$1,421    |
| Hospital                   | 22              | 0   | 0          | 0                 | 22             | \$24,888   |
| Laboratory Services        | 0               | 6   | 0          | 0                 | 6              | \$1,292    |
| MRI/Radiology              | 3               | 24  | 0          | 3                 | 30             | \$19,360   |
| Neurosurgery               | 3               | 9   | 0          | 0                 | 12             | \$3,331    |
| Occupational Medicine      | 5               | 13  | 0          | 0                 | 18             | \$3,958    |
| Orthopedic Surgery         | 24              | 42  | 0          | 0                 | 66             | \$57,557   |
| Pain Management            | 4               | 2   | 0          | 0                 | 6              | \$5,405    |
| Physical Medicine & Rehab  | 2               | 8   | 0          | 0                 | 10             | \$9,691    |
| Physical therapy           | 0               | 286 | 0          | 0                 | 286            | \$118,214  |
| Physicians Fees            | 8               | 0   | 0          | 1                 | 9              | \$599      |
| Radiology                  | 2               | 0   | 0          | 0                 | 2              | \$0        |
| Sports Medicine            | 1               | 6   | 0          | 0                 | 7              | \$1,504    |
| Urgent Care Center         | 0               | 33  | 0          | 0                 | 33             | \$4,852    |
| Grand Total                | 84              | 446 | 9          | 35                | 574            | \$293,175  |



# **Gloucester, Salem, Cumberland Counties Municipal JIF Top 10 Providers And Paid Provider By Specialty** 1/1/2024 - 3/31/2024

| Top 10 Providers                                            |                 |
|-------------------------------------------------------------|-----------------|
|                                                             | Repriced Amount |
| PREMIER ORTHOPAEDIC & SPORTS MEDICINE ASSOCIATES OF SNJ LLC | \$25,340        |
| CENTENNIAL SURGERY CENTER LLC                               | \$18,539        |
| KENNEDY HEALTH                                              | \$14,137        |
| ONE CALL CARE DIAGNOSTICS                                   | \$12,355        |
| STRIVE PHYSICAL THERAPY SPECIALISTS LLC                     | \$11,780        |
| RIDDLE SURGICAL CENTER, LLC                                 | \$8,987         |
| NOVACARE REHABILITATION                                     | \$8,341         |
| IVY REHAB NETWORK INC                                       | \$7,915         |
| PREMIER ORTHO ASSOC SURG CENTER                             | \$7,850         |
| INSPIRA MEDICAL CENTER MULLICA HILL                         | \$7,516         |
| Grand Total                                                 | \$122,760       |



#### **Paid Provider By Specialty**



# Managed Care Quick Notes

# **Functional Capacity Evaluations**

An FCE is an objective, comprehensive, performance-based assessment that determines an employee's functional ability to perform essential duties in the workplace or activities of daily living and leisure. This evaluation assesses an individual's physical ability relative to a specific injury or illness. An FCE is an important tool to determine functional levels for a safe return-to-work following an injury. The examiner uses scientific methods to determine the validity of the test based on the employee's effort level which is noted in the report.

### Components of an FCE:

- Patient's self-described level of pain and disability obtained by answering a few questions
- Detailed medical history
- Examination of musculoskeletal system
- Material handling tests to evaluate ability to lift, carry, push, and pull
- Movement tests to evaluate ability to walk, reach, climb, and level of dexterity
- Positional tolerance tests to evaluate ability to stand and sit
- Evaluation of aerobic capacity
- Material, movement, or positional tests customized to the patient's industry
- Analysis of information including patients' level of effort
- Report that draws conclusions about the patient's abilities based on the above evaluations

An FCE can be used to determine the physical capability of a potential employee, an employee returning to work after an illness or injury outside of work, or an employee who appears to be demonstrating difficulties in performing duties. Your Labor Attorney should be consulted in these situations.

# Technical Risks Services Director Monthly Executive Report





# April 5, 2024

# Summary

This month I attended an intense boot camp provided by the Criminal Justice Institute and hosted by the Salem County OEM. This was a 32-hour course covering a wide range of pertinent topics concerning Cyber Defenses. I was encouraged to see many of our JIF members in attendance.

March was devoted to the continued push for Wizer Cyber Hygiene Training for 2024. We still have a small percentage of users who have not even logged in yet. Reminders have been sent. All members are encouraged to follow up with their users. The good news is almost 90 % of Trico has been trained! For the stragglers please advise your staff that Hygiene training is mandatory for deductible savings and BASIC Cyberframework compliance.

Vulnerability probing and penetration testing continues. There are a few towns with critical vulnerabilities. These towns have been notified. Please address these open items as soon as possible.

BASIC Cyberframework forms are rolling into our office, and we are clearing them with Underwriting. As of this writing Trico is about 62% compliant with BASIC. I have met with several members to clear up any confusion with the forms. Please get these into me as soon as possible to lock in the BASIC requirements. Currently these requirements are extremely easy to accomplish but they can change in a moment's notice without warning. Lock in your position today!

Page 4 of the CyberFramework document reads STOP GET A TECHNOLOGY EXPERT! This is becoming an increasingly difficult task for some towns. The local break/fix tech guy may have a friendly attitude but you need a real Managed Service Provider (MSP) capable of installing the products that you need to protect your environment AND provide the monitoring support needed make those products work for you. This adds cost to your IT budget so choosing wisely is very important.

This month's bulletin is on choosing an IT vendor for a municipality, especially when adhering to the New Jersey Cyber Risk Management Fund (Cyber JIF) Cybersecurity Framework which involves a meticulous process to ensure compliance with the advanced security measures outlined in the framework. This selection is paramount for maintaining robust cybersecurity defenses, managing risks effectively, and potentially reducing cyber insurance deductibles.

Please use this as a template in your decision-making process.

Stay Cybersafe,

Jerry Caruso

Technical Risks Services Director



# Choosing an IT vendor

# Initial Screening:

Ensure potential vendors are familiar with the NJ Cyber JIF Cybersecurity Framework and are capable of complying with its requirements. This includes basic, intermediate, and advanced security controls, such as data management, account management, vulnerability management, and more.

# Detailed Evaluation:

# Third-Party Risk Management

Vendor Assessment: Utilize the 3rd Party Risk Assessment tool mentioned in the framework to evaluate potential IT vendors. This assessment should cover security requirements, indemnification, and proper insurance.

# **Defensive Tools and Strategies**

Capability Review: Check that the vendor can support defensive tools and strategies, including email and web browser protections (CIS 9), malware defenses (CIS 10), and network monitoring defense (CIS 13). Their solutions should enable the municipality to deploy protective DNS, use anti-exploitation tools, and ensure 24x7 support in case of an incident.

### Support for Policy and Procedure Implementation

Ensure the IT vendor can assist in implementing the necessary policies and procedures outlined in the advanced section of the framework. This includes developing a Business Continuity Plan that addresses technology assets and ensuring that the organization's technology practices policy is in compliance with the Cyber JIF's Cyber Risk Management Program.

### **Proven Experience and References**

Past Performance: Seek references from other municipalities or public sector entities that have utilized the vendor's services. This can provide insights into the vendor's ability to comply with the NJ Cyber JIF framework and their effectiveness in implementing the required security controls.

# **Contractual Agreements**

Security Requirements: Ensure that all contractual agreements with the chosen vendor include strict security requirements, indemnification clauses, and adequate insurance coverage. This protects the municipality in case of security breaches or failures in service delivery.

# Conclusion

Selecting an IT vendor based on the Cyber JIF Cybersecurity Framework involves a comprehensive evaluation of the vendor's ability to meet specific security controls, manage third-party risks, support defensive strategies, and adhere to stringent policies and procedures. By following this structured approach, a municipality can ensure that its IT vendor not only complies with the Cyber JIF framework but also strengthens its Cybersecurity posture against evolving threats.

April13, 2024

To the Members of the Executive Board of the Salem, Cumberland, Gloucester Counties Municipal Joint Insurance Fund

I have enclosed for your review and, in some cases consideration, documents of presentation relating to claims, transfers, and the financial condition of the Fund.

The statements included in this report are prepared on a "modified cash basis" and relate to financial activity through the one-month period ending March 31, 2024 for Closed Fund Years 1991 to 2019, and Fund Years 2020, 2021, 2022, 2023 and 2024. The reports, where required, are presented in a manner prescribed or permitted by the Department of Insurance and the Division of Local Government Services of the Department of Community Affairs.

All statements contained in this report are subject to adjustment by annual audit.

A summary of the contents of these statements is presented below.

### **INVESTMENT INTEREST & INVESTMENTS:**

Interest received or accrued for the reporting period totaled \$ 88,178.39. This generated an average annual yield of 2.99%. However, after including an unrealized net gain of \$ 50,157.99 in the asset portfolio, the yield is adjusted to 4.69% for this period. The total overview of the asset portfolio for the fund shows a current market value of \$27,924,183.72 vs. the amount we have invested.

Our asset portfolio with Wilmington Trust and consists of 1 obligation with maturities less than one year.

Our JCMI Portfolio has a current market value of \$ 25,474,146.74.

### RECEIPT ACTIVITY FOR THE PERIOD

Subrogation Receipts \$ 36,751.13 YTD \$ 146,630.93 (detailed in my report) Salvage Receipts \$ 0.00 Overpayment Reimbursement \$ 2,250.16 1<sup>st</sup> Installment Premium Receipts \$ 62,679.00

### A.E.L.C.F. MEMBER PARTICIPANT BALANCES:

All Member Balances are now combined in one report and shows that \$ 1,628.34 in interest has been applied to the existing balances as shown in the attached report totaling \$ 655,141.78 at month end.

### LOSS RUN PAYMENT REGISTER FOR THE PERIOD: (Action Item)

The enclosed report shows net claim activity during the reporting period for claims paid by the fund and claims payable by the Fund at period end in the amount of \$ 688,785.59. The claims detail shows 536 claims payments issued.

### CASH ACTIVITY FOR THE PERIOD:

The enclosed reconciliation report details that during the reporting period the Fund's "Cash Position" changed from an opening balance of \$ 35,761,327.64 to a closing balance of \$ 35,102,336.06 showing a decrease in the fund of \$ 658,991.58 A detailed reconciliation of this change, including its affect on our banking instruments, is included in my report.

### BILL LIST FOR THE PERIOD:

Vouchers to be submitted for your consideration at the scheduled meeting show on the accompanying bill list at the end of my report.

The information contained in this cover report is a summary of key elements related to activity during the reporting period. Other detailed information is contained in the attached documents and, if desired, a more specific explanation on any question can be obtained by contacting me at 609-744-3597.

Respectfully Submitted,

Thomas J. Tontarski Treasurer

#### TRI-COUNTY MUNICIPAL JOINT INS. FUND Subrogation Report Calendar Year 2024

|            |                   | CLAIM/     |                    |      |      |           |            |
|------------|-------------------|------------|--------------------|------|------|-----------|------------|
| DATE       | CREDITED          | FILE       |                    | COV. | FUND | AMOUNT    | RECEIVED   |
| REC'D      | TO:               | NUMBER     | CLAIMANT NAME      | TYPE | YEAR | RECEIVED  | Y.T.D.     |
| 1/3        | DEPTFORD TWP.     | 2023292626 | DEPTFORD TWP.      | PR   | 2022 | 100.00    |            |
| 1/3        | PILESGROVE TWP    | 2023290691 | PILESGROVE TWP     | PR   | 2022 | 9,112.00  |            |
| 1/3        | HARRISON TWP      | 202301706  | HARRISON TWP       | PR   | 2023 | 2,934.00  |            |
| 1/5        | GREENWICH TWP     | 2022271652 | GREENWICH TWP      | PR   | 2022 | 100.00    |            |
| 1/5        | WASHINGTON TWP    | 2024315572 | WASHINGTON TWP     | PR   | 2023 | 2,545.45  |            |
| 1/8        | GLASSBORO BOROUGH | 2022273404 | GLASSBORO BOROUGH  | PR   | 2021 | 150.00    |            |
| 1/11       | CLAYTON BOROUGH   | 2023305312 | KATHLEEN WILSON    | WC   | 2023 | 8,663.81  |            |
| 1/15       | CARNEYS POINT TWP | 2022272295 | JOSEPH SANTAGROSSI | WC   | 2022 | 4,443.06  |            |
| 1/22       | WASHINGTON TWP    | 2023301255 | WASHINGTON TWP     | PR   | 2023 | 1,931.77  |            |
| TOTAL JAN. |                   |            |                    |      |      | 29,980.09 |            |
| TOTAL YTD  |                   |            |                    |      |      |           | 29,980.09  |
| 2/1        | DEPTFORD TWP.     | 2023292626 | DEPTFORD TWP.      | PR   | 2022 | 100.00    |            |
| 2/5        | GLASSBORO BOROUGH | 2023302039 | GLASSBORO BOROUGH  | PR   | 2023 | 4,982.25  |            |
| 2/5        | WOODBURY CITY     | 2023288091 | JOHN ABER          | WC   | 2022 | 10,866.00 |            |
| 2/14       | WEST DEPTFORD TWP | 2023295040 | STEVEN FLANNERY    | WC   | 2023 | 47.00     |            |
| 2/15       | GLASSBORO BOROUGH | 2022273404 | GLASSBORO BOROUGH  | PR   | 2021 | 150.00    |            |
| 2/15       | GREENWICH TWP     | 2022271652 | GREENWICH TWP      | PR   | 2022 | 100.00    |            |
| 2/15       | WEST DEPTFORD TWP | 2022250746 | EDGAR SEIBERT      | WC   | 2021 | 20,000.00 |            |
| 2/15       | WEST DEPTFORD TWP | 2024312181 | WEST DEPTFORD TWP  | PR   | 2023 | 23,589.00 |            |
| 2/15       | MONROE TWP.       | 2024321533 | MONROE TWP.        | PR   | 2023 | 19,915.46 |            |
| 2/16       | GLASSBORO BOROUGH | 2022273404 | GLASSBORO BOROUGH  | PR   | 2021 | 150.00    |            |
| TOTAL FEB. |                   |            |                    |      |      | 79,899.71 |            |
| TOTAL YTD  |                   |            |                    |      |      |           | 109,879.80 |
| 3/1        | WASHINGTON TWP    | 2024313016 | WASHINGTON TWP     | PR   | 2023 | 2,124.15  |            |
| 3/1        | DEPTFORD TWP.     | 2023292626 | DEPTFORD TWP.      | PR   | 2022 | 100.00    |            |
| 3/1        | CARNEYS POINT TWP | 2024321565 | CARNEYS POINT TWP  | PR   | 2023 | 5,310.00  |            |
| 3/7        | WENONAH BOROUGH   | 2021235053 | WENONAH BOROUGH    | PR   | 2021 | 7,200.00  |            |
| 3/7        | HARRISON TWP      | 2024324852 | HARRISON TWP       | PR   | 2024 | 3,905.00  |            |
| 3/8        | MANTUA TWP        | 2023298681 | MANTUA TWP         | PR   | 2023 | 200.00    |            |
| 3/8        | GREENWICH TWP     | 2022271652 | GREENWICH TWP      | PR   | 2022 | 100.00    |            |
| 3/13       | MONROE TWP.       | 2024321516 | JENNIFER BARBUTO   | WC   | 2023 | 6,560.20  |            |
| 3/20       | GLASSBORO BOROUGH | 2022273404 | GLASSBORO BOROUGH  | PR   | 2021 | 150.00    |            |
| 3/20       | DEPTFORD TWP.     | 2023306629 | DEPTFORD TWP.      | PR   | 2023 | 6,905.95  |            |
| 3/20       | WASHINGTON TWP    | 2018125077 | WASHINGTON TWP     | PR   | 2018 | 1,860.95  |            |
| 3/21       | WEST DEPTFORD TWP | 2023284052 | WEST DEPTFORD TWP  | PR   | 2022 | 2,334.88  |            |
| TOTAL MAR. |                   |            |                    |      |      | 36,751.13 |            |
| τοται ντο  |                   |            |                    |      |      |           | 1/6 630 93 |

TOTAL YTD

146,630.93

#### TRI-COUNTY MUNICIPAL JIF ACCOUNT RECONCILIATION ACTIVITY REPORT FY 2024

| FY 2024                                                         |                                       |                             |                    |                              |
|-----------------------------------------------------------------|---------------------------------------|-----------------------------|--------------------|------------------------------|
|                                                                 | <u>January</u>                        | <u>February</u>             | March              | Year To Date<br><u>Total</u> |
| Opening Balance for the Period:<br>RECEIPTS:                    | 31,028,604.26                         | 34,556,425.08               | 35,761,327.64      |                              |
| Interest Income ( Cash )                                        | 110,225.31                            | -74,948.65                  | 0.00               | 35,276.66                    |
| Premium Assessment Receipts                                     | 5,337,490.00                          | 3,002,573.00                | 62,679.00          | 8,402,742.00                 |
| Prior Yr. Premium Assessment Receipts                           | 0.00                                  | 0.00                        | 0.00               | 0.00                         |
| Subrogation, Salvage & Reimb. Receipts:                         | 0.00                                  | 0.00                        | 0.00               |                              |
| Fund Year 2024                                                  | 0.00                                  | 0.00                        | 3,905.00           | 3,905.00                     |
| Fund Year 2023                                                  | 16,075.03                             | 48,533.71                   | 21,408.30          | 86,017.04                    |
| Fund Year 2022                                                  | 13,755.06                             | 11,066.00                   | 2,534.88           | 27,355.94                    |
| Fund Year 2021                                                  | 150.00                                | 20,300.00                   | 9,292.16           | 29,742.16                    |
| Fund Year 2020                                                  | 0.00                                  | 0.00                        | 0.00               | 0.00                         |
| Closed Fund Year                                                | 0.00                                  | 0.00                        | 1,860.95           | 1,860.95                     |
| Total Subrogation, Salvage & Reimb.Receipts                     | 29,980.09                             | 79,899.71                   | 39,001.29<br>0.00  | 148,881.09                   |
| FY 2023 Appropriation Refunds                                   | 0.00                                  | 0.00                        | 0.00               | 0.00                         |
| FY 2022 Appropriation Refunds<br>Late Payment Penalties         | 0.00                                  | 0.00                        | 0.00               | 0.00                         |
| RCF Clsed Yr. Claims Reimbursement                              | 0.00                                  | 0.00                        | 0.00               | 0.00                         |
| E-JIF Closed Year Dividend                                      | 100,963.00                            | 0.00                        | 0.00               | 100,963.00                   |
| Other                                                           | 0.00                                  | 0.00                        | 0.00               | 0.00                         |
| TOTAL RECEIPTS:                                                 | 5,578,658.40                          | 3,007,524.06                | 101,680.29         | 8,687,862.75                 |
| DISBURSEMENTS:<br>Net Claim Payments:                           | 0,010,000.10                          | 0,001,021.00                | 101,000.20         | 0,001,002.10                 |
| Fund Year 2024                                                  | 2,856.32                              | 59,140.22                   | 125,168.16         | 187,164.70                   |
| Fund Year 2023                                                  | 147,928.82                            | 101,410.94                  | 169,121.78         | 418,461.54                   |
| Fund Year 2022                                                  | 30,050.41                             | 64,986.93                   | 63,553.69          | 158,591.03                   |
| Fund Year 2021                                                  | 51,542.15                             | 49,785.41                   | 123,642.41         | 224,969.97                   |
| Fund Year 2020                                                  | 9,886.86                              | 54,890.26                   | 200,283.80         | 265,060.92                   |
| Closed Fund Year                                                | 4,730.00                              | 52.54                       | 2,386.59           | 7,169.13                     |
| Total Net Claim Payments                                        | 246,994.56                            | 330,266.30                  | 684,156.43         | 1,261,417.29                 |
| Exp.& Admin Bill List Payments:                                 | · · · · · · · · · · · · · · · · · · · |                             |                    |                              |
| Exp. & Cont. Charges FY 2024                                    | 171,289.78                            | 535,618.78                  | 215,032.96         | 921,941.52                   |
| E-JIF Premium FY 2024                                           | 188,460.00                            | 0.00                        | 0.00               | 188,460.00                   |
| Property Fund Charges FY 2024<br>POL/EPL Policy Premium FY 2024 | 0.00                                  | 0.00<br>876,212.50          | 0.00               | 0.00<br>876,212.50           |
| M.E.L. Premium FY 2024                                          | 1,125,113.25                          | 0.00                        | 0.00               | 1,125,113.25                 |
| Cvber Risk Premium FY 2024                                      | 207,346.50                            | 0.00                        | 0.00               | 207,346.50                   |
| Exp. & Cont. Charges FY 2023                                    | 15,337.49                             | 60,523.92                   | 670.33             | 76,531.74                    |
| Exp. & Cont. Charges FY 2022                                    | 0.00                                  | 0.00                        | 0.00               | 0.00                         |
| Exp. & Cont. Charges FY 2021                                    | 0.00                                  | 0.00                        | 0.00               | 0.00                         |
| Exp. & Cont. Charges FY 2025                                    | 0.00                                  | 0.00                        | 0.00               | 0.00                         |
| Other                                                           | 0.00                                  | 0.00                        | 0.00               | 0.00                         |
| Other                                                           |                                       | 0.00                        | 0.00               | 0.00                         |
| Closed Fund Year                                                | 96,296.00                             | 0.00                        | 0.00               | 96,296.00                    |
| Total Bill List Payments                                        | 1,803,843.02                          | 1,472,355.20                | 215,703.29         | 3,491,901.51                 |
| Net Bank Services Fees                                          | 0.00                                  | 0.00                        | 0.00               | 0.00                         |
| Other TOTAL DISBURSEMENTS:                                      | 0.00<br>2,050,837.58                  | 0.00<br>1,802,621.50        | 0.00<br>899,859.72 | 0.00<br>4,753,318.80         |
| Closing Balance for the Period:                                 | 34,556,425.08                         | 35,761,327.64               | 34,963,148.21      |                              |
| Account Net Cash Change During the Period:                      | 0 400 000 05                          | 4 000 404 50                | 0.00               | 4 7 44 000 55                |
| Operating Account                                               | 3,432,828.05                          | 1,308,404.50<br>-102,383.48 | 0.00               | 4,741,232.55                 |
| JCMI Investment Program<br>Investment Account                   | 82,454.97                             |                             | 0.00               | -19,928.51                   |
| Investment Account<br>Asset Management Account                  | 14,525.49<br>695.00                   | 100,000.00<br>-101,063.85   | 0.00               | 114,525.49<br>-100,368.85    |
| Claims Imprest Account                                          | -662.39                               | -101,063.85<br>-132.30      | 0.00               | -100,368.85<br>-794.69       |
| Expense & Contingency Account                                   | -2,020.30                             | 77.69                       | 0.00               | -1,942.61                    |
| Total Change in Account Net Cash:                               | 3,527,820.82                          | 1,204,902.56                | 0.00               | 4,732,723.38                 |
| Proof:                                                          | 0.00                                  | 0.00                        | 798,179.43         | 7,102,120.00                 |
| 11001.                                                          | 0.00                                  | 0.00                        | ,                  |                              |

#### ALL FUND YEARS COMBINED

CURRENT MONTH March

CURRENT FUND YEAR 2024

|                                     | Description:        | INVEST ACCT  | ASSET MGR      | OPERATING<br>ACCOUNT | CLAIMS ACCOUNT | ADMIN EXPENSE | UnNamed #6  | JCMI            |
|-------------------------------------|---------------------|--------------|----------------|----------------------|----------------|---------------|-------------|-----------------|
|                                     | ID Number:          |              |                |                      |                |               |             |                 |
|                                     | Maturity (Yrs)      |              |                |                      |                |               |             |                 |
|                                     | Purchase Yield:     |              |                |                      |                |               |             |                 |
|                                     | TOTAL for All       |              |                |                      |                |               |             |                 |
|                                     | Accts & instruments |              |                |                      |                |               |             |                 |
| Opening Cash & Investment l         | \$35,761,250.07     | 153,075.70   | 2,442,633.78   | 7,676,170.41         | 100,259.72     | 2,503.32      | 10,307.91   | 25,376,299.23   |
| <b>Opening Interest Accrual Bal</b> | \$37,502.53         | -            | 37,502.53      | -                    | -              | -             |             | -               |
|                                     |                     |              |                |                      |                |               |             |                 |
| 1 Interest Accrued and/or Inte      | \$9,789.21          | \$0.00       | \$9,789.21     | \$0.00               | \$0.00         | \$0.00        | \$0.00      | \$0.00          |
| 2 Interest Accrued - discounter     | \$0.00              | \$0.00       | \$0.00         | \$0.00               | \$0.00         | \$0.00        | \$0.00      | \$0.00          |
| 3 zation and/or Interest Cost)      | \$0.00              | \$0.00       | \$0.00         | \$0.00               | \$0.00         | \$0.00        | \$0.00      | \$0.00          |
| 4 Accretion                         | \$1,208.90          | \$0.00       | \$0.00         | \$0.00               | \$0.00         | \$0.00        | \$0.00      | \$1,208.90      |
| 5 Interest Paid - Cash Instr.s      | \$77,180.28         | \$0.00       | \$0.00         | \$27,230.99          | \$1,477.56     | \$1,306.11    | \$0.00      | \$47,165.62     |
| 6 Interest Paid - Term Instr.s      | \$6,718.20          | \$0.00       | \$6,718.20     | \$0.00               | \$0.00         | \$0.00        | \$0.00      | \$0.00          |
| 7 Realized Gain (Loss)              | \$50,157.99         | \$0.00       | \$685.00       | \$0.00               | \$0.00         | \$0.00        | \$0.00      | \$49,472.99     |
| 8 Net Investment Income             | \$138,336.38        | \$0.00       | \$10,474.21    | \$27,230.99          | \$1,477.56     | \$1,306.11    | \$0.00      | \$97,847.51     |
| 9 Deposits - Purchases              | \$1,258,207.70      | \$250,000.00 | \$0.00         | \$108,147.98         | \$684,356.43   | \$215,703.29  | \$0.00      | \$0.00          |
| 10 (Withdrawals - Sales)            | -\$2,052,387.13     | \$0.00       | -\$250,000.00  | -\$900,059.72        | -\$685,146.56  | -\$217,180.85 | \$0.00      | \$0.00          |
| Ending Cash & Investment Bala       | \$35,102,336.01     | \$403,075.70 | \$2,200,036.98 | \$6,911,489.66       | \$100,947.15   | \$2,331.87    | \$10,307.91 | \$25,474,146.74 |
| Ending Interest Accrual Balance     | \$40,573.54         | \$0.00       | \$40,573.54    | \$0.00               | \$0.00         | \$0.00        | \$0.00      | \$0.00          |
| Plus Outstanding Checks             | \$425,571.92        | \$0.00       | \$0.00         | \$0.00               | \$407,548.69   | \$18,023.23   | \$0.00      | \$0.00          |
| (Less Deposits in Transit)          | -\$120.56           | \$0.00       | \$0.00         | -\$120.56            | \$0.00         | \$0.00        | \$0.00      | \$0.00          |
| Balance per Bank                    | \$35,527,787.37     | \$403,075.70 | \$2,200,036.98 | \$6,911,369.10       | \$508,495.84   | \$20,355.10   | \$10,307.91 | \$25,474,146.74 |

#### Investment Income Allocation

| Interest Allocation Flag 1=     | 1            | 1            | 1            | 1              | 1            | 0             | 0            | 0            | 0              | 1            | 1           |                |
|---------------------------------|--------------|--------------|--------------|----------------|--------------|---------------|--------------|--------------|----------------|--------------|-------------|----------------|
|                                 | Property     | Liability    | Auto         | Workers Comp   | Deductible   | POL/EPL       | EJIF         | Cyber JIF    | MEL            | Admin        | Contingency | Total          |
| Opening Cash & Investmen        | 392,974.66   | 546,964.47   | 163,141.52   | 2,073,276.81   | 571,473.42   | (683,164.20)  | (12,995.82)  | 624,128.02   | 1,019,840.88   | 471,526.95   | 0.00        | \$5,167,166.70 |
| Opening Interest Accrual B      | 78.52        | 100.02       | 29.83        | 382.98         | 104.50       | 0.00          | 0.00         | 0.00         | 0.00           | 166.54       | 0.00        | \$862.38       |
| 1 Interest Accrued and/or Inte  | \$110.19     | \$153.37     | \$45.74      | \$581.33       | \$160.24     | \$0.00        | \$0.00       | \$0.00       | \$0.00         | \$132.21     | \$0.00      | \$1,183.08     |
| 2 Interest Accrued - discounter | \$0.00       | \$0.00       | \$0.00       | \$0.00         | \$0.00       | \$0.00        | \$0.00       | \$0.00       | \$0.00         | \$0.00       | \$0.00      | \$0.00         |
| 3 ization and/or Interest Cost) | \$0.00       | \$0.00       | \$0.00       | \$0.00         | \$0.00       | \$0.00        | \$0.00       | \$0.00       | \$0.00         | \$0.00       | \$0.00      | \$0.00         |
| 4 Accretion                     | \$13.61      | \$18.94      | \$5.65       | \$71.79        | \$19.79      | \$0.00        | \$0.00       | \$0.00       | \$0.00         | \$16.33      | \$0.00      | \$146.10       |
| 5 Interest Paid - Cash Instr.s  | \$868.74     | \$1,209.16   | \$360.65     | \$4,583.35     | \$1,263.35   | \$0.00        | \$0.00       | \$0.00       | \$0.00         | \$1,042.40   | \$0.00      | \$9,327.66     |
| 6 Interest Paid - Term Instr.s  | \$14.07      | \$17.92      | \$5.34       | \$68.61        | \$18.72      | \$0.00        | \$0.00       | \$0.00       | \$0.00         | \$29.83      | \$0.00      | \$154.49       |
| 7 Realized Gain (Loss)          | \$564.58     | \$785.81     | \$234.38     | \$2,978.63     | \$821.02     | \$0.00        | \$0.00       | \$0.00       | \$0.00         | \$677.43     | \$0.00      | \$6,061.87     |
| 8 Net Investment Income         | \$1,557.12   | \$2,167.28   | \$646.43     | \$8,215.11     | \$2,264.40   | \$0.00        | \$0.00       | \$0.00       | \$0.00         | \$1,868.37   | \$0.00      | \$16,718.70    |
| 9 Interest Accrued - Net Char   | \$96.12      | \$135.45     | \$40.40      | \$512.73       | \$141.52     | \$0.00        | \$0.00       | \$0.00       | \$0.00         | \$102.38     | \$0.00      | \$1,028.59     |
| Ending Cash & Investment        | \$322,686.50 | \$553,085.44 | \$164,860.41 | \$2,050,636.10 | \$577,897.41 | -\$681,713.36 | -\$11,677.14 | \$630,376.89 | \$1,035,961.09 | \$271,126.36 | \$0.00      | \$4,913,239.70 |
| Ending Interest Accrual Bal     | \$174.64     | \$235.46     | \$70.23      | \$895.70       | \$246.02     | \$0.00        | \$0.00       | \$0.00       | \$0.00         | \$268.92     | \$0.00      | \$1,890.98     |

|                                 | Property     | Liability      | Auto         | Workers Comp   | Deductible     | POL/EPL | EJIF    | Cyber JIF   | MEL      | Admin        | Contingency | Total          |
|---------------------------------|--------------|----------------|--------------|----------------|----------------|---------|---------|-------------|----------|--------------|-------------|----------------|
| Opening Cash & Investmen        | 43,071.56    | 1,209,505.92   | 323,166.78   | 2,988,258.32   | 1,263,735.33   | 0.00    | (3.00)  | (9,667.00)  | 750.00   | 544,566.35   | 15,955.24   | \$6,379,339.50 |
| Opening Interest Accrual B      | 150.00       | 1,299.30       | 360.10       | 3,368.04       | 1,351.02       | 0.00    | 0.00    | 0.00        | 0.00     | 1,568.47     | 17.08       | \$8,114.01     |
| 1 Interest Accrued and/or Inte  | \$12.08      | \$339.14       | \$90.61      | \$837.89       | \$354.34       | \$0.00  | \$0.00  | \$0.00      | \$0.00   | \$152.69     | \$4.47      | \$1,791.22     |
| 2 Interest Accrued - discounter | \$0.00       | \$0.00         | \$0.00       | \$0.00         | \$0.00         | \$0.00  | \$0.00  | \$0.00      | \$0.00   | \$0.00       | \$0.00      | \$0.00         |
| 3 ization and/or Interest Cost) | \$0.00       | \$0.00         | \$0.00       | \$0.00         | \$0.00         | \$0.00  | \$0.00  | \$0.00      | \$0.00   | \$0.00       | \$0.00      | \$0.00         |
| 4 Accretion                     | \$1.49       | \$41.88        | \$11.19      | \$103.47       | \$43.76        | \$0.00  | \$0.00  | \$0.00      | \$0.00   | \$18.86      | \$0.55      | \$221.20       |
| 5 Interest Paid - Cash Instr.s  | \$95.22      | \$2,673.83     | \$714.42     | \$6,606.09     | \$2,793.72     | \$0.00  | \$0.00  | \$0.00      | \$0.00   | \$1,203.86   | \$35.27     | \$14,122.41    |
| 5 Interest Paid - Term Instr.s  | \$26.87      | \$232.76       | \$64.51      | \$603.35       | \$242.02       | \$0.00  | \$0.00  | \$0.00      | \$0.00   | \$280.98     | \$3.06      | \$1,453.54     |
| 7 Realized Gain (Loss)          | \$61.88      | \$1,737.67     | \$464.29     | \$4,293.17     | \$1,815.58     | \$0.00  | \$0.00  | \$0.00      | \$0.00   | \$782.37     | \$22.92     | \$9,177.88     |
| 8 Net Investment Income         | \$170.67     | \$4,792.52     | \$1,280.51   | \$11,840.62    | \$5,007.40     | \$0.00  | \$0.00  | \$0.00      | \$0.00   | \$2,157.78   | \$63.22     | \$25,312.72    |
| 9 Interest Accrued - Net Char   | -\$14.79     | \$106.38       | \$26.10      | \$234.54       | \$112.32       | \$0.00  | \$0.00  | \$0.00      | \$0.00   | -\$128.28    | \$1.41      | \$337.68       |
| Ending Cash & Investment        | -\$19,654.26 | \$1,213,244.06 | \$323,836.18 | \$2,916,595.20 | \$1,268,630.41 | \$0.00  | -\$3.00 | -\$9,667.00 | \$750.00 | \$546,182.09 | \$16,017.04 | \$6,255,930.72 |
| Ending Interest Accrual Bal     | \$135.21     | \$1,405.68     | \$386.21     | \$3,602.58     | \$1,463.34     | \$0.00  | \$0.00  | \$0.00      | \$0.00   | \$1,440.19   | \$18.49     | \$8,451.69     |

|                                 | Property     | Liability      | Auto         | Workers Comp   | Deductible   | POL/EPL | EJIF   | Cyber JIF | MEL    | Admin        | Contingency | Total          |
|---------------------------------|--------------|----------------|--------------|----------------|--------------|---------|--------|-----------|--------|--------------|-------------|----------------|
| Opening Cash & Investmen        | 181,310.36   | 1,028,001.30   | 321,700.80   | 1,783,005.31   | 770,515.93   | 0.00    | 1.00   | 0.00      | 0.60   | 218,129.40   | 0.00        | \$4,302,664.70 |
| Opening Interest Accrual B      | 158.40       | 1,128.36       | 348.38       | 1,964.32       | 828.01       | 0.00    | 0.00   | 0.00      | 0.00   | 853.01       | 0.00        | \$5,280.48     |
| 1 Interest Accrued and/or Inte  | \$50.84      | \$288.24       | \$90.20      | \$499.94       | \$216.05     | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$61.16      | \$0.00      | \$1,206.44     |
| 2 Interest Accrued - discounter | \$0.00       | \$0.00         | \$0.00       | \$0.00         | \$0.00       | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$0.00       | \$0.00      | \$0.00         |
| 3 ization and/or Interest Cost) | \$0.00       | \$0.00         | \$0.00       | \$0.00         | \$0.00       | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$0.00       | \$0.00      | \$0.00         |
| 4 Accretion                     | \$6.28       | \$35.60        | \$11.14      | \$61.74        | \$26.68      | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$7.55       | \$0.00      | \$148.99       |
| 5 Interest Paid - Cash Instr.s  | \$400.82     | \$2,272.58     | \$711.18     | \$3,941.66     | \$1,703.37   | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$482.21     | \$0.00      | \$9,511.82     |
| 6 Interest Paid - Term Instr.s  | \$28.38      | \$202.13       | \$62.41      | \$351.89       | \$148.33     | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$152.81     | \$0.00      | \$945.94       |
| 7 Realized Gain (Loss)          | \$260.48     | \$1,476.91     | \$462.18     | \$2,561.61     | \$1,106.98   | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$313.38     | \$0.00      | \$6,181.55     |
| 8 Net Investment Income         | \$718.42     | \$4,073.33     | \$1,274.70   | \$7,064.95     | \$3,053.08   | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$864.31     | \$0.00      | \$17,048.79    |
| 9 Interest Accrued - Net Char   | \$22.46      | \$86.11        | \$27.79      | \$148.06       | \$67.72      | \$0.00  | \$0.00 | \$0.00    | \$0.00 | -\$91.65     | \$0.00      | \$260.49       |
| Ending Cash & Investment        | \$169,209.11 | \$1,029,877.53 | \$322,947.71 | \$1,743,811.60 | \$773,501.29 | \$0.00  | \$1.00 | \$0.00    | \$0.60 | \$219,085.36 | \$0.00      | \$4,258,434.20 |
| Ending Interest Accrual Bal     | \$180.86     | \$1,214.47     | \$376.18     | \$2,112.37     | \$895.73     | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$761.37     | \$0.00      | \$5,540.97     |

|                                                      | Property    | Liability    | Auto         | Workers Comp | Deductible   | POL/EPL      | EJIF   | Cyber JIF | MEL         | Admin        | Contingency | Total          |
|------------------------------------------------------|-------------|--------------|--------------|--------------|--------------|--------------|--------|-----------|-------------|--------------|-------------|----------------|
| Opening Cash & Investmen                             | 79,407.87   | 713,686.15   | 242,736.67   | 76,729.33    | 993,138.76   | (36,146.97)  | 0.00   | 0.00      | 39,751.00   | 282,491.53   | 0.00        | \$2,391,794.34 |
| Opening Interest Accrual B                           | 84.80       | 842.05       | 274.32       | 208.46       | 1,122.43     | 0.00         | 0.00   | 0.00      | 0.00        | 320.07       | 0.00        | \$2,852.14     |
|                                                      |             |              |              |              |              |              |        |           |             |              |             |                |
| <ol> <li>Interest Accrued and/or Interest</li> </ol> | \$22.27     | \$200.11     | \$68.06      | \$21.51      | \$278.47     | \$0.00       | \$0.00 | \$0.00    | \$0.00      | \$79.21      | \$0.00      | \$669.63       |
| 2 Interest Accrued - discounter                      | \$0.00      | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00 | \$0.00    | \$0.00      | \$0.00       | \$0.00      | \$0.00         |
| 3 ization and/or Interest Cost)                      | \$0.00      | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00       | \$0.00 | \$0.00    | \$0.00      | \$0.00       | \$0.00      | \$0.00         |
| 4 Accretion                                          | \$2.75      | \$24.71      | \$8.41       | \$2.66       | \$34.39      | \$0.00       | \$0.00 | \$0.00    | \$0.00      | \$9.78       | \$0.00      | \$82.69        |
| 5 Interest Paid - Cash Instr.s                       | \$175.55    | \$1,577.73   | \$536.61     | \$169.62     | \$2,195.51   | \$0.00       | \$0.00 | \$0.00    | \$0.00      | \$624.50     | \$0.00      | \$5,279.53     |
| 6 Interest Paid - Term Instr.s                       | \$15.19     | \$150.84     | \$49.14      | \$37.34      | \$201.07     | \$0.00       | \$0.00 | \$0.00    | \$0.00      | \$57.34      | \$0.00      | \$510.93       |
| 7 Realized Gain (Loss)                               | \$114.08    | \$1,025.34   | \$348.73     | \$110.24     | \$1,426.82   | \$0.00       | \$0.00 | \$0.00    | \$0.00      | \$405.85     | \$0.00      | \$3,431.06     |
| 8 Net Investment Income                              | \$314.64    | \$2,827.90   | \$961.82     | \$304.03     | \$3,935.19   | \$0.00       | \$0.00 | \$0.00    | \$0.00      | \$1,119.34   | \$0.00      | \$9,462.92     |
| 9 Interest Accrued - Net Char                        | \$7.07      | \$49.27      | \$18.92      | -\$15.83     | \$77.40      | \$0.00       | \$0.00 | \$0.00    | \$0.00      | \$21.87      | \$0.00      | \$158.70       |
|                                                      |             |              |              |              |              |              |        |           |             |              |             |                |
| Ending Cash & Investment                             | \$82,825.74 | \$643,517.55 | \$243,679.57 | \$32,535.87  | \$996,996.56 | -\$36,146.97 | \$0.00 | \$0.00    | \$39,751.00 | \$283,589.00 | \$0.00      | \$2,286,748.32 |
| Ending Interest Accrual Bal                          | \$91.87     | \$891.32     | \$293.24     | \$192.63     | \$1,199.83   | \$0.00       | \$0.00 | \$0.00    | \$0.00      | \$341.95     | \$0.00      | \$3,010.84     |

|                                 | Property     | Liability    | Auto         | Workers Comp  | Deductible  | POL/EPL  | EJIF        | Cyber JIF | MEL     | Admin        | Contingency  | Total          |
|---------------------------------|--------------|--------------|--------------|---------------|-------------|----------|-------------|-----------|---------|--------------|--------------|----------------|
| Opening Cash & Investmen        | 175,502.73   | 733,305.45   | 141,160.91   | (88,682.35)   | 90,352.33   | 954.51   | (1,169.51)  | 0.00      | (0.05)  | 213,458.47   | 142,531.50   | \$1,407,413.99 |
| Opening Interest Accrual B      | 236.51       | 842.94       | 163.98       | 1.46          | 112.79      | 0.00     | 0.00        | 0.00      | 0.00    | 240.49       | 161.08       | \$1,759.25     |
| 1 Interest Accrued and/or Inte  | \$49.21      | \$205.61     | \$39.58      | \$0.00        | \$25.33     | \$0.00   | \$0.00      | \$0.00    | \$0.00  | \$59.85      | \$39.96      | \$419.56       |
| 2 Interest Accrued - discounter | \$0.00       | \$0.00       | \$0.00       | \$0.00        | \$0.00      | \$0.00   | \$0.00      | \$0.00    | \$0.00  | \$0.00       | \$0.00       | \$0.00         |
| 3 ization and/or Interest Cost) | \$0.00       | \$0.00       | \$0.00       | \$0.00        | \$0.00      | \$0.00   | \$0.00      | \$0.00    | \$0.00  | \$0.00       | \$0.00       | \$0.00         |
| 4 Accretion                     | \$6.08       | \$25.39      | \$4.89       | \$0.00        | \$3.13      | \$0.00   | \$0.00      | \$0.00    | \$0.00  | \$7.39       | \$4.94       | \$51.81        |
| 5 Interest Paid - Cash Instr.s  | \$387.98     | \$1,621.10   | \$312.06     | \$0.00        | \$199.74    | \$0.00   | \$0.00      | \$0.00    | \$0.00  | \$471.89     | \$315.09     | \$3,307.87     |
| 6 Interest Paid - Term Instr.s  | \$42.37      | \$151.00     | \$29.37      | \$0.26        | \$20.21     | \$0.00   | \$0.00      | \$0.00    | \$0.00  | \$43.08      | \$28.86      | \$315.15       |
| 7 Realized Gain (Loss)          | \$252.14     | \$1,053.53   | \$202.80     | \$0.00        | \$129.81    | \$0.00   | \$0.00      | \$0.00    | \$0.00  | \$306.67     | \$204.77     | \$2,149.72     |
| 8 Net Investment Income         | \$695.41     | \$2,905.64   | \$559.33     | \$0.00        | \$358.01    | \$0.00   | \$0.00      | \$0.00    | \$0.00  | \$845.80     | \$564.76     | \$5,928.95     |
| 9 Interest Accrued - Net Char   | \$6.84       | \$54.61      | \$10.21      | -\$0.26       | \$5.13      | \$0.00   | \$0.00      | \$0.00    | \$0.00  | \$16.77      | \$11.11      | \$104.40       |
| Ending Cash & Investment        | \$144,198.59 | \$716,953.47 | \$130,925.04 | -\$226,985.18 | \$90,705.21 | \$954.51 | -\$1,169.51 | \$0.00    | -\$0.05 | \$214,287.50 | \$143,085.16 | \$1,212,954.74 |
| Ending Interest Accrual Bal     | \$243.35     | \$897.55     | \$174.18     | \$1.19        | \$117.92    | \$0.00   | \$0.00      | \$0.00    | \$0.00  | \$257.26     | \$172.19     | \$1,863.65     |

|                                 | Property    | Liability | Auto   | Workers Comp | Deductible | POL/EPL | EJIF   | Cyber JIF | MEL    | Admin           | Contingency | Total           |
|---------------------------------|-------------|-----------|--------|--------------|------------|---------|--------|-----------|--------|-----------------|-------------|-----------------|
| FY Opening Cash & Investmen     | (4,782.54)  | 0.00      | 0.00   | 0.00         | 0.00       | 0.00    | 0.00   | 0.00      | 0.00   | 14,521,725.55   | 0.00        | \$14,516,943.01 |
| Opening Interest Accrual B      | 0.00        | 0.00      | 0.00   | 0.00         | 0.00       | 0.00    | 0.00   | 0.00      | 0.00   | 16,889.62       | 0.00        | \$16,889.62     |
|                                 |             |           |        |              |            |         |        |           |        |                 |             |                 |
| 1 Interest Accrued and/or Inte  | \$0.00      | \$0.00    | \$0.00 | \$0.00       | \$0.00     | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$4,071.79      | \$0.00      | \$4,071.79      |
| 2 Interest Accrued - discounter | \$0.00      | \$0.00    | \$0.00 | \$0.00       | \$0.00     | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$0.00          | \$0.00      | \$0.00          |
| 3 ization and/or Interest Cost) | \$0.00      | \$0.00    | \$0.00 | \$0.00       | \$0.00     | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$0.00          | \$0.00      | \$0.00          |
| 4 Accretion                     | \$0.00      | \$0.00    | \$0.00 | \$0.00       | \$0.00     | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$502.84        | \$0.00      | \$502.84        |
| 5 Interest Paid - Cash Instr.s  | \$0.00      | \$0.00    | \$0.00 | \$0.00       | \$0.00     | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$32,102.91     | \$0.00      | \$32,102.91     |
| 6 Interest Paid - Term Instr.s  | \$0.00      | \$0.00    | \$0.00 | \$0.00       | \$0.00     | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$3,025.60      | \$0.00      | \$3,025.60      |
| 7 Realized Gain (Loss)          | \$0.00      | \$0.00    | \$0.00 | \$0.00       | \$0.00     | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$20,863.07     | \$0.00      | \$20,863.07     |
| 8 Net Investment Income         | \$0.00      | \$0.00    | \$0.00 | \$0.00       | \$0.00     | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$57,540.61     | \$0.00      | \$57,540.61     |
| 9 Interest Accrued - Net Char   | \$0.00      | \$0.00    | \$0.00 | \$0.00       | \$0.00     | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$1,046.19      | \$0.00      | \$1,046.19      |
|                                 |             |           |        |              |            |         |        |           |        |                 |             |                 |
| Ending Cash & Investment        | -\$5,107.68 | \$0.00    | \$0.00 | -\$200.50    | \$0.00     | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$14,578,219.98 | \$0.00      | \$14,572,911.80 |
| Ending Interest Accrual Bal     | \$0.00      | \$0.00    | \$0.00 | \$0.00       | \$0.00     | \$0.00  | \$0.00 | \$0.00    | \$0.00 | \$17,935.81     | \$0.00      | \$17,935.81     |

| BNY MELLON<br>MX6F96594002 - Glocstr Slm Cmbrld | Marke               | ange in Net Assets<br>et Value<br>1/2024 | E                  | Report ID: IGLS0002<br>lase Currency: USD<br>Status: FINAL |
|-------------------------------------------------|---------------------|------------------------------------------|--------------------|------------------------------------------------------------|
|                                                 |                     | urrent Period                            |                    | al Year To Date                                            |
|                                                 | 03/01/2024          | 4 03/31/2024                             | 01/01/2024         | 03/31/2024                                                 |
| NET ASSETS - BEGINNING OF PERIOD                |                     | 25,376,299.22                            |                    | 25,396,227.73                                              |
|                                                 |                     | 25,376,299.22                            |                    | 25,396,227.73                                              |
| RECEIPTS                                        |                     |                                          |                    |                                                            |
| INVESTMENT INCOME                               |                     |                                          |                    |                                                            |
| INTEREST                                        | 49,925.70           |                                          | 140,519.36         |                                                            |
| UNREALIZED GAIN/LOSS-INVESTMENT                 | 49,472.99           |                                          | -57,921.23         |                                                            |
| ACCRETION/AMORTIZATION                          | 1,208.90            |                                          | 12,284.52          |                                                            |
|                                                 |                     | 100,607.59                               |                    | 94,882.65                                                  |
| т                                               | OTAL RECEIPTS       | 100,607.59                               |                    | 94,882.65                                                  |
| DISBURSEMENTS                                   |                     |                                          |                    |                                                            |
| ADMINISTRATIVE EXPENSES                         |                     |                                          |                    |                                                            |
| TRUSTEE/CUSTODIAN                               | 636.94              |                                          | 1,908.51           |                                                            |
| INVESTMENT ADVISORY FEES                        | 1,486.20            |                                          | 13,1 <b>4</b> 6.63 |                                                            |
| CONSULTING                                      | 636.94              |                                          | 1,908.51           |                                                            |
| TOTAL ADMINISTRA                                |                     | 2,760.08                                 |                    | 16,963.65                                                  |
| TOTAL D                                         | ISBURSEMENTS        | 2,760.08                                 |                    | 16,963.65                                                  |
| NET ASS                                         | ETS - END OF PERIOD | 25,474,146.73                            |                    | 25,474,146.73                                              |

#### TRI COUNTY MUNICIPAL JOINT INSURANCE FUND SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED

| Current Fund Year: | 2024          |              |              |              |              |              |             |            |              |               |              |               |
|--------------------|---------------|--------------|--------------|--------------|--------------|--------------|-------------|------------|--------------|---------------|--------------|---------------|
| Month Ending       | g: March      |              |              |              |              |              |             |            |              |               |              |               |
|                    | Property      | Liability    | Auto         | Workers Comp | Deductible   | POL/EPL      | EJIF        | Cyber JIF  | MEL          | Admin         | Contingency  | TOTAL         |
| OPEN BALANCE       | 867,484.64    | 4,231,463.29 | 1,191,906.68 | 6,832,587.42 | 3,689,215.77 | (718,356.66) | (14,167.33) | 614,461.02 | 1,060,342.43 | 16,251,898.25 | 1,754,414.60 | 35,761,250.10 |
| RECEIPTS           |               |              |              |              |              |              |             |            |              |               |              |               |
| Assessments        | 3,243.38      | 4,116.64     | 1,227.86     | 15,785.03    | 4,301.10     | 1,450.84     | 1,318.69    | 6,248.87   | 16,120.21    | 8,866.38      | 0.00         | 62,679.00     |
| Refunds            | 30,190.93     | 0.00         | 0.00         | 8,810.36     | 0.00         | 0.00         | 0.00        | 0.00       | 0.00         | 0.00          | 0.00         | 39,001.29     |
| Invest Pymnts      | 3,308.35      | 16,188.33    | 4,558.09     | 26,305.82    | 14,086.25    | 0.00         | 0.00        | 0.00       | 0.00         | 62,866.20     | 6,743.43     | 134,056.47    |
| Invest Adj         | 30.21         | 146.52       | 41.28        | 239.66       | 127.75       | 0.00         | 0.00        | 0.00       | 0.00         | 562.75        | 60.75        | 1,208.92      |
| Subtotal Invest    | 3,338.56      | 16,334.85    | 4,599.37     | 26,545.48    | 14,214.00    | 0.00         | 0.00        | 0.00       | 0.00         | 63,428.95     | 6,804.18     | 135,265.39    |
| Other *            | 0.00          | 0.00         | 0.00         | 0.00         | 0.00         | 0.00         | 0.00        | 0.00       | 0.00         | 4,000.00      | 0.00         | 4,000.00      |
| TOTAL              | 36,772.87     | 20,451.49    | 5,827.23     | 51,140.87    | 18,515.10    | 1,450.84     | 1,318.69    | 6,248.87   | 16,120.21    | 76,295.33     | 6,804.18     | 240,945.68    |
| EXPENSES           |               |              |              |              |              |              |             |            |              |               |              |               |
| Claims Transfer    | rs 210,099.50 | 95,236.73    | 11,485.00    | 367,335.20   | 0.00         | 0.00         | 0.00        | 0.00       | 0.00         | 0.00          | 0.00         | 684,156.43    |
| Expenses           | 0.00          | 0.00         | 0.00         | 0.00         | 0.00         | 0.00         | 0.00        | 0.00       | 0.00         | 215,703.29    | 0.00         | 215,703.29    |
| Other *            | 0.00          | 0.00         | 0.00         | 0.00         | 0.00         | 0.00         | 0.00        | 0.00       | 0.00         | 0.00          | 0.00         | 0.00          |
| TOTAL              | 210,099.50    | 95,236.73    | 11,485.00    | 367,335.20   | 0.00         | 0.00         | 0.00        | 0.00       | 0.00         | 215,703.29    | 0.00         | 899,859.72    |
| END BALANCE        | 694,158.00    | 4,156,678.05 | 1,186,248.91 | 6,516,393.09 | 3,707,730.88 | (716,905.82) | (12,848.65) | 620,709.89 | 1,076,462.64 | 16,112,490.29 | 1,761,218.78 | 35,102,336.06 |

#### REPORT STATUS SECTION

| Report Month: March       |                                                      |                     |            |
|---------------------------|------------------------------------------------------|---------------------|------------|
|                           |                                                      | Balance Differences |            |
| Opening Balances:         | Opening Balances are equal                           | \$0.00              |            |
| Imprest Transfers:        | Imprest Totals are equal                             | \$0.00              |            |
| Investment Balances:      | Investment Payment Balances are equal                | \$0.00              |            |
|                           | Investment Adjustment Balances are equal             | \$0.00              |            |
| Ending Balances:          | Ending Balances are equal                            | \$0.00              |            |
| Accural Balances:         | Accural Balances are equal                           | \$0.00              |            |
| Claims Transaction Status | r.                                                   |                     |            |
| Allocation variance 1:    | Daily xactions add to monthly totals                 | 0.00                |            |
| Allocation variance 2:    | Monthly transactions and allocation totals are equal | 0.00                |            |
| Allocation variance 3:    | Treasurer/TPA net / Max/Min                          | 1,847.13            | (1,032.00) |
| Pre-existing variance:    | Prior period unrecc / Max/Min                        | 1,847.13            | (1,032.00) |

0.05

| SUMMARY OF CASH TR | ANSACTIONS |            |            |              |            |              |             |            |              |            |             |              |
|--------------------|------------|------------|------------|--------------|------------|--------------|-------------|------------|--------------|------------|-------------|--------------|
| FUND YEAR          | 2024       |            |            |              |            |              |             |            |              |            |             |              |
|                    | March      |            |            |              |            |              |             |            |              |            |             |              |
| Month Ending.      | Property   | Liability  | Auto       | Workers Comp | Deductible | POL/EPL      | EJIF        | Cyber JIF  | MEL          | Admin      | Contingency | TOTAL        |
| OPEN BALANCE       | 392,974.66 | 546,964.47 | 163,141.52 | 2,073,276.81 | 571,473.42 | (683,164.20) | (12,995.82) | 624,128.02 | 1,019,840.88 | 471,526.95 | 0.00        | 5,167,166.70 |
| RECEIPTS           |            |            |            |              |            |              |             |            |              |            |             |              |
| Assessments        | 3,243.38   | 4,116.64   | 1,227.86   | 15,785.03    | 4,301.10   | 1,450.84     | 1,318.69    | 6,248.87   | 16,120.21    | 8,866.38   | 0.00        | 62,679.00    |
| Refunds            | 3,905.00   | 0.00       | 0.00       | 0.00         | 0.00       | 0.00         | 0.00        | 0.00       | 0.00         | 0.00       | 0.00        | 3,905.00     |
| Invest Pymnts      | 1,447.39   | 2,012.89   | 600.38     | 7,630.60     | 2,103.09   | 0.00         | 0.00        | 0.00       | 0.00         | 1,749.66   | 0.00        | 15,544.01    |
| Invest Adj         | 13.61      | 18.94      | 5.65       | 71.79        | 19.79      | 0.00         | 0.00        | 0.00       | 0.00         | 16.33      | 0.00        | 146.11       |
| Subtotal Invest    | 1,461.00   | 2,031.83   | 606.03     | 7,702.39     | 2,122.88   | 0.00         | 0.00        | 0.00       | 0.00         | 1,765.99   | 0.00        | 15,690.12    |
| Other *            | 0.00       | 0.00       | 0.00       | 0.00         | 0.00       | 0.00         | 0.00        | 0.00       | 0.00         | 4,000.00   | 0.00        | 4,000.00     |
| TOTAL              | 8,609.38   | 6,148.47   | 1,833.89   | 23,487.42    | 6,423.98   | 1,450.84     | 1,318.69    | 6,248.87   | 16,120.21    | 14,632.37  | 0.00        | 86,274.12    |
| EXPENSES           |            |            |            |              |            |              |             |            |              |            |             | 0.00         |
| Claims Transfers   | 78,897.53  | 27.50      | 115.00     | 46,128.13    | 0.00       | 0.00         | 0.00        | 0.00       | 0.00         | 0.00       | 0.00        | 125,168.16   |
| Expenses           | 0.00       | 0.00       | 0.00       | 0.00         | 0.00       | 0.00         | 0.00        | 0.00       | 0.00         | 215,032.96 | 0.00        | 215,032.96   |
| Other *            | 0.00       | 0.00       | 0.00       | 0.00         | 0.00       | 0.00         | 0.00        | 0.00       | 0.00         | 0.00       | 0.00        | 0.00         |
| TOTAL              | 78,897.53  | 27.50      | 115.00     | 46,128.13    | 0.00       | 0.00         | 0.00        | 0.00       | 0.00         | 215,032.96 | 0.00        | 340,201.12   |
| END BALANCE        | 322,686.50 | 553,085.44 | 164,860.41 | 2,050,636.10 | 577,897.41 | (681,713.36) | (11,677.14) | 630,376.89 | 1,035,961.09 | 271,126.36 | 0.00        | 4,913,239.70 |

| SUMMARY OF CASH TR | RANSACTIONS |              |            |              |              |         |        |            |        |            |             |              |
|--------------------|-------------|--------------|------------|--------------|--------------|---------|--------|------------|--------|------------|-------------|--------------|
| FUND YEAR          | 2023        |              |            |              |              |         |        |            |        |            |             |              |
| Month Ending:      | March       |              |            |              |              |         |        |            |        |            |             |              |
|                    | Property    | Liability    | Auto       | Workers Comp | Deductible   | POL/EPL | EJIF   | Cyber JIF  | MEL    | Admin      | Contingency | TOTAL        |
| OPEN BALANCE       | 43,071.56   | 1,209,505.92 | 323,166.78 | 2,988,258.32 | 1,263,735.33 | 0.00    | (3.00) | (9,667.00) | 750.00 | 544,566.35 | 15,955.24   | 6,379,339.50 |
| RECEIPTS           |             |              |            |              |              |         |        |            |        |            |             |              |
| Assessments        | 0.00        | 0.00         | 0.00       | 0.00         | 0.00         | 0.00    | 0.00   | 0.00       | 0.00   | 0.00       | 0.00        | 0.00         |
| Refunds            | 14,540.10   | 0.00         | 0.00       | 6,868.20     | 0.00         | 0.00    | 0.00   | 0.00       | 0.00   | 0.00       | 0.00        | 21,408.30    |
| Invest Pymnts      | 183.97      | 4,644.26     | 1,243.21   | 11,502.61    | 4,851.32     | 0.00    | 0.00   | 0.00       | 0.00   | 2,267.21   | 61.25       | 24,753.83    |
| Invest Adj         | 1.49        | 41.88        | 11.19      | 103.47       | 43.76        | 0.00    | 0.00   | 0.00       | 0.00   | 18.86      | 0.55        | 221.20       |
| Subtotal Invest    | 185.46      | 4,686.14     | 1,254.40   | 11,606.08    | 4,895.08     | 0.00    | 0.00   | 0.00       | 0.00   | 2,286.07   | 61.80       | 24,975.03    |
| Other *            | 0.00        | 0.00         | 0.00       | 0.00         | 0.00         | 0.00    | 0.00   | 0.00       | 0.00   | 0.00       | 0.00        | 0.00         |
| TOTAL              | 14,725.56   | 4,686.14     | 1,254.40   | 18,474.28    | 4,895.08     | 0.00    | 0.00   | 0.00       | 0.00   | 2,286.07   | 61.80       | 46,383.33    |
| EXPENSES           |             |              |            |              |              |         |        |            |        |            |             |              |
| Claims Transfers   | 77,451.38   | 948.00       | 585.00     | 90,137.40    | 0.00         | 0.00    | 0.00   | 0.00       | 0.00   | 0.00       | 0.00        | 169,121.78   |
| Expenses           | 0.00        | 0.00         | 0.00       | 0.00         | 0.00         | 0.00    | 0.00   | 0.00       | 0.00   | 670.33     | 0.00        | 670.33       |
| Other *            | 0.00        | 0.00         | 0.00       | 0.00         | 0.00         | 0.00    | 0.00   | 0.00       | 0.00   | 0.00       | 0.00        | 0.00         |
| TOTAL              | 77,451.38   | 948.00       | 585.00     | 90,137.40    | 0.00         | 0.00    | 0.00   | 0.00       | 0.00   | 670.33     | 0.00        | 169,792.11   |
| END BALANCE        | (19,654.26) | 1,213,244.06 | 323,836.18 | 2,916,595.20 | 1,268,630.41 | 0.00    | (3.00) | (9,667.00) | 750.00 | 546,182.09 | 16,017.04   | 6,255,930.72 |

| SUMMARY OF CASH TRA | ANSACTIONS |              |            |              |            |         |      |           |      |            |             |              |
|---------------------|------------|--------------|------------|--------------|------------|---------|------|-----------|------|------------|-------------|--------------|
| FUND YEAR           | 2022       |              |            |              |            |         |      |           |      |            |             |              |
| Month Ending: N     | farch      |              |            |              |            |         |      |           |      |            |             |              |
|                     | Property   | Liability    | Auto       | Workers Comp | Deductible | POL/EPL | EJIF | Cyber JIF | MEL  | Admin      | Contingency | TOTAL        |
| OPEN BALANCE        | 181,310.36 | 1,028,001.30 | 321,700.80 | 1,783,005.31 | 770,515.93 | 0.00    | 1.00 | 0.00      | 0.60 | 218,129.40 | 0.00        | 4,302,664.70 |
| RECEIPTS            |            |              |            |              |            |         |      |           |      |            |             |              |
| Assessments         | 0.00       | 0.00         | 0.00       | 0.00         | 0.00       | 0.00    | 0.00 | 0.00      | 0.00 | 0.00       | 0.00        | 0.00         |
| Refunds             | 2,534.88   | 0.00         | 0.00       | 0.00         | 0.00       | 0.00    | 0.00 | 0.00      | 0.00 | 0.00       | 0.00        | 2,534.88     |
| Invest Pymnts       | 689.68     | 3,951.63     | 1,235.77   | 6,855.15     | 2,958.68   | 0.00    | 0.00 | 0.00      | 0.00 | 948.41     | 0.00        | 16,639.32    |
| Invest Adj          | 6.28       | 35.60        | 11.14      | 61.74        | 26.68      | 0.00    | 0.00 | 0.00      | 0.00 | 7.55       | 0.00        | 148.99       |
| Subtotal Invest     | 695.96     | 3,987.23     | 1,246.91   | 6,916.89     | 2,985.36   | 0.00    | 0.00 | 0.00      | 0.00 | 955.96     | 0.00        | 16,788.31    |
| Other *             | 0.00       | 0.00         | 0.00       | 0.00         | 0.00       | 0.00    | 0.00 | 0.00      | 0.00 | 0.00       | 0.00        | 0.00         |
| TOTAL               | 3,230.84   | 3,987.23     | 1,246.91   | 6,916.89     | 2,985.36   | 0.00    | 0.00 | 0.00      | 0.00 | 955.96     | 0.00        | 19,323.19    |
| EXPENSES            |            |              |            |              |            |         |      |           |      |            |             |              |
| Claims Transfers    | 15,332.09  | 2,111.00     | 0.00       | 46,110.60    | 0.00       | 0.00    | 0.00 | 0.00      | 0.00 | 0.00       | 0.00        | 63,553.69    |
| Expenses            | 0.00       | 0.00         | 0.00       | 0.00         | 0.00       | 0.00    | 0.00 | 0.00      | 0.00 | 0.00       | 0.00        | 0.00         |
| Other *             | 0.00       | 0.00         | 0.00       | 0.00         | 0.00       | 0.00    | 0.00 | 0.00      | 0.00 | 0.00       | 0.00        | 0.00         |
| TOTAL               | 15,332.09  | 2,111.00     | 0.00       | 46,110.60    | 0.00       | 0.00    | 0.00 | 0.00      | 0.00 | 0.00       | 0.00        | 63,553.69    |
| END BALANCE         | 169,209.11 | 1,029,877.53 | 322,947.71 | 1,743,811.60 | 773,501.29 | 0.00    | 1.00 | 0.00      | 0.60 | 219,085.36 | 0.00        | 4,258,434.20 |

| SUMMARY OF CASH TRA | NSACTIONS |            |            |              |            |             |      |           |           |            |             |              |
|---------------------|-----------|------------|------------|--------------|------------|-------------|------|-----------|-----------|------------|-------------|--------------|
| FUND YEAR           | 2021      |            |            |              |            |             |      |           |           |            |             |              |
| Month Ending: N     | farch     |            |            |              |            |             |      |           |           |            |             |              |
|                     | Property  | Liability  | Auto       | Workers Comp | Deductible | POL/EPL     | EJIF | Cyber JIF | MEL       | Admin      | Contingency | TOTAL        |
| OPEN BALANCE        | 79,407.87 | 713,686.15 | 242,736.67 | 76,729.33    | 993,138.76 | (36,146.97) | 0.00 | 0.00      | 39,751.00 | 282,491.53 | 0.00        | 2,391,794.3  |
| RECEIPTS            |           |            |            |              |            |             |      |           |           |            |             |              |
| Assessments         | 0.00      | 0.00       | 0.00       | 0.00         | 0.00       | 0.00        | 0.00 | 0.00      | 0.00      | 0.00       | 0.00        | 0.0          |
| Refunds             | 7,350.00  | 0.00       | 0.00       | 1,942.16     | 0.00       | 0.00        | 0.00 | 0.00      | 0.00      | 0.00       | 0.00        | 9,292.10     |
| Invest Pymnts       | 304.82    | 2,753.92   | 934.49     | 317.20       | 3,823.41   | 0.00        | 0.00 | 0.00      | 0.00      | 1,087.69   | 0.00        | 9,221.53     |
| Invest Adj          | 2.75      | 24.71      | 8.41       | 2.66         | 34.39      | 0.00        | 0.00 | 0.00      | 0.00      | 9.78       | 0.00        | 82.70        |
| Subtotal Invest     | 307.57    | 2,778.63   | 942.90     | 319.86       | 3,857.80   | 0.00        | 0.00 | 0.00      | 0.00      | 1,097.47   | 0.00        | 9,304.23     |
| Other *             | 0.00      | 0.00       | 0.00       | 0.00         | 0.00       | 0.00        | 0.00 | 0.00      | 0.00      | 0.00       | 0.00        | 0.00         |
| TOTAL               | 7,657.57  | 2,778.63   | 942.90     | 2,262.02     | 3,857.80   | 0.00        | 0.00 | 0.00      | 0.00      | 1,097.47   | 0.00        | 18,596.39    |
| EXPENSES            |           |            |            |              |            |             |      |           |           |            |             |              |
| Claims Transfers    | 4,239.70  | 72,947.23  | 0.00       | 46,455.48    | 0.00       | 0.00        | 0.00 | 0.00      | 0.00      | 0.00       | 0.00        | 123,642.4    |
| Expenses            | 0.00      | 0.00       | 0.00       | 0.00         | 0.00       | 0.00        | 0.00 | 0.00      | 0.00      | 0.00       | 0.00        | 0.0          |
| Other *             | 0.00      | 0.00       | 0.00       | 0.00         | 0.00       | 0.00        | 0.00 | 0.00      | 0.00      | 0.00       | 0.00        | 0.0          |
| TOTAL               | 4,239.70  | 72,947.23  | 0.00       | 46,455.48    | 0.00       | 0.00        | 0.00 | 0.00      | 0.00      | 0.00       | 0.00        | 123,642.4    |
| END BALANCE         | 82,825.74 | 643,517.55 | 243,679.57 | 32,535.87    | 996,996.56 | (36,146.97) | 0.00 | 0.00      | 39,751.00 | 283,589.00 | 0.00        | 2,286,748.32 |

| SUMMARY OF CASH TRA | ANSACTIONS |              |            |              |            |         |      |           |      |            |             |              |
|---------------------|------------|--------------|------------|--------------|------------|---------|------|-----------|------|------------|-------------|--------------|
| FUND YEAR           | 2022       |              |            |              |            |         |      |           |      |            |             |              |
| Month Ending: N     | farch      |              |            |              |            |         |      |           |      |            |             |              |
|                     | Property   | Liability    | Auto       | Workers Comp | Deductible | POL/EPL | EJIF | Cyber JIF | MEL  | Admin      | Contingency | TOTAL        |
| OPEN BALANCE        | 181,310.36 | 1,028,001.30 | 321,700.80 | 1,783,005.31 | 770,515.93 | 0.00    | 1.00 | 0.00      | 0.60 | 218,129.40 | 0.00        | 4,302,664.70 |
| RECEIPTS            |            |              |            |              |            |         |      |           |      |            |             |              |
| Assessments         | 0.00       | 0.00         | 0.00       | 0.00         | 0.00       | 0.00    | 0.00 | 0.00      | 0.00 | 0.00       | 0.00        | 0.00         |
| Refunds             | 2,534.88   | 0.00         | 0.00       | 0.00         | 0.00       | 0.00    | 0.00 | 0.00      | 0.00 | 0.00       | 0.00        | 2,534.88     |
| Invest Pymnts       | 689.68     | 3,951.63     | 1,235.77   | 6,855.15     | 2,958.68   | 0.00    | 0.00 | 0.00      | 0.00 | 948.41     | 0.00        | 16,639.32    |
| Invest Adj          | 6.28       | 35.60        | 11.14      | 61.74        | 26.68      | 0.00    | 0.00 | 0.00      | 0.00 | 7.55       | 0.00        | 148.99       |
| Subtotal Invest     | 695.96     | 3,987.23     | 1,246.91   | 6,916.89     | 2,985.36   | 0.00    | 0.00 | 0.00      | 0.00 | 955.96     | 0.00        | 16,788.31    |
| Other *             | 0.00       | 0.00         | 0.00       | 0.00         | 0.00       | 0.00    | 0.00 | 0.00      | 0.00 | 0.00       | 0.00        | 0.00         |
| TOTAL               | 3,230.84   | 3,987.23     | 1,246.91   | 6,916.89     | 2,985.36   | 0.00    | 0.00 | 0.00      | 0.00 | 955.96     | 0.00        | 19,323.19    |
| EXPENSES            |            |              |            |              |            |         |      |           |      |            |             |              |
| Claims Transfers    | 15,332.09  | 2,111.00     | 0.00       | 46,110.60    | 0.00       | 0.00    | 0.00 | 0.00      | 0.00 | 0.00       | 0.00        | 63,553.69    |
| Expenses            | 0.00       | 0.00         | 0.00       | 0.00         | 0.00       | 0.00    | 0.00 | 0.00      | 0.00 | 0.00       | 0.00        | 0.00         |
| Other *             | 0.00       | 0.00         | 0.00       | 0.00         | 0.00       | 0.00    | 0.00 | 0.00      | 0.00 | 0.00       | 0.00        | 0.00         |
| TOTAL               | 15,332.09  | 2,111.00     | 0.00       | 46,110.60    | 0.00       | 0.00    | 0.00 | 0.00      | 0.00 | 0.00       | 0.00        | 63,553.69    |
| END BALANCE         | 169,209.11 | 1,029,877.53 | 322,947.71 | 1,743,811.60 | 773,501.29 | 0.00    | 1.00 | 0.00      | 0.60 | 219,085.36 | 0.00        | 4,258,434.20 |

| SUMMARY OF CASH TRA | NSACTIONS |            |            |              |            |             |      |           |           |            |             |              |
|---------------------|-----------|------------|------------|--------------|------------|-------------|------|-----------|-----------|------------|-------------|--------------|
| FUND YEAR           | 2021      |            |            |              |            |             |      |           |           |            |             |              |
| Month Ending: N     | farch     |            |            |              |            |             |      |           |           |            |             |              |
|                     | Property  | Liability  | Auto       | Workers Comp | Deductible | POL/EPL     | EJIF | Cyber JIF | MEL       | Admin      | Contingency | TOTAL        |
| OPEN BALANCE        | 79,407.87 | 713,686.15 | 242,736.67 | 76,729.33    | 993,138.76 | (36,146.97) | 0.00 | 0.00      | 39,751.00 | 282,491.53 | 0.00        | 2,391,794.3  |
| RECEIPTS            |           |            |            |              |            |             |      |           |           |            |             |              |
| Assessments         | 0.00      | 0.00       | 0.00       | 0.00         | 0.00       | 0.00        | 0.00 | 0.00      | 0.00      | 0.00       | 0.00        | 0.0          |
| Refunds             | 7,350.00  | 0.00       | 0.00       | 1,942.16     | 0.00       | 0.00        | 0.00 | 0.00      | 0.00      | 0.00       | 0.00        | 9,292.10     |
| Invest Pymnts       | 304.82    | 2,753.92   | 934.49     | 317.20       | 3,823.41   | 0.00        | 0.00 | 0.00      | 0.00      | 1,087.69   | 0.00        | 9,221.53     |
| Invest Adj          | 2.75      | 24.71      | 8.41       | 2.66         | 34.39      | 0.00        | 0.00 | 0.00      | 0.00      | 9.78       | 0.00        | 82.70        |
| Subtotal Invest     | 307.57    | 2,778.63   | 942.90     | 319.86       | 3,857.80   | 0.00        | 0.00 | 0.00      | 0.00      | 1,097.47   | 0.00        | 9,304.23     |
| Other *             | 0.00      | 0.00       | 0.00       | 0.00         | 0.00       | 0.00        | 0.00 | 0.00      | 0.00      | 0.00       | 0.00        | 0.00         |
| TOTAL               | 7,657.57  | 2,778.63   | 942.90     | 2,262.02     | 3,857.80   | 0.00        | 0.00 | 0.00      | 0.00      | 1,097.47   | 0.00        | 18,596.39    |
| EXPENSES            |           |            |            |              |            |             |      |           |           |            |             |              |
| Claims Transfers    | 4,239.70  | 72,947.23  | 0.00       | 46,455.48    | 0.00       | 0.00        | 0.00 | 0.00      | 0.00      | 0.00       | 0.00        | 123,642.4    |
| Expenses            | 0.00      | 0.00       | 0.00       | 0.00         | 0.00       | 0.00        | 0.00 | 0.00      | 0.00      | 0.00       | 0.00        | 0.0          |
| Other *             | 0.00      | 0.00       | 0.00       | 0.00         | 0.00       | 0.00        | 0.00 | 0.00      | 0.00      | 0.00       | 0.00        | 0.0          |
| TOTAL               | 4,239.70  | 72,947.23  | 0.00       | 46,455.48    | 0.00       | 0.00        | 0.00 | 0.00      | 0.00      | 0.00       | 0.00        | 123,642.4    |
| END BALANCE         | 82,825.74 | 643,517.55 | 243,679.57 | 32,535.87    | 996,996.56 | (36,146.97) | 0.00 | 0.00      | 39,751.00 | 283,589.00 | 0.00        | 2,286,748.32 |

#### CERTIFICATION AND RECONCILIATION OF CLAIMS PAYMENTS AND RECOVERIES TRI COUNTY MUNICIPAL JOINT INSURANCE FUND

| Month             | March |
|-------------------|-------|
| Current Fund Year | 2024  |

|           |              | 1.            | 2.         | 3.         | 4.            | 5.            | 6.         | 7.            | 8.     |
|-----------|--------------|---------------|------------|------------|---------------|---------------|------------|---------------|--------|
|           |              | Calc. Net     | Monthly    | Monthly    | Calc. Net     | TPA Net       | Variance   | Delinquent    | Change |
| Policy    |              | Paid Thru     | Net Paid   | Recoveries | Paid Thru     | Paid Thru     | To Be      | Unreconciled  | This   |
| Year      | Coverage     | Last Month    | March      | March      | March         | March         | Reconciled | Variance From | Month  |
| 2024      | Property     | 37,964.45     | 78,897.53  | 3,905.00   | 112,956.98    | 112,956.98    | 0.00       | 0.00          | 0.00   |
|           | Liability    | 0.00          | 27.50      | 0.00       | 27.50         | 27.50         | 0.00       | 0.00          | 0.00   |
|           | Auto         | 0.00          | 115.00     | 0.00       | 115.00        | 115.00        | 0.00       | 0.00          | 0.00   |
|           | Workers Comp | 24,032.09     | 46,128.13  | 0.00       | 70,160.22     | 70,160.22     | 0.00       | 0.00          | 0.00   |
|           | Total        | 61,996.54     | 125,168.16 | 3,905.00   | 183,259.70    | 183,259.70    | 0.00       | 0.00          | 0.00   |
| 2023      | Property     | 830,635.38    | 77,451.38  | 14,540.10  | 893,546.66    | 893,546.66    | 0.00       | 0.00          | 0.00   |
|           | Liability    | 25,767.11     | 948.00     | 0.00       | 26,715.11     | 26,715.11     | 0.00       | 0.00          | 0.00   |
|           | Auto         | 47,777.00     | 585.00     | 0.00       | 48,362.00     | 48,362.00     | 0.00       | 0.00          | 0.00   |
|           | Workers Comp | 1,633,084.89  | 90,137.40  | 6,868.20   | 1,716,354.09  | 1,716,354.09  | (0.00)     | (0.00)        | (0.00) |
|           | Total        | 2,537,264.38  | 169,121.78 | 21,408.30  | 2,684,977.86  | 2,684,977.86  | (0.00)     | (0.00)        | (0.00) |
| 2022      | Property     | 911,711.24    | 15,332.09  | 2,534.88   | 924,508.45    | 924,508.45    | (0.00)     | (0.00)        | 0.00   |
|           | Liability    | 101,466.19    | 2,111.00   | 0.00       | 103,577.19    | 103,577.19    | 0.00       | 0.00          | 0.00   |
|           | Auto         | 23,580.86     | 0.00       | 0.00       | 23,580.86     | 23,580.86     | 0.00       | 0.00          | 0.00   |
|           | Workers Comp | 1,967,924.18  | 46,110.60  | 0.00       | 2,014,034.78  | 2,014,034.78  | (0.00)     | (0.00)        | 0.00   |
|           | Total        | 3,004,682.47  | 63,553.69  | 2,534.88   | 3,065,701.28  | 3,065,701.28  | (0.00)     | (0.00)        | 0.00   |
| 2021      | Property     | 660,970.57    | 4,239.70   | 7,350.00   | 657,860.27    | 657,860.27    | (0.00)     | (0.00)        | (0.00) |
|           | Liability    | 303,855.14    | 72,947.23  | 0.00       | 376,802.37    | 376,802.37    | 0.00       | 0.00          | 0.00   |
|           | Auto         | 57,655.03     | 0.00       | 0.00       | 57,655.03     | 57,655.03     | 0.00       | 0.00          | 0.00   |
|           | Workers Comp | 3,453,549.92  | 46,455.48  | 1,942.16   | 3,498,063.24  | 3,496,216.11  | 1,847.13   | 1,847.13      | 0.00   |
|           | Total        | 4,476,030.66  | 123,642.41 | 9,292.16   | 4,590,380.91  | 4,588,533.78  | 1,847.13   | 1,847.13      | (0.00) |
| 2020      | Property     | 697,918.05    | 31,992.71  | 0.00       | 729,910.76    | 729,910.76    | (0.00)     | (0.00)        | 0.00   |
|           | Liability    | 267,639.86    | 19,203.00  | 0.00       | 286,842.86    | 286,842.86    | 0.00       | 0.00          | 0.00   |
|           | Auto         | 597,874.69    | 10,785.00  | 0.00       | 608,659.69    | 608,659.69    | 0.00       | 0.00          | 0.00   |
|           | Workers Comp | 3,845,991.59  | 138,303.09 | 0.00       | 3,984,294.68  | 3,985,326.68  | (1,032.00) | (1,032.00)    | (0.00) |
|           | Total        | 5,409,424.19  | 200,283.80 | 0.00       | 5,609,707.99  | 5,610,739.99  | (1,032.00) | (1,032.00)    | (0.00) |
| Closed FY | Property     | 4,782.54      | 2,186.09   | 1,860.95   | 5,107.68      | 5,107.68      | 0.00       | 0.00          | 0.00   |
|           | Liability    | 0.00          | 0.00       | 0.00       | 0.00          | 0.00          | 0.00       | 0.00          | 0.00   |
|           | Auto         | 0.00          | 0.00       | 0.00       | 0.00          | 0.00          | 0.00       | 0.00          | 0.00   |
|           | Workers Comp | 0.00          | 200.50     | 0.00       | 200.50        | 200.50        | 0.00       | 0.00          | 0.00   |
|           | Total        | 4,782.54      | 2,386.59   | 1,860.95   | 5,308.18      | 5,308.18      | 0.00       | 0.00          | 0.00   |
|           | TOTAL        | 15,494,180.78 | 684,156.43 | 39,001.29  | 16,139,335.92 | 16,138,520.79 | 815.13     | 815.13        | (0.00) |



#### Bank Account: TRI CTY MUN JIF IV

Insured Name(s): Bank Account(s):

1000399354

| Claim<br>Number | Claimant 7         | Гуре       | DOL           | Insured Na           | ame                                     | Transaction Typ            | e             | Payment<br>Amount | Policy<br>Period | Paymen<br>Type         |
|-----------------|--------------------|------------|---------------|----------------------|-----------------------------------------|----------------------------|---------------|-------------------|------------------|------------------------|
| Check Numb      | er: 28629          | Check D    | ate: 03/01/20 | 24 Payee Name: MAI   | DDEN & MADDEN F                         | PA                         | 1             |                   |                  |                        |
| 2021209621      | BODILY INJU        | RY         | 06/30/2020    | WASHINGTON TOWNSHI   | Ρ                                       | L-LEGAL AL                 |               | \$3,285.00        | 2020-2020        | Legal                  |
|                 |                    |            |               |                      |                                         |                            | Check Amount: | \$3,285.00        |                  |                        |
| Check Numb      | er: 28630          | Check D    | ate: 03/01/20 | 24 Payee Name: STA   | TE SHORTHAND R                          | EPORTING SERVICE           |               |                   |                  |                        |
| 2022259937      | INDEMNITY          |            | 03/24/2020    | GLASSBORO BOROUGH    |                                         | E-MISC LEGAL EXPENSE WC    |               | \$75.00           | 2020-2020        | Expense                |
|                 |                    |            |               |                      |                                         |                            | Check Amount: | \$75.00           |                  |                        |
| Check Numb      | er: 28631          | Check D    | ate: 03/01/20 | 24 Payee Name: BAY   | SHORE FORD PEN                          | INSVILLE INC               |               |                   |                  |                        |
| 024324465       | 1ST PARTY C        | OLL PD     | 01/16/2024    | PENNSVILLE TOWNSHIP  |                                         | M-MISC MED(WC) & PD (NON-W | C) PR COLL    | \$11,422.54       | 2024-2024        | Loss                   |
|                 |                    |            |               |                      |                                         |                            | Check Amount: | \$11,422.54       |                  |                        |
| Check Numb      | er: 28632          | Check D    | ate: 03/01/20 | 24 Payee Name: I C U | JINVESTIGATIONS                         | INC                        |               |                   |                  |                        |
| 024320615       | INDEMNITY          |            | 11/28/2023    | GREENWICH TOWNSHIP   |                                         | E-INDEP ADJUSTOR WC        |               | \$475.00          | 2023-2023        | Expense                |
| 2024326224      | 1ST PARTY C        | OLL PD     | 02/05/2024    | FAIRFIELD TOWNSHIP   |                                         | E-SUBROGATION EXPENSE PR   |               | \$150.00          | 2024-2024        | Expense                |
|                 |                    |            |               |                      |                                         |                            | Check Amount: | \$625.00          |                  |                        |
| Check Numb      | er: 28633          | Check D    | ate: 03/01/20 | 24 Payee Name: MIL   | TON W BROWN                             |                            |               |                   |                  |                        |
| 2022259937 INDE | INDEMNITY          |            | 03/24/2020    | GLASSBORO BOROUGH    |                                         | I-ASSESSMENT-W.C. IND      |               | \$7,177.00        | 2020-2020        | Loss                   |
|                 |                    |            |               |                      |                                         |                            | Check Amount: | \$7,177.00        |                  |                        |
| Check Numb      | er: 28634          | Check D    | ate: 03/01/20 | 24 Payee Name: ATL   | ANTIC SECURITY                          | NT'L                       |               |                   |                  |                        |
| 2024325590      | INDEMNITY          |            | 02/01/2024    | WASHINGTON TOWNSHI   | Ρ                                       | E-MISC ALL OTHER WC        |               | \$375.00          | 2024-2024        | Expense                |
|                 |                    |            |               |                      |                                         |                            | Check Amount: | \$375.00          |                  |                        |
| Check Numb      | er: 28635          | Check D    | ate: 03/01/20 | 24 Payee Name: LEC   | S PETETTI LLC                           |                            |               |                   |                  |                        |
| 024321533       | 1ST PARTY C        | OLL PD     | 12/07/2023    | MONROE TOWNSHIP(TRI  | JIF)                                    | E-APPRAISERS PR            |               | \$190.00          | 2023-2023        | Expense                |
| 024323072       | 1ST PARTY C        | OLL PD     | 12/28/2023    | MONROE TOWNSHIP(TRI  | JIF)                                    | E-APPRAISERS PR            |               | \$675.00          | 2023-2023        | Expense                |
| 2024324465      | 1ST PARTY C        | OLL PD     | 01/16/2024    | PENNSVILLE TOWNSHIP  |                                         | E-APPRAISERS PR            |               | \$168.48          | 2024-2024        | Expense                |
|                 |                    |            |               |                      |                                         |                            | Check Amount: | \$1,033.48        |                  |                        |
| Check Numb      | er: 28636          | Check D    | ate: 03/01/20 | 24 Payee Name: CLI   | FF GRAY APPRAIS                         | AL SERVICE                 |               |                   |                  |                        |
| 024315884       | 3RD PARTY F        | D          | 10/04/2023    | LOGAN TOWNSHIP       |                                         | E-INDEP ADJUSTOR AL        |               | \$85.00           | 2023-2023        | Expense                |
|                 |                    |            |               |                      |                                         |                            | Check Amount: | \$85.00           |                  |                        |
| Check Numb      | er: 28637          | Check D    | ate: 03/01/20 | 24 Payee Name: AFF   | ANATO MARUT LL                          | c                          |               |                   |                  |                        |
| cessed Date:    | Mar 1, 2024<br>All | through Ma | ar 31, 2024   |                      | Insurance Type(s):<br>Claimant Type(s): | All                        |               |                   | Run Date         | Page<br>e: 4/2/2024 15 |



| Claimant    | Туре                                                                                                                                                                                                                           | DOL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| INDEMNITY   |                                                                                                                                                                                                                                | 03/24/2020                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | GLASSBORO BOROU                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ЭH                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | L-LEGAL WC                                                                                        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| er: 28638   | Check D                                                                                                                                                                                                                        | Date: 03/01/20                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 24 Payee Name: 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | TAYLOR DARIN CLA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | IM SERVICE                                                                                        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| BLDG/CONTI  | ENT                                                                                                                                                                                                                            | 02/07/2024                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | WOODBURY CITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | E-INDEP ADJUSTOR PR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                          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| er: 28645   | Check D                                                                                                                                                                                                                        | Date: 03/01/20                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          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| er: 28646   | Check D                                                                                                                                                                                                                        | Date: 03/01/20                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          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|             | INDEMNITY<br>er: 28638<br>BLDG/CONTI<br>er: 28639<br>COMPREHEN<br>COMPREHEN<br>IST PARTY OF<br>INDEMNITY<br>er: 28641<br>INDEMNITY<br>er: 28642<br>INLAND MAR<br>er: 28643<br>INDEMNITY<br>er: 28644<br>INDEMNITY<br>er: 28645 | INDEMNITY  Pr: 28638 Check E BLDG/CONTENT  Pr: 28639 Check E COMPREHENSIVE  Pr: 28640 Check E IST PARTY COLL PD  Pr: 28641 Check E INDEMNITY  Pr: 28642 Check E INDEMNITY  Pr: 28644 Check E BODILY INJURY  Pr: 28645 Check E | INDEMNITY       03/24/2020         er: 28638       Check Date: 03/01/20         BLDG/CONTENT       02/07/2024         er: 28639       Check Date: 03/01/20         COMPREHENSIVE       10/06/2023         er: 28640       Check Date: 03/01/20         COMPREHENSIVE       10/06/2023         er: 28640       Check Date: 03/01/20         IST PARTY COLL PD       12/28/2023         er: 28641       Check Date: 03/01/20         INDEMNITY       08/23/2021         er: 28642       Check Date: 03/01/20         INLAND MARINE       09/11/2023         er: 28643       Check Date: 03/01/20         INDEMNITY       07/06/2021         INDEMNITY       12/11/2023         er: 28645       Check Date: 03/01/20         INDEMNITY       12/11/2023         er: 28645       Check Date: 03/01/20         INDEMNITY       12/11/2023 | INDEMNITY03/24/2020GLASSBORO BOROUGar: 28638Check Date: 03/01/2024Payee Name: TBLDG/CONTENT02/07/2024WOODBURY CITYar: 28639Check Date: 03/01/2024Payee Name: TCOMPREHENSIVE10/06/2023WASHINGTON TOWNSar: 28640Check Date: 03/01/2024Payee Name: I1ST PARTY COLL PD12/28/2023MONROE TOWNSHIP(ar: 28641Check Date: 03/01/2024Payee Name: IINDEMNITY08/23/2021MONROE TOWNSHIP(ar: 28642Check Date: 03/01/2024Payee Name: IINDEMNITY09/11/2023SWEDESBORO BOROar: 28643Check Date: 03/01/2024Payee Name: IINDEMNITY07/06/2021DEPTFORD TOWNSHIP(ar: 28644Check Date: 03/01/2024Payee Name: IINDEMNITY12/11/2023MONROE TOWNSHIP(ar: 28645Check Date: 03/01/2024Payee Name: IINDEMNITY12/11/2023MONROE TOWNSHIP(ar: 28645Check Date: 03/01/2024Payee Name: IBODILY INJURY11/05/2020MONROE TOWNSHIP(ar: 28646Check Date: 03/01/2024Payee Name: I | INDEMNITY03/24/2020GLASSBORO BOROUGHar: 28638Check Date: 03/01/2024Payee Name: TAYLOR DARIN CLABLDG/CONTENT02/07/2024WOODBURY CITYar: 28639Check Date: 03/01/2024Payee Name: JOEBOY INC T/A ACCOMPREHENSIVE10/06/2023WASHINGTON TOWNSHIPar: 28640Check Date: 03/01/2024Payee Name: DCI FLEET SERVICE1ST PARTY COLL PD12/28/2023MONROE TOWNSHIP(TRIJIF)ar: 28641Check Date: 03/01/2024Payee Name: HOWARD HAMMERINDEMNITY08/23/2021MONROE TOWNSHIP(TRIJIF)ar: 28642Check Date: 03/01/2024Payee Name: ALPEX CONSTRUCINLAND MARINE09/11/2023SWEDESBORO BOROUGHar: 28643Check Date: 03/01/2024Payee Name: PIETRAS SARACINCINDEMNITY07/06/2021DEPTFORD TOWNSHIPar: 28644Check Date: 03/01/2024Payee Name: MONROE TOWNSHIPar: 28645Check Date: 03/01/2024Payee Name: MONROE TOWNSHIPar: 28645Check Date: 03/01/2024Payee Name: JAMES A ROSSI CCBODILY INJURY11/05/2020MONROE TOWNSHIP(TRIJIF)ar: 28645Check Date: 03/01/2024Payee Name: JAMES A ROSSI CCBODILY INJURY11/05/2020MONROE TOWNSHIP(TRIJIF) | INDEMNITY       03/24/2020       GLASSBORO BOROUGH       L-LEGAL WC         ar: 28638       Check Date: 03/01/2024       Payee Name: TAYLOR DARIN CLAIM SERVICE         BLDG/CONTENT       02/07/2024       WOODBURY CITY       E-INDEP ADJUSTOR PR         ar: 28639       Check Date: 03/01/2024       Payee Name: JOEBOY INC T/A ACTION AUTO BODY         COMPREHENSIVE       10/06/2023       WASHINGTON TOWNSHIP       M-MISC MED(WC) & PD (NON-W         ar: 28640       Check Date: 03/01/2024       Payee Name: DCI FLEET SERVICES         1ST PARTY COLL PD       12/28/2023       MONROE TOWNSHIP(TRIJIF)       M-MISC MED(WC) & PD (NON-W         ar: 28641       Check Date: 03/01/2024       Payee Name: HOWARD HAMMER PSY D LLC         INDEMNITY       08/23/2021       MONROE TOWNSHIP(TRIJIF)       M-BEHAVIORAL HEALTH         ar: 28642       Check Date: 03/01/2024       Payee Name: ALPEX CONSTRUCTION INC         INLAND MARINE       09/11/2023       SWEDESBORO BOROUGH       M-MISC MED(WC) & PD (NON-W         ar: 28643       Check Date: 03/01/2024       Payee Name: PIETRAS SARACINO SMITH & MEEK LLP         INDEMNITY       07/06/2021       DEPTFORD TOWNSHIP       L-LEGAL WC         ar: 28644       Check Date: 03/01/2024       Payee Name: MONROE TOWNSHIP(TRIJIF)         INDEMNITY       12/11/2023       MONROE TOWNSHIP(TRI | INDEMNITY03/24/2020GLASSBORO BOROUGHL-LEGAL WC<br>Check Amount:ar: 26338Check Date: 03/01/2024Payee Name: TAYLOR DARIN CLAIMSERVICEBLDG/CONTENT02/07/2024WOODBURY CITYE-INDEP ADJUSTOR PR<br>Check Amount:ar: 26639Check Date: 03/01/2024Payee Name: JOEBOY INC T/A ACTION AUTO BODYcCOMPREHENSIVE10/06/2023WASHINGTON TOWNSHIPM-MISC MED(WC) & PD (NON-WC) PR COLL<br>Check Amount:cr: 26640Check Date: 03/01/2024Payee Name: DCI FLEET SERVICES1ST PARTY COLL PD12/26/2023MONROE TOWNSHIPM-MISC MED(WC) & PD (NON-WC) PR COLL<br>Check Amount:ar: 26641Check Date: 03/01/2024Payee Name: HOWARD HAMMER PS V LLCINDEMNITY09/31/2024Payee Name: ALPEX CONSTRUCTIONar: 26642Check Date: 03/01/2024Payee Name: ALPEX CONSTRUCTIONINLAND MARINE09/11/2023SWEDESBORO BOROUGHM-MISC MED(WC) & PD (NON-WC) OT R LOSS PR<br>Check Amount:ar: 26643Check Date: 03/01/2024Payee Name: PIETRAS SARACINO SULTIONINLAND MARINE09/11/2023SWEDESBORO BOROUGHM-MISC MED(WC) & PD (NON-WC) OT R LOSS PR<br>Check Amount:ar: 26643Check Date: 03/01/2024Payee Name: PIETRAS SARACINO SULTIONINDEMNITY07/06/2021DEPTFORD TOWNSHIPINDEMNITY07/06/2021Payee Name: MOROE TOWNSHIPar: 26645Check Date: 03/01/2024Payee Name: JAMES A ROSSI CCRar: 26645Check Date: 03/01/2024Payee Name: JAMES A ROSSI CCRar: 26646Check Date: 03/01/2024Payee Name: JAMES A ROSSI C | INDEMNITY         Os/24/2020         GLASSBORO BOROUGH         L-LEGAL WC         S392.00           INDEMNITY         0.3/24/2020         GLASSBORO BOROUGH         L-LEGAL WC         Check Amount:         S392.00           Stabular         Check Amount:         0.3/24/2020         Payee Name: TAYLOR DARIN CLAIM SERVICE         S2.601.17           BLDG/CONTENT         0.2/07/2024         WOODBURY CITY         E-INDEP ADJUSTOR PR         S2.601.17           Striggt         Check Late: 0.3/01/2024         Payee Name: JOEBOY INC T/A ACT/OR DADY         Check Amount:         \$2.601.17           Striggt         Check Late: 0.3/01/2024         Payee Name: JOEBOY INC T/A ACT/OR DADY         Check Amount:         \$2.601.17           Striggt         Ohor-Create: 0.3/01/2024         Payee Name: JOEBOY INC T/A ACT/OR DADY         S2.601.17         \$2.601.17           Striggt         D//06/2023         MOINCO E TOWINSHIP         MUINS CMED(WC) & PD (NON-WC) PR COLL         \$2.601.12           Striggt         Diversional MOINCO E TOWINSHIP (TRUJF)         MMISC MED(WC) & PD (NON-WC) PR COLL         \$20.110.22           Striggt         Ohor E TOWINSHIP (TRUJF)         MUINE ENDUGICAL HEALTH         \$165.00           Striggt         Diversional MARINE         S901/2024         Payee Name: HOWARD HAMMER PSY D LLC         Check Amount:         \$165.00 </td <td>INDEMNITY         Oracle         Amount         Additional and and and and and and and and and and</td> | INDEMNITY         Oracle         Amount         Additional and |



| Claim<br>Number                                                 | Claimant                                | Type DOL             | Insured Name                                   | Transaction Type               | Payment<br>Amount | Policy<br>Period | Paymen<br>Type                        |
|-----------------------------------------------------------------|-----------------------------------------|----------------------|------------------------------------------------|--------------------------------|-------------------|------------------|---------------------------------------|
| Check Numb                                                      | er: 28647                               | Check Date: 03/01/20 | 24 Payee Name: LOGAN TOWNS                     | HIP                            |                   |                  | - '                                   |
| 2023300380                                                      | INDEMNITY                               | 03/09/2023           | LOGAN TOWNSHIP                                 | I-TEMPORARY TOTAL DISABILITY   | \$2,198.00        | 2023-2023        | Loss                                  |
|                                                                 |                                         |                      |                                                | Check Amount:                  | \$2,198.00        |                  |                                       |
| Check Numb                                                      | er: 28648                               | Check Date: 03/01/20 | 24 Payee Name: LOGAN TOWNS                     | HIP                            |                   |                  |                                       |
| 2023300380                                                      | INDEMNITY                               | 03/09/2023           | LOGAN TOWNSHIP                                 | I-TEMPORARY TOTAL DISABILITY   | \$2,198.00        | 2023-2023        | Loss                                  |
|                                                                 |                                         |                      |                                                | Check Amount:                  | \$2,198.00        |                  |                                       |
| Check Numb                                                      | er: 28649                               | Check Date: 03/01/20 | 24 Payee Name: LOGAN TOWNS                     | HIP                            |                   |                  |                                       |
| 2023300380                                                      | INDEMNITY                               | 03/09/2023           | LOGAN TOWNSHIP                                 | I-TEMPORARY TOTAL DISABILITY   | \$2,198.00        | 2023-2023        | Loss                                  |
|                                                                 |                                         |                      |                                                | Check Amount:                  | \$2,198.00        |                  |                                       |
| Check Numb                                                      | er: 28650                               | Check Date: 03/01/20 | 24 Payee Name: LOGAN TOWNS                     | HIP                            |                   |                  |                                       |
| 2023300380                                                      | INDEMNITY                               | 03/09/2023           | LOGAN TOWNSHIP                                 | I-TEMPORARY TOTAL DISABILITY   | \$2,198.00        | 2023-2023        | Loss                                  |
|                                                                 |                                         |                      |                                                | Check Amount:                  | \$2,198.00        |                  |                                       |
| Check Numb                                                      | er: 28651                               | Check Date: 03/01/20 | 24 Payee Name: PENNS GROVE                     | BOROUGH                        |                   |                  |                                       |
| 2024321967                                                      | INDEMNITY                               | 12/16/2023           | PENNS GROVE BOROUGH                            | I-TEMPORARY TOTAL DISABILITY   | \$1,988.85        | 2023-2023        | Loss                                  |
|                                                                 |                                         |                      |                                                | Check Amount:                  | \$1,988.85        |                  |                                       |
| Check Numb                                                      | er: 28652                               | Check Date: 03/01/20 | 24 Payee Name: WASHINGTON 1                    | TOWNSHIP                       |                   |                  |                                       |
| 2024325590                                                      | INDEMNITY                               | 02/01/2024           | WASHINGTON TOWNSHIP                            | I-TEMPORARY TOTAL DISABILITY   | \$4,524.00        | 2024-2024        | Loss                                  |
|                                                                 |                                         |                      |                                                | Check Amount:                  | \$4,524.00        |                  |                                       |
| Check Numb                                                      | er: 28653                               | Check Date: 03/01/20 | 24 Payee Name: Anthony Mingue                  | ez                             |                   |                  |                                       |
| 2022271801                                                      | INDEMNITY                               | 05/01/2022           | PENNS GROVE BOROUGH                            | I-PERMANENT PARTIAL DISABILITY | \$710.00          | 2022-2022        | Loss                                  |
|                                                                 |                                         |                      |                                                | Check Amount:                  | \$710.00          |                  |                                       |
| Check Numb                                                      | er: 28654                               | Check Date: 03/01/20 | 24 Payee Name: Craig Rawles                    |                                |                   |                  |                                       |
| 2022259937                                                      | INDEMNITY                               | 03/24/2020           | GLASSBORO BOROUGH                              | I-PERMANENT PARTIAL DISABILITY | \$29,572.00       | 2020-2020        | Loss                                  |
|                                                                 |                                         |                      |                                                | Check Amount:                  | \$29,572.00       |                  |                                       |
| Check Numb                                                      | er: 28655                               | Check Date: 03/01/20 | 24 Payee Name: Diane Izzo                      |                                |                   |                  |                                       |
| 2024322505                                                      | INDEMNITY                               | 12/21/2023           | BOROUGH OF NATIONAL PARK                       | I-TEMPORARY TOTAL DISABILITY   | \$586.00          | 2023-2023        | Loss                                  |
|                                                                 |                                         |                      |                                                | Check Amount:                  | \$586.00          |                  |                                       |
| Check Numb                                                      | er: 28656                               | Check Date: 03/01/20 | 24 Payee Name: KYLE RIEPEN                     |                                |                   |                  |                                       |
| 2022251631                                                      | INDEMNITY                               | 10/13/2021           | MANTUA TOWNSHIP                                | I-PERMANENT PARTIAL DISABILITY | \$1,177.44        | 2021-2021        | Loss                                  |
| ocessed Date:<br>te Of Loss:<br>ured Name(s):<br>nk Account(s): | Mar 1, 2024<br>All<br>All<br>1000399354 | through Mar 31, 2024 | Insurance Typ<br>Claimant Type<br>Coverage(s): | e(s): All e(s): 137            |                   |                  | Page<br>e: 4/2/2024 15<br>Cognos Vers |



| Claim<br>Number     | Claimant    | Туре    | DOL           | Insured Name                     | Transaction Type             |               | Payment<br>Amount | Policy<br>Period | Payment<br>Type |
|---------------------|-------------|---------|---------------|----------------------------------|------------------------------|---------------|-------------------|------------------|-----------------|
|                     |             |         |               |                                  |                              | Check Amount: | \$1,177.44        |                  |                 |
| Check Numb          | er: 28657   | Check D | ate: 03/01/20 | 24 Payee Name: PAUL BUNN         |                              |               |                   |                  |                 |
| 2021229388          | INDEMNITY   |         | 02/08/2021    | WOODBURY CITY                    | I-PERMANENT PARTIAL DISABILI | TY            | \$1,177.44        | 2021-2021        | Loss            |
|                     |             |         |               |                                  |                              | Check Amount: | \$1,177.44        |                  |                 |
| Check Numb          | er: 28658   | Check D | ate: 03/01/20 | 24 Payee Name: Steve DeFelice    |                              |               |                   |                  |                 |
| 2021238864          | INDEMNITY   |         | 05/10/2021    | MONROE TOWNSHIP(TRIJIF)          | I-PERMANENT PARTIAL DISABILI | TY            | \$1,140.64        | 2021-2021        | Loss            |
|                     |             |         |               |                                  | (                            | Check Amount: | \$1,140.64        |                  |                 |
| Check Number: 28659 |             | Check D | ate: 03/01/20 | 24 Payee Name: Ronald Nye        |                              |               |                   |                  |                 |
| 2020202846          | INDEMNITY   |         | 04/17/2020    | MONROE TOWNSHIP(TRIJIF)          | I-PERMANENT PARTIAL DISABILI | TY            | \$1,764.00        | 2020-2020        | Loss            |
|                     |             |         |               |                                  |                              | Check Amount: | \$1,764.00        |                  |                 |
| Check Numb          | er: 28660   | Check D | ate: 03/01/20 | 24 Payee Name: MONROE TOWNSHIP(  | (RIJIF)                      |               |                   |                  |                 |
| 2024321533 1        | 1ST PARTY C | OLL PD  | 12/07/2023    | MONROE TOWNSHIP(TRIJIF)          | M-MISC MED(WC) & PD (NON-WC  | ) PR COLL     | \$19,980.46       | 2023-2023        | Loss            |
|                     |             |         |               |                                  |                              | Check Amount: | \$19,980.46       |                  |                 |
| Check Numb          | er: 28661   | Check D | ate: 03/01/20 | 24 Payee Name: MONROE TOWNSHIP(  | [RIJIF)                      |               |                   |                  |                 |
| 2024327823          | 1ST PARTY C | OLL PD  | 08/01/2023    | MONROE TOWNSHIP(TRIJIF)          | M-MISC MED(WC) & PD (NON-WC  | ) PR COLL     | \$1,548.99        | 2023-2023        | Loss            |
|                     |             |         |               |                                  |                              | Check Amount: | \$1,548.99        |                  |                 |
| Check Numb          | er: 28662   | Check D | ate: 03/01/20 | 24 Payee Name: MONROE TOWNSHIP(  | [RIJIF)                      |               |                   |                  |                 |
| 2024317480          | COMPREHEN   | ISIVE   | 10/21/2023    | MONROE TOWNSHIP(TRIJIF)          | M-MISC MED(WC) & PD (NON-WC  | ) PR COLL     | \$146.50          | 2023-2023        | Loss            |
|                     |             |         |               |                                  |                              | Check Amount: | \$146.50          |                  |                 |
| Check Numb          | er: 28663   | Check D | ate: 03/01/20 | 24 Payee Name: MONROE TOWNSHIP(  | [RIJIF)                      |               |                   |                  |                 |
| 2024318278          | 1ST PARTY C | OLL PD  | 10/28/2023    | MONROE TOWNSHIP(TRIJIF)          | M-MISC MED(WC) & PD (NON-WC  | ) PR COLL     | \$122.50          | 2023-2023        | Loss            |
|                     |             |         |               |                                  |                              | Check Amount: | \$122.50          |                  |                 |
| Check Numb          | er: 28664   | Check D | ate: 03/01/20 | 24 Payee Name: IVYREHAB NETWORK  | INC                          |               |                   |                  |                 |
| 2023293464          | INDEMNITY   |         | 01/11/2023    | MANTUA TOWNSHIP                  | M-PHYSICIAN FEES             |               | \$404.00          | 2023-2023        | Loss            |
| 2024320615          | INDEMNITY   |         | 11/28/2023    | GREENWICH TOWNSHIP               | M-PHYSICIAN FEES             |               | \$489.00          | 2023-2023        | Loss            |
|                     |             |         |               |                                  |                              | Check Amount: | \$893.00          |                  |                 |
| Check Numb          | er: 28665   | Check D | ate: 03/01/20 | 24 Payee Name: PREMIER ORTHOPEDI | C OF SOUTH JERSEY            |               |                   |                  |                 |
| 2024312158          | MEDICAL ON  | LY      | 08/25/2023    | MONROE TOWNSHIP(TRIJIF)          | M-ORTHO/NEURO FEES           |               | \$108.15          | 2023-2023        | Loss            |
| 2024322505          | INDEMNITY   |         | 12/21/2023    | BOROUGH OF NATIONAL PARK         | M-ORTHO/NEURO FEES           |               | \$108.15          | 2023-2023        | Loss            |



| Claim<br>Number     | Claimant   | Type DOL            | Insured Name                           | Transaction Ty             | pe            | Payment<br>Amount | Policy<br>Period | Paymen<br>Type |
|---------------------|------------|---------------------|----------------------------------------|----------------------------|---------------|-------------------|------------------|----------------|
|                     |            |                     | ·                                      |                            | Check Amount: | \$216.30          |                  |                |
| Check Numb          | er: 28666  | Check Date: 03/01/2 | 024 Payee Name: REGIONAL DIAGNOST      | TIC IMAGING, PA            |               |                   |                  |                |
| 2024322820          | MEDICAL ON | ILY 12/28/2023      | MANTUA TOWNSHIP                        | M-PHYSICIAN FEES           |               | \$109.21          | 2023-2023        | Loss           |
|                     |            |                     |                                        |                            | Check Amount: | \$109.21          |                  |                |
| Check Numb          | er: 28667  | Check Date: 03/01/2 | 024 Payee Name: INSPIRA HEALTH NET     | WORK MEDICAL GROUP, P.C.   |               |                   |                  |                |
| 2024321185          | MEDICAL ON | ILY 12/06/2023      | GLASSBORO BOROUGH                      | M-OCCUPATIONAL MEDICINE    |               | \$184.82          | 2023-2023        | Loss           |
|                     |            |                     |                                        |                            | Check Amount: | \$184.82          |                  |                |
| Check Number: 28668 |            | Check Date: 03/01/2 | 024 Payee Name: SOUTH JERSEY RADIO     | OLOGY ASSOCIATES PA        |               |                   |                  |                |
| 2024322505          | INDEMNITY  | 12/21/2023          | BOROUGH OF NATIONAL PARK               | M-DIAGNOSTICS              |               | \$280.00          | 2023-2023        | Loss           |
|                     |            |                     |                                        |                            | Check Amount: | \$280.00          |                  |                |
| Check Numb          | er: 28669  | Check Date: 03/01/2 | 024 Payee Name: ONE CALL CARE DIAG     | SNOSTICS                   |               |                   |                  |                |
| 2021225591          | INDEMNITY  | 01/07/2021          | GLASSBORO BOROUGH                      | M-MRI                      |               | \$485.00          | 2021-2021        | Loss           |
| 2023281080          | INDEMNITY  | 08/19/2022          | MONROE TOWNSHIP(TRIJIF)                | M-MRI                      |               | \$595.27          | 2022-2022        | Loss           |
| 2023283220          | MEDICAL ON | ILY 09/08/2022      | GLASSBORO BOROUGH                      | M-MRI                      |               | \$485.00          | 2022-2022        | Loss           |
| 2024321089          | INDEMNITY  | 11/28/2023          | WASHINGTON TOWNSHIP                    | M-MRI                      |               | \$800.00          | 2023-2023        | Loss           |
| 2024321516          | INDEMNITY  | 12/11/2023          | MONROE TOWNSHIP(TRIJIF)                | M-MRI                      |               | \$1,150.00        | 2023-2023        | Loss           |
|                     |            |                     |                                        |                            | Check Amount: | \$3,515.27        |                  |                |
| Check Numb          | er: 28670  | Check Date: 03/01/2 | 024 Payee Name: MATTHEW J PITERA N     | ID PA                      |               |                   |                  |                |
| 2021234379          | INDEMNITY  | 04/05/2021          | FRANKLIN TOWNSHIP                      | M-BEHAVIORAL HEALTH        |               | \$450.00          | 2021-2021        | Loss           |
| 2022247967          | INDEMNITY  | 09/14/2021          | MANTUA TOWNSHIP                        | M-BEHAVIORAL HEALTH        |               | \$450.00          | 2021-2021        | Loss           |
|                     |            |                     |                                        |                            | Check Amount: | \$900.00          |                  |                |
| Check Numb          | er: 28671  | Check Date: 03/01/2 | 024 Payee Name: EMERGENCY PHYSICI      | AN ASSOCIATES OF SOUTH JEF | RSEY, PC      |                   |                  |                |
| 2024325491          | MEDICAL ON | ILY 01/31/2024      | MONROE TOWNSHIP(TRIJIF)                | M-PHYSICIAN FEES           |               | \$611.00          | 2024-2024        | Loss           |
| 2024325508          | MEDICAL ON | ILY 01/12/2024      | GLASSBORO BOROUGH                      | M-PHYSICIAN FEES           |               | \$611.00          | 2024-2024        | Loss           |
|                     |            |                     |                                        |                            | Check Amount: | \$1,222.00        |                  |                |
| Check Numb          | er: 28672  | Check Date: 03/01/2 | 024 Payee Name: ATLANTIC PHYSICAL      | THERAPY CENTER             |               |                   |                  |                |
| 2023298255          | INDEMNITY  | 03/07/2023          | DEPTFORD TOWNSHIP                      | M-PHYSICIAN FEES           |               | \$800.00          | 2023-2023        | Loss           |
|                     |            |                     |                                        |                            | Check Amount: | \$800.00          |                  |                |
| Check Numb          | er: 28673  | Check Date: 03/01/2 | 024 Payee Name: NovaCare Rehabilitatio | on                         |               |                   |                  |                |



| Claim<br>Number | Claimant   | Type DOL            | Insured Name                       | Transaction Ty             | pe                | Payment<br>Amount | Policy<br>Period | Payment<br>Type |
|-----------------|------------|---------------------|------------------------------------|----------------------------|-------------------|-------------------|------------------|-----------------|
| 2023298255      | INDEMNITY  | 03/07/2023          | DEPTFORD TOWNSHIP                  | M-PHYSICIAN FEES           |                   | \$201.88          | 2023-2023        | Loss            |
| 2023300380      | INDEMNITY  | 03/09/2023          | LOGAN TOWNSHIP                     | M-PHYSICIAN FEES           |                   | \$263.68          | 2023-2023        | Loss            |
| 2024318990      | INDEMNITY  | 11/04/2023          | MONROE TOWNSHIP(TRIJIF)            | M-PHYSICIAN FEES           |                   | \$100.94          | 2023-2023        | Loss            |
| 2024320414      | INDEMNITY  | 11/28/2023          | WOODBURY CITY                      | M-PHYSICIAN FEES           |                   | \$100.94          | 2023-2023        | Loss            |
| 2024320516      | INDEMNITY  | 11/20/2023          | WOODBURY CITY                      | M-PHYSICIAN FEES           |                   | \$100.94          | 2023-2023        | Loss            |
|                 |            |                     |                                    |                            | Check Amount:     | \$768.38          |                  |                 |
| Check Numb      | er: 28674  | Check Date: 03/01/2 | 024 Payee Name: ROTHMAN ORTHOPA    | EDICS                      |                   |                   |                  |                 |
| 2023300380      | INDEMNITY  | 03/09/2023          | LOGAN TOWNSHIP                     | M-ORTHO/NEURO FEES         |                   | \$2,290.56        | 2023-2023        | Loss            |
|                 |            |                     |                                    |                            | Check Amount:     | \$2,290.56        |                  |                 |
| Check Numb      | er: 28675  | Check Date: 03/01/2 | 024 Payee Name: AMERICAN WORKCAI   | RE, PC                     |                   |                   |                  |                 |
| 2022264323      | INDEMNITY  | 02/08/2022          | MONROE TOWNSHIP(TRIJIF)            | M-OCCUPATIONAL MEDICINE    |                   | \$293.00          | 2022-2022        | Loss            |
|                 |            |                     |                                    |                            | Check Amount:     | \$293.00          |                  |                 |
| Check Numb      | er: 28676  | Check Date: 03/01/2 | 024 Payee Name: VIRTUA MEDICAL GR  | OUP, PA                    |                   |                   |                  |                 |
| 2024318990      | INDEMNITY  | 11/04/2023          | MONROE TOWNSHIP(TRIJIF)            | M-ORTHO/NEURO FEES         |                   | \$184.48          | 2023-2023        | Loss            |
|                 |            |                     |                                    |                            | Check Amount:     | \$184.48          |                  |                 |
| Check Numb      | er: 28677  | Check Date: 03/01/2 | 024 Payee Name: PREMIER ORTHOPAE   | DIC & SPORTS MEDICINE ASSO | CIATES OF SNJ LLC |                   |                  |                 |
| 2024321185      | MEDICAL ON | LY 12/06/2023       | GLASSBORO BOROUGH                  | M-ORTHO/NEURO FEES         |                   | \$88.09           | 2023-2023        | Loss            |
| 2024321516      | INDEMNITY  | 12/11/2023          | MONROE TOWNSHIP(TRIJIF)            | M-OCCUPATIONAL MEDICINE    |                   | \$930.32          | 2023-2023        | Loss            |
| 2024321814      | INDEMNITY  | 11/30/2023          | MANTUA TOWNSHIP                    | M-OCCUPATIONAL MEDICINE    |                   | \$530.00          | 2023-2023        | Loss            |
| 2024324764      | INDEMNITY  | 01/24/2024          | CLAYTON BOROUGH                    | M-ORTHO/NEURO FEES         |                   | \$132.13          | 2024-2024        | Loss            |
|                 |            |                     |                                    |                            | Check Amount:     | \$1,680.54        |                  |                 |
| Check Numb      | er: 28678  | Check Date: 03/01/2 | 024 Payee Name: INSPIRA HEALTH NET | WORK URGENT CARE PC        |                   |                   |                  |                 |
| 2024324316      | INDEMNITY  | 01/19/2024          | GLASSBORO BOROUGH                  | M-OCCUPATIONAL MEDICINE    |                   | \$258.78          | 2024-2024        | Loss            |
| 2024324927      | INDEMNITY  | 01/24/2024          | DEPTFORD TOWNSHIP                  | M-OCCUPATIONAL MEDICINE    |                   | \$129.39          | 2024-2024        | Loss            |
| 2024326893      | MEDICAL ON | LY 02/13/2024       | CLAYTON BOROUGH                    | M-OCCUPATIONAL MEDICINE    |                   | \$193.88          | 2024-2024        | Loss            |
|                 |            |                     |                                    |                            | Check Amount:     | \$582.05          |                  |                 |
| Check Numb      | er: 28679  | Check Date: 03/01/2 | 024 Payee Name: INSPIRA HEALTH NET | WORK URGENT CARE PC        |                   |                   |                  |                 |
|                 |            | 02/01/2024          | WASHINGTON TOWNSHIP                | M-OCCUPATIONAL MEDICINE    |                   | \$160.38          | 2024-2024        | Loss            |
| 2024325590      | INDEMNITY  | 02/01/2024          |                                    |                            |                   | ψ109.50           | 2024 2024        | 2000            |



| Claim<br>Number | Claimant   | Type DOL             | Insured Name                   | Transaction <sup>•</sup>  | Туре          | Payment<br>Amount | Policy<br>Period | Paymen<br>Type |
|-----------------|------------|----------------------|--------------------------------|---------------------------|---------------|-------------------|------------------|----------------|
| Check Numb      | er: 28680  | Check Date: 03/01/20 | Payee Name: PREMIER ORTHO      | ASSOCSURG                 |               |                   |                  |                |
| 2024321516      | INDEMNITY  | 12/11/2023           | MONROE TOWNSHIP(TRIJIF)        | M-AMBULATORY SURGERY      | CENTER        | \$1,407.50        | 2023-2023        | Loss           |
|                 |            |                      |                                |                           | Check Amount: | \$1,407.50        |                  |                |
| Check Numb      | er: 28681  | Check Date: 03/01/20 | 24 Payee Name: KENNEDY HEALTI  | 4                         |               |                   |                  |                |
| 2024321516      | INDEMNITY  | 12/11/2023           | MONROE TOWNSHIP(TRIJIF)        | M-ACUTE CARE HOSPITAL     |               | \$3,090.96        | 2023-2023        | Loss           |
|                 |            |                      |                                |                           | Check Amount: | \$3,090.96        |                  |                |
| Check Numb      | er: 28682  | Check Date: 03/01/20 | Payee Name: BTD RADIOLOGY      | AT SALEM PA               |               |                   |                  |                |
| 2024324450      | MEDICAL ON | LY 01/20/2024        | PENNSVILLE TOWNSHIP            | M-PHYSICIAN FEES          |               | \$510.00          | 2024-2024        | Loss           |
|                 |            |                      |                                |                           | Check Amount: | \$510.00          |                  |                |
| Check Numb      | er: 28683  | Check Date: 03/01/20 | Payee Name: COMP X MEDICAL     | MANAGEMENT                |               |                   |                  |                |
| 2023281080      | INDEMNITY  | 08/19/2022           | MONROE TOWNSHIP(TRIJIF)        | M-OTHER PROVIDER FEES     |               | \$243.75          | 2022-2022        | Loss           |
|                 |            |                      |                                |                           | Check Amount: | \$243.75          |                  |                |
| Check Numb      | er: 28684  | Check Date: 03/01/20 | 24 Payee Name: myMATRIXX       |                           |               |                   |                  |                |
| 2024321516      | INDEMNITY  | 12/11/2023           | MONROE TOWNSHIP(TRIJIF)        | M-PHARMACY                |               | \$29.12           | 2023-2023        | Loss           |
| 2024322505      | INDEMNITY  | 12/21/2023           | BOROUGH OF NATIONAL PARK       | M-PHARMACY                |               | \$77.47           | 2023-2023        | Loss           |
|                 |            |                      |                                |                           | Check Amount: | \$106.59          |                  |                |
| Check Numb      | er: 28685  | Check Date: 03/01/20 | Payee Name: KIRSHNER SPINE     | INSTITUTE                 |               |                   |                  |                |
| 2023281080      | INDEMNITY  | 08/19/2022           | MONROE TOWNSHIP(TRIJIF)        | M-ORTHO/NEURO FEES        |               | \$149.00          | 2022-2022        | Loss           |
|                 |            |                      |                                |                           | Check Amount: | \$149.00          |                  |                |
| Check Numb      | er: 28686  | Check Date: 03/01/20 | 24 Payee Name: STRIVE PHYSICAL | . THERAPY SPECIALISTS LLC |               |                   |                  |                |
| 2023281080      | INDEMNITY  | 08/19/2022           | MONROE TOWNSHIP(TRIJIF)        | M-PHYSICIAN FEES          |               | \$90.00           | 2022-2022        | Loss           |
| 2024319174      | INDEMNITY  | 11/08/2023           | DEPTFORD TOWNSHIP              | M-PHYSICIAN FEES          |               | \$270.00          | 2023-2023        | Loss           |
| 2024321516      | INDEMNITY  | 12/11/2023           | MONROE TOWNSHIP(TRIJIF)        | M-PHYSICIAN FEES          |               | \$1,080.00        | 2023-2023        | Loss           |
| 2024324316      | INDEMNITY  | 01/19/2024           | GLASSBORO BOROUGH              | M-PHYSICIAN FEES          |               | \$180.00          | 2024-2024        | Loss           |
|                 |            |                      |                                |                           | Check Amount: | \$1,620.00        |                  |                |
| Check Numb      | er: 28687  | Check Date: 03/01/20 | 24 Payee Name: PROFESSIONAL P  | ULMONARY SERVICE          |               |                   |                  |                |
| 2024316210      | INDEMNITY  | 10/04/2023           | GLASSBORO BOROUGH              | M-DME/PROSTHETICS         |               | \$95.00           | 2023-2023        | Loss           |
|                 |            |                      |                                |                           | Check Amount: | \$95.00           |                  |                |
| Check Numb      | er: 28688  | Check Date: 03/01/20 | Payee Name: QUALCARE INC       |                           |               |                   |                  |                |



| Claim<br>Number | Claimant    | Type DOL              | Insured Name                    | Transaction Typ            | e             | Payment<br>Amount        | Policy<br>Period | Paymer<br>Type |
|-----------------|-------------|-----------------------|---------------------------------|----------------------------|---------------|--------------------------|------------------|----------------|
| 2024327473      | MEDICAL ON  | NLY 02/20/2024        | QUINTON TOWNSHIP                | M-MEDICAL REHAB/NON VOCAT  | FIONAL WC     | \$565.00                 | 2024-2024        | Loss           |
|                 |             |                       |                                 |                            | Check Amount: | \$565.00                 |                  |                |
| Check Numb      | er: 28689   | Check Date: 03/08/2   | 024 Payee Name: CAPEHART & So   | CATCHARD PA                |               |                          |                  |                |
| 2020202846      | INDEMNITY   | 04/17/2020            | MONROE TOWNSHIP(TRIJIF)         | L-LEGAL WC                 |               | \$676.00                 | 2020-2020        | Legal          |
| 2021225591      | INDEMNITY   | 01/07/2021            | GLASSBORO BOROUGH               | L-LEGAL WC                 |               | \$274.50                 | 2021-2021        | Legal          |
| 2022270730      | INDEMNITY   | 03/09/2022            | GLASSBORO BOROUGH               | L-LEGAL WC                 |               | \$578.50                 | 2022-2022        | Legal          |
| 2023293877      | INDEMNITY   | 01/16/2023            | WEST DEPTFORD TOWNSHIP          | L-LEGAL WC                 |               | \$946.50                 | 2023-2023        | Legal          |
| 2023296112      | INDEMNITY   | 02/09/2023            | DEPTFORD TOWNSHIP               | L-LEGAL WC                 |               | \$351.50                 | 2023-2023        | Legal          |
|                 |             |                       |                                 |                            | Check Amount: | \$2,827.00               |                  |                |
| Check Numb      | er: 28690   | Check Date: 03/08/2   | 024 Payee Name: MADDEN & MAD    | DEN PA                     |               |                          |                  |                |
| 2024314807      | BODILY INJU | JRY 09/16/2023        | FRANKLIN TOWNSHIP               | L-LEGAL GL                 |               | \$115.50                 | 2023-2023        | Legal          |
|                 |             |                       |                                 |                            | Check Amount: | \$115.50                 |                  | 0              |
| Check Numb      | er: 28691   | Check Date: 03/08/20  | 024 Payee Name: STATE SHORTH    | AND REPORTING SERVICE      |               |                          |                  |                |
| 2022258301      | INDEMNITY   | 12/23/2021            | DEPTFORD TOWNSHIP               | E-MISC LEGAL EXPENSE WC    |               | \$75.00                  | 2021-2021        | Expense        |
|                 |             |                       |                                 |                            | Check Amount: | \$75.00                  |                  |                |
| Check Numb      | er: 28692   | Check Date: 03/08/20  | 024 Payee Name: I C U INVESTIGA | TIONS INC                  |               | · ·                      |                  |                |
| 2024324764      | INDEMNITY   | 01/24/2024            | CLAYTON BOROUGH                 | E-INDEP ADJUSTOR WC        |               | \$475.00                 | 2024-2024        | Expense        |
|                 |             | 0.12.1202.1           |                                 |                            | Check Amount: | \$475.00                 |                  | _,,poiloo      |
| Check Numb      | er: 28693   | Check Date: 03/08/2   | 024 Payee Name: MAMMANO ALO     |                            |               | •                        |                  |                |
| 2022258301      |             |                       | DEPTFORD TOWNSHIP               | I-ASSESSMENT-W.C. IND      |               | \$2,636,00               | 2021-2021        | Loss           |
| 2022230301      |             | 12/20/2021            |                                 | TAGGEGGMENT W.C. IND       | Check Amount: | \$2,636.00               | 20212021         | 2033           |
| Check Numb      | or: 28604   | Check Date: 03/08/2   | 024 Payee Name: MANTUA COLLI    |                            | oneck Amount. | ψ2,030.00                |                  |                |
|                 |             |                       | GREENWICH TOWNSHIP              |                            |               | ¢2 510 62                | 2023-2023        | Loss           |
| 2024313400      | ISTFART     | COLL PD 09/10/2023    | GREENWICH TOWNSHIP              | M-MISC MED(WC) & PD (NON-W | Check Amount: | \$3,519.62<br>\$3,519.62 | 2023-2023        | LUSS           |
| Chaole Neurob   | 20005       | Charle Dates 02/00/20 |                                 |                            | Check Amount. | \$3,519.0Z               |                  |                |
| Check Numb      |             | Check Date: 03/08/2   |                                 |                            |               | <b>*</b> • <b>--</b> ••  |                  |                |
| 2024313460      | 1ST PARTY ( | COLL PD 09/10/2023    | GREENWICH TOWNSHIP              | E-APPRAISERS PR            | <b>.</b>      |                          | 2023-2023        | Expense        |
|                 |             |                       |                                 |                            | Check Amount: | \$35.00                  |                  |                |
|                 | er: 28696   | Check Date: 03/08/2   | D24 Payee Name: THE DEWEESE     | LAW FIRM                   |               |                          |                  |                |
| Check Numb      |             |                       |                                 | L-LEGAL PR                 |               |                          | 2021-2021        |                |



|                 | LINKING YOU IO | GOMENT CEA | am services    |                                    |                            |               |                   |                  |                 |
|-----------------|----------------|------------|----------------|------------------------------------|----------------------------|---------------|-------------------|------------------|-----------------|
| Claim<br>Number | Claimant       | Туре       | DOL            | Insured Name                       | Transaction Typ            | )e            | Payment<br>Amount | Policy<br>Period | Payment<br>Type |
| 2022250746      | MEDICAL ON     | ILY        | 10/04/2021     | WEST DEPTFORD TOWNSHIP             | E-SUBROGATION EXPENSE WO   |               | \$6,000.00        | 2021-2021        | Expense         |
|                 |                |            |                |                                    |                            | Check Amount: | \$6,999.11        |                  |                 |
| Check Numb      | er: 28697      | Check D    | Date: 03/08/20 | 024 Payee Name: AFFANATO MARUT LI  | LC                         |               |                   |                  |                 |
| 2020200690      | INDEMNITY      |            | 03/27/2020     | MONROE TOWNSHIP(TRIJIF)            | L-LEGAL WC                 |               | \$207.50          | 2020-2020        | Legal           |
| 2021227856      | INDEMNITY      |            | 01/24/2021     | WEST DEPTFORD TOWNSHIP             | L-LEGAL WC                 |               | \$756.00          | 2021-2021        | Legal           |
| 2021231461      | INDEMNITY      |            | 05/28/2020     | MONROE TOWNSHIP(TRIJIF)            | L-LEGAL WC                 |               | \$168.00          | 2020-2020        | Legal           |
| 2023281080      | INDEMNITY      |            | 08/19/2022     | MONROE TOWNSHIP(TRIJIF)            | L-LEGAL WC                 |               | \$168.00          | 2022-2022        | Legal           |
| 2023292119      | INDEMNITY      |            | 12/25/2022     | WASHINGTON TOWNSHIP                | L-LEGAL WC                 |               | \$336.00          | 2022-2022        | Legal           |
| 2024320516      | INDEMNITY      |            | 11/20/2023     | WOODBURY CITY                      | L-LEGAL WC                 |               | \$490.00          | 2023-2023        | Legal           |
|                 |                |            |                |                                    |                            | Check Amount: | \$2,125.50        |                  |                 |
| Check Numb      | er: 28698      | Check D    | Date: 03/08/20 | 024 Payee Name: EMERGENCY ACCESS   | SORIES & INSTALLATIONS     |               |                   |                  |                 |
| 2023300075      | 1ST PARTY (    | COLL PD    | 03/15/2023     | WASHINGTON TOWNSHIP                | M-MISC MED(WC) & PD (NON-W | /C) PR COLL   | \$1,646.74        | 2023-2023        | Loss            |
|                 |                |            |                |                                    |                            | Check Amount: | \$1,646.74        |                  |                 |
| Check Numb      | er: 28699      | Check D    | Date: 03/08/20 | 024 Payee Name: DR CAROL SCHOBER   | PSYD                       |               |                   |                  |                 |
| 2022246088      | INDEMNITY      |            | 08/23/2021     | MONROE TOWNSHIP(TRIJIF)            | M-IND MED EXAMS WC         |               | \$2,800.00        | 2021-2021        | Loss            |
|                 |                |            |                |                                    |                            | Check Amount: | \$2,800.00        |                  |                 |
| Check Numb      | er: 28700      | Check D    | Date: 03/08/20 | 024 Payee Name: THE LAW OFFICES OF | F MATARAZZO & LUBCHER PC   |               |                   |                  |                 |
| 2018126963      | INDEMNITY      |            | 02/25/2018     | MONROE TOWNSHIP(TRIJIF)            | I-CLAIMANT LEGAL EXP IND   |               | \$450.00          | 2018-2018        | Loss            |
|                 |                |            |                |                                    |                            | Check Amount: | \$450.00          |                  |                 |
| Check Numb      | er: 28701      | Check D    | Date: 03/08/20 | 024 Payee Name: ExamWorks LLC      |                            |               |                   |                  |                 |
| 2022258700      | INDEMNITY      |            | 12/27/2021     | DEPTFORD TOWNSHIP                  | E-ALLOCATED MED EXAM WC    |               | \$650.00          | 2021-2021        | Expense         |
|                 |                |            |                |                                    |                            | Check Amount: | \$650.00          |                  |                 |
| Check Numb      | er: 28702      | Check D    | Date: 03/08/20 | 024 Payee Name: RA COLLISION       |                            |               |                   |                  |                 |
| 2024324489      | COMPREHE       | NSIVE      | 01/18/2024     | GLASSBORO BOROUGH                  | E-APPRAISERS PR            |               | \$3,704.16        | 2024-2024        | Expense         |
|                 |                |            |                |                                    |                            | Check Amount: | \$3,704.16        |                  |                 |
| Check Numb      | er: 28703      | Check D    | Date: 03/08/20 | 024 Payee Name: COCKERILL CRAIG &  | MOORE LLC                  |               |                   |                  |                 |
| 2022255534      | PERSONAL I     | NJURY      | 09/23/2021     | HARRISON TOWNSHIP                  | L-LEGAL GL                 |               | \$178.50          | 2021-2021        | Legal           |
|                 |                |            |                |                                    |                            | Check Amount: | \$178.50          |                  |                 |
|                 |                |            |                |                                    |                            |               |                   |                  |                 |



| Claim<br>Number | Claimant  | Type DOL             | Insured Name                    | Transaction Typ             | e             | Payment<br>Amount | Policy<br>Period | Payme<br>Type |
|-----------------|-----------|----------------------|---------------------------------|-----------------------------|---------------|-------------------|------------------|---------------|
| 2022246088      | INDEMNITY | 08/23/2021           | MONROE TOWNSHIP(TRIJIF)         | M-BEHAVIORAL HEALTH         |               | \$165.00          | 2021-2021        | Loss          |
|                 |           |                      |                                 |                             | Check Amount: | \$165.00          |                  |               |
| Check Numb      | er: 28705 | Check Date: 03/08/20 | 24 Payee Name: PIETRAS SARACINC | SMITH & MEEK LLP            |               |                   |                  |               |
| 2021216126      | INDEMNITY | 07/01/2020           | WEST DEPTFORD TOWNSHIP          | L-LEGAL WC                  |               | \$469.00          | 2020-2020        | Legal         |
| 2021226295      | INDEMNITY | 01/14/2021           | DEPTFORD TOWNSHIP               | L-LEGAL WC                  |               | \$1,989.00        | 2021-2021        | Legal         |
| 2021238262      | INDEMNITY | 05/19/2021           | MONROE TOWNSHIP(TRIJIF)         | L-LEGAL WC                  |               | \$500.50          | 2021-2021        | Legal         |
| 2021240594      | INDEMNITY | 06/11/2021           | MONROE TOWNSHIP(TRIJIF)         | L-LEGAL WC                  |               | \$430.50          | 2021-2021        | Legal         |
| 2022246520      | INDEMNITY | 08/24/2021           | DEPTFORD TOWNSHIP               | L-LEGAL WC                  |               | \$581.00          | 2021-2021        | Legal         |
| 2022267509      | INDEMNITY | 03/12/2022           | DEPTFORD TOWNSHIP               | L-LEGAL WC                  |               | \$666.00          | 2022-2022        | Legal         |
| 2022269384      | INDEMNITY | 03/29/2022           | DEPTFORD TOWNSHIP               | L-LEGAL WC                  |               | \$666.00          | 2022-2022        | Legal         |
| 2023294529      | INDEMNITY | 01/25/2023           | LOGAN TOWNSHIP                  | L-LEGAL WC                  |               | \$606.00          | 2023-2023        | Legal         |
| 2023297412      | INDEMNITY | 05/15/2020           | WEST DEPTFORD TOWNSHIP          | L-LEGAL WC                  |               | \$388.50          | 2020-2020        | Legal         |
|                 |           |                      |                                 |                             | Check Amount: | \$6,296.50        |                  |               |
| Check Numb      | er: 28706 | Check Date: 03/08/20 | Payee Name: GLASSBORO BORO      | UGH                         |               |                   |                  |               |
| 2024324316      | INDEMNITY | 01/19/2024           | GLASSBORO BOROUGH               | I-TEMPORARY TOTAL DISABILIT | ٦Y            | \$1,667.00        | 2024-2024        | Loss          |
|                 |           |                      |                                 |                             | Check Amount: | \$1,667.00        |                  |               |
| Check Numb      | er: 28707 | Check Date: 03/08/20 | Payee Name: GLASSBORO BORO      | UGH                         |               |                   |                  |               |
| 2024324316      | INDEMNITY | 01/19/2024           | GLASSBORO BOROUGH               | I-TEMPORARY TOTAL DISABILIT | ۲             | \$1,667.00        | 2024-2024        | Loss          |
|                 |           |                      |                                 |                             | Check Amount: | \$1,667.00        |                  |               |
| Check Numb      | er: 28708 | Check Date: 03/08/20 | Payee Name: GLASSBORO BORO      | UGH                         |               |                   |                  |               |
| 2024324316      | INDEMNITY | 01/19/2024           | GLASSBORO BOROUGH               | I-TEMPORARY TOTAL DISABILIT | ۲             | \$1,667.00        | 2024-2024        | Loss          |
|                 |           |                      |                                 |                             | Check Amount: | \$1,667.00        |                  |               |
| Check Numb      | er: 28709 | Check Date: 03/08/20 | Payee Name: WOODBURY CITY       |                             |               |                   |                  |               |
| 2023295148      | INDEMNITY | 01/27/2023           | WOODBURY CITY                   | I-TEMPORARY TOTAL DISABILIT | Υ             | \$2,198.00        | 2023-2023        | Loss          |
|                 |           |                      |                                 |                             | Check Amount: | \$2,198.00        |                  |               |
| Check Numb      | er: 28710 | Check Date: 03/08/20 | 24 Payee Name: WOODBURY CITY    |                             |               |                   |                  |               |
| 2024327389      | INDEMNITY | 02/20/2024           | WOODBURY CITY                   | I-TEMPORARY TOTAL DISABILIT | Y             | \$884.40          | 2024-2024        | Loss          |
|                 |           |                      |                                 |                             | Check Amount: | \$884.40          |                  |               |
|                 | er: 28711 | Check Date: 03/08/20 | 24 Payee Name: MASTROIANNI & FO |                             |               |                   |                  |               |



| Claim<br>Number | Claimant    | Туре    | DOL           | Insured Name                    | Transaction Typ             | e             | Payment<br>Amount | Policy<br>Period | Paymen<br>Type |
|-----------------|-------------|---------|---------------|---------------------------------|-----------------------------|---------------|-------------------|------------------|----------------|
| 2022254973      | BODILY INJU | IRY     | 10/29/2021    | PENNSVILLE TOWNSHIP             | E-MISC ALL OTHER GL         |               | \$895.05          | 2021-2021        | Expense        |
|                 |             |         |               |                                 |                             | Check Amount: | \$895.05          |                  |                |
| Check Numb      | er: 28712   | Check D | ate: 03/08/20 | 24 Payee Name: MAMMANO & MULVI  | HILL PC                     |               |                   |                  |                |
| 2021209621      | BODILY INJU | IRY     | 06/30/2020    | WASHINGTON TOWNSHIP             | I-LUMP SUM SETTLEMENT AL B  | I             | \$7,500.00        | 2020-2020        | Loss           |
|                 |             |         |               |                                 |                             | Check Amount: | \$7,500.00        |                  |                |
| Check Numb      | er: 28713   | Check D | ate: 03/08/20 | 24 Payee Name: GLASSBORO BOROL  | JGH                         |               |                   |                  |                |
| 2024315983      | INDEMNITY   |         | 10/04/2023    | GLASSBORO BOROUGH               | I-TEMPORARY TOTAL DISABILIT | Ϋ́            | \$1,648.76        | 2023-2023        | Loss           |
|                 |             |         |               |                                 |                             | Check Amount: | \$1,648.76        |                  |                |
| Check Numb      | er: 28714   | Check D | ate: 03/08/20 | 24 Payee Name: GREENWICH TOWNS  | HIP                         |               |                   |                  |                |
| 2024320615      | INDEMNITY   |         | 11/28/2023    | GREENWICH TOWNSHIP              | I-TEMPORARY TOTAL DISABILIT | Y             | \$586.00          | 2023-2023        | Loss           |
|                 |             |         |               |                                 |                             | Check Amount: | \$586.00          |                  |                |
| Check Numb      | er: 28715   | Check D | ate: 03/08/20 | 024 Payee Name: MONROE TOWNSHIP | (TRIJIF)                    |               |                   |                  |                |
| 2022264323      | INDEMNITY   |         | 02/08/2022    | MONROE TOWNSHIP(TRIJIF)         | I-TEMPORARY TOTAL DISABILIT | Y             | \$2,130.00        | 2022-2022        | Loss           |
|                 |             |         |               |                                 |                             | Check Amount: | \$2,130.00        |                  |                |
| Check Numb      | er: 28716   | Check D | ate: 03/08/20 | 024 Payee Name: MONROE TOWNSHIP | (TRIJIF)                    |               |                   |                  |                |
| 2022264323      | INDEMNITY   |         | 02/08/2022    | MONROE TOWNSHIP(TRIJIF)         | I-TEMPORARY TOTAL DISABILIT | Y             | \$608.57          | 2022-2022        | Loss           |
|                 |             |         |               |                                 |                             | Check Amount: | \$608.57          |                  |                |
| Check Numb      | er: 28717   | Check D | ate: 03/08/20 | D24 Payee Name: BOUDWIN ROSS RO | LEODORI PC                  |               |                   |                  |                |
| 2022255534      | PERSONAL I  | NJURY   | 09/23/2021    | HARRISON TOWNSHIP               | I-LUMP SUM SETTLEMENT PI    |               | \$62,500.00       | 2021-2021        | Loss           |
|                 |             |         |               |                                 |                             | Check Amount: | \$62,500.00       |                  |                |
| Check Numb      | er: 28718   | Check D | ate: 03/08/20 | Payee Name: JOSEPH GIANNONE     |                             |               |                   |                  |                |
| 2022258301      | INDEMNITY   |         | 12/23/2021    | DEPTFORD TOWNSHIP               | I-PERMANENT PARTIAL DISABIL | .ITY          | \$9,044.75        | 2021-2021        | Loss           |
|                 |             |         |               |                                 |                             | Check Amount: | \$9,044.75        |                  |                |
| Check Numb      | er: 28719   | Check D | ate: 03/08/20 | 224 Payee Name: Jessie Osuna    |                             |               |                   |                  |                |
| 2021220915      | INDEMNITY   |         | 11/18/2020    | DEPTFORD TOWNSHIP               | I-PERMANENT PARTIAL DISABIL | .ITY          | \$1,224.36        | 2020-2020        | Loss           |
|                 |             |         |               |                                 |                             | Check Amount: | \$1,224.36        |                  |                |
| Check Numb      | er: 28720   | Check D | ate: 03/08/20 | 224 Payee Name: Thomas Rementer |                             |               |                   |                  |                |
| 2022261747      | INDEMNITY   |         | 01/21/2022    | GLASSBORO BOROUGH               | I-PERMANENT PARTIAL DISABIL | JTY           | \$1,198.40        | 2022-2022        | Loss           |
|                 |             |         |               |                                 |                             | Check Amount: | \$1,198.40        |                  |                |



| Claim      | Claimant    | Туре    | DOL           | Insured Name                      | Transaction Type                  | Payment            | Policy    | Paymen |
|------------|-------------|---------|---------------|-----------------------------------|-----------------------------------|--------------------|-----------|--------|
| Number     |             |         |               |                                   |                                   | Amount             | Period    | Туре   |
| Check Numb | er: 28721   | Check D | ate: 03/08/20 | 224 Payee Name: Edward McGuire    |                                   |                    |           |        |
| 2022262384 | INDEMNITY   |         | 01/26/2022    | WASHINGTON TOWNSHIP               | I-PERMANENT PARTIAL DISABILITY    | \$1,337.12         | 2022-2022 | Loss   |
|            |             |         |               |                                   | Check                             | Amount: \$1,337.12 |           |        |
| Check Numb | er: 28722   | Check D | ate: 03/08/20 | 24 Payee Name: Michael Beecher    |                                   |                    |           |        |
| 2024319174 | INDEMNITY   |         | 11/08/2023    | DEPTFORD TOWNSHIP                 | I-TEMPORARY TOTAL DISABILITY      | \$1,495.04         | 2023-2023 | Loss   |
|            |             |         |               |                                   | Check                             | Amount: \$1,495.04 |           |        |
| Check Numb | er: 28723   | Check D | ate: 03/08/20 | 24 Payee Name: Aaron Glenn        |                                   |                    |           |        |
| 2024318990 | INDEMNITY   |         | 11/04/2023    | MONROE TOWNSHIP(TRIJIF)           | I-TEMPORARY TOTAL DISABILITY      | \$2,198.00         | 2023-2023 | Loss   |
|            |             |         |               |                                   | Check                             | Amount: \$2,198.00 |           |        |
| Check Numb | er: 28724   | Check D | ate: 03/08/20 | 924 Payee Name: Salvatore Oldrati |                                   |                    |           |        |
| 2022247967 | INDEMNITY   |         | 09/14/2021    | MANTUA TOWNSHIP                   | I-TEMPORARY TOTAL DISABILITY      | \$1,938.00         | 2021-2021 | Loss   |
|            |             |         |               |                                   | Check                             | Amount: \$1,938.00 |           |        |
| Check Numb | er: 28725   | Check D | ate: 03/08/20 | 024 Payee Name: GLASSBORO BOROU   | GH                                |                    |           |        |
| 2023302039 | INLAND MAR  | INE     | 04/01/2023    | GLASSBORO BOROUGH                 | M-MISC MED(WC) & PD (NON-WC) OTR  | LOSS PR \$1,000.00 | 2023-2023 | Loss   |
|            |             |         |               |                                   | Check                             | Amount: \$1,000.00 |           |        |
| Check Numb | er: 28726   | Check D | ate: 03/08/20 | 224 Payee Name: MONROE TOWNSHIP(  | (RIJIF)                           |                    |           |        |
| 2021228469 | 1ST PARTY O | OLL PD  | 02/01/2021    | MONROE TOWNSHIP(TRIJIF)           | M-MISC MED(WC) & PD (NON-WC) PR   | COLL \$1,000.00    | 2021-2021 | Loss   |
|            |             |         |               |                                   | Check                             | Amount: \$1,000.00 |           |        |
| Check Numb | er: 28727   | Check D | ate: 03/08/20 | 024 Payee Name: HARRISON TOWNSHIP | 2                                 |                    |           |        |
| 2024324852 | 1ST PARTY O | OLL PD  | 01/15/2024    | HARRISON TOWNSHIP                 | M-MISC MED(WC) & PD (NON-WC) PR ( | COLL \$1,000.00    | 2024-2024 | Loss   |
|            |             |         |               |                                   | Check                             | Amount: \$1,000.00 |           |        |
| Check Numb | er: 28728   | Check D | ate: 03/08/20 | 024 Payee Name: IVYREHAB NETWORK  | INC                               |                    |           |        |
| 2023293464 | INDEMNITY   |         | 01/11/2023    | MANTUA TOWNSHIP                   | M-PHYSICIAN FEES                  | \$170.00           | 2023-2023 | Loss   |
| 2024320615 | INDEMNITY   |         | 11/28/2023    | GREENWICH TOWNSHIP                | M-PHYSICIAN FEES                  | \$170.00           | 2023-2023 | Loss   |
|            |             |         |               |                                   | Check                             | Amount: \$340.00   |           |        |
| Check Numb | er: 28729   | Check D | ate: 03/08/20 | 024 Payee Name: EMERGENCY CARE S  | ERVICES OF NJ                     |                    |           |        |
| 2024317060 | MEDICAL ON  | LY      | 10/15/2023    | WOODBURY CITY                     | M-PHYSICIAN FEES                  | \$1,105.00         | 2023-2023 | Loss   |
| 2024324316 | INDEMNITY   |         | 01/19/2024    | GLASSBORO BOROUGH                 | M-PHYSICIAN FEES                  | \$1,105.00         | 2024-2024 | Loss   |
|            |             |         |               |                                   |                                   |                    |           |        |



| Claim<br>Number | Claimant   | Type DOL             | Insured Name                           | Transaction Typ             | De                | Payment<br>Amount           | Policy<br>Period | Paymen<br>Type |
|-----------------|------------|----------------------|----------------------------------------|-----------------------------|-------------------|-----------------------------|------------------|----------------|
| Check Numb      | er: 28730  | Check Date: 03/08/20 | 024 Payee Name: PRINCETON BRAIN AN     | D SPINE CARE, LLC           |                   |                             |                  | -              |
| 2021225591      | INDEMNITY  | 01/07/2021           | GLASSBORO BOROUGH                      | M-ORTHO/NEURO FEES          | Check Amount:     | \$105.24<br><b>\$105.24</b> | 2021-2021        | Loss           |
| Check Numb      | er: 28731  | Check Date: 03/08/20 | 024 Payee Name: TWIN BORO PHYSICAL     | THERAPY ASSOCIATES PA       |                   |                             |                  |                |
| 2024315983      | INDEMNITY  | 10/04/2023           | GLASSBORO BOROUGH                      | M-PHYSICIAN FEES            |                   | \$80.00                     | 2023-2023        | Loss           |
|                 |            |                      |                                        |                             | Check Amount:     | \$80.00                     |                  |                |
| Check Numb      | er: 28732  | Check Date: 03/08/20 | 024 Payee Name: ONE CALL CARE DIAG     | NOSTICS                     |                   |                             |                  |                |
| 2024325590      | INDEMNITY  | 02/01/2024           | WASHINGTON TOWNSHIP                    | M-MRI                       |                   | \$485.00                    | 2024-2024        | Loss           |
|                 |            |                      |                                        |                             | Check Amount:     | \$485.00                    |                  |                |
| Check Numb      | er: 28733  | Check Date: 03/08/20 | 024 Payee Name: EMERGENCY PHYSICI      | AN ASSOCIATES OF SOUTH JER  | SEY, PC           |                             |                  |                |
| 2024324092      | MEDICAL ON | ILY 01/12/2024       | GLASSBORO BOROUGH                      | M-PHYSICIAN FEES            |                   | \$611.00                    | 2024-2024        | Loss           |
|                 |            |                      |                                        |                             | Check Amount:     | \$611.00                    |                  |                |
| Check Numb      | er: 28734  | Check Date: 03/08/20 | 024 Payee Name: NovaCare Rehabilitatio | n                           |                   |                             |                  |                |
| 2024320516      | INDEMNITY  | 11/20/2023           | WOODBURY CITY                          | M-PHYSICIAN FEES            |                   | \$201.88                    | 2023-2023        | Loss           |
|                 |            |                      |                                        |                             | Check Amount:     | \$201.88                    |                  |                |
| Check Numb      | er: 28735  | Check Date: 03/08/20 | 224 Payee Name: THOMAS JEFFERSON       | UNIV HOSPITAL               |                   |                             |                  |                |
| 2024326893      | MEDICAL ON | ILY 02/13/2024       | CLAYTON BOROUGH                        | M-ACUTE CARE HOSPITAL       |                   | \$437.00                    | 2024-2024        | Loss           |
|                 |            |                      |                                        |                             | Check Amount:     | \$437.00                    |                  |                |
| Check Numb      | er: 28736  | Check Date: 03/08/20 | D24 Payee Name: VIRTUA MEDICAL GRC     | OUP, PA                     |                   |                             |                  |                |
| 2024318990      | INDEMNITY  | 11/04/2023           | MONROE TOWNSHIP(TRIJIF)                | M-ORTHO/NEURO FEES          |                   | \$259.76                    | 2023-2023        | Loss           |
|                 |            |                      |                                        |                             | Check Amount:     | \$259.76                    |                  |                |
| Check Numb      | er: 28737  | Check Date: 03/08/20 | 024 Payee Name: PREMIER ORTHOPAEL      | DIC & SPORTS MEDICINE ASSOC | CIATES OF SNJ LLC |                             |                  |                |
| 2024319174      | INDEMNITY  | 11/08/2023           | DEPTFORD TOWNSHIP                      | M-ORTHO/NEURO FEES          |                   | \$61.66                     | 2023-2023        | Loss           |
| 2024320615      | INDEMNITY  | 11/28/2023           | GREENWICH TOWNSHIP                     | M-ORTHO/NEURO FEES          |                   | \$61.66                     | 2023-2023        | Loss           |
| 2024321516      | INDEMNITY  | 12/11/2023           | MONROE TOWNSHIP(TRIJIF)                | M-ORTHO/NEURO FEES          |                   | \$176.18                    | 2023-2023        | Loss           |
|                 |            |                      |                                        |                             | Check Amount:     | \$299.50                    |                  |                |
| Check Numb      | er: 28738  | Check Date: 03/08/20 | 024 Payee Name: INSPIRA HEALTH NET     | WORK URGENT CARE PC         |                   |                             |                  |                |
| 2024315983      | INDEMNITY  | 10/04/2023           | GLASSBORO BOROUGH                      | M-OCCUPATIONAL MEDICINE     |                   | \$262.71                    | 2023-2023        | Loss           |
| 2024324927      | INDEMNITY  | 01/24/2024           | DEPTFORD TOWNSHIP                      | M-OCCUPATIONAL MEDICINE     |                   | \$193.88                    | 2024-2024        | Loss           |



| Claim<br>Number | Claimant   | Type DOL          | Insured Name                   | Transaction T                         | уре           | Payment<br>Amount | Policy<br>Period | Paymen<br>Type |
|-----------------|------------|-------------------|--------------------------------|---------------------------------------|---------------|-------------------|------------------|----------------|
|                 |            |                   |                                | · · · · · · · · · · · · · · · · · · · | Check Amount: | \$456.59          |                  |                |
| Check Numb      | er: 28739  | Check Date: 03/08 | 2024 Payee Name: INSPIRA HEALT | H NETWORK URGENT CARE PC              |               |                   |                  |                |
| 2024327389      | INDEMNITY  | 02/20/202         | 4 WOODBURY CITY                | M-URGENT CARE CENTER                  |               | \$136.37          | 2024-2024        | Loss           |
|                 |            |                   |                                |                                       | Check Amount: | \$136.37          |                  |                |
| Check Numb      | er: 28740  | Check Date: 03/08 | 2024 Payee Name: PRINCETON BR  | AIN AND SPINE CARE LLC                |               |                   |                  |                |
| 2024322505      | INDEMNITY  | 12/21/202         | 3 BOROUGH OF NATIONAL PARK     | M-ORTHO/NEURO FEES                    |               | \$105.24          | 2023-2023        | Loss           |
|                 |            |                   |                                |                                       | Check Amount: | \$105.24          |                  |                |
| Check Numb      | er: 28741  | Check Date: 03/08 | 2024 Payee Name: KENNEDY HEAI  | тн                                    |               |                   |                  |                |
| 2023305479      | MEDICAL ON | ILY 05/27/202     | 3 WASHINGTON TOWNSHIP          | M-ACUTE CARE HOSPITAL                 |               | \$279.84          | 2023-2023        | Loss           |
| 2024325883      | MEDICAL ON | ILY 02/03/202     | 4 MONROE TOWNSHIP(TRIJIF)      | M-ACUTE CARE HOSPITAL                 |               | \$2,209.04        | 2024-2024        | Loss           |
| 2024326754      | MEDICAL ON | ILY 02/13/202     | 4 DEPTFORD TOWNSHIP            | M-ACUTE CARE HOSPITAL                 |               | \$2,352.67        | 2024-2024        | Loss           |
|                 |            |                   |                                |                                       | Check Amount: | \$4,841.55        |                  |                |
| Check Numb      | er: 28742  | Check Date: 03/08 | 2024 Payee Name: RIDDLE SURGIO | CAL CENTER, LLC                       |               |                   |                  |                |
| 2023300380      | INDEMNITY  | 03/09/202         | 3 LOGAN TOWNSHIP               | M-PHYSICIAN FEES                      |               | \$8,987.00        | 2023-2023        | Loss           |
|                 |            |                   |                                |                                       | Check Amount: | \$8,987.00        |                  |                |
| Check Numb      | er: 28743  | Check Date: 03/08 | 2024 Payee Name: myMATRIXX     |                                       |               |                   |                  |                |
| 2023281080      | INDEMNITY  | 08/19/202         | 2 MONROE TOWNSHIP(TRIJIF)      | M-PHARMACY                            |               | \$494.16          | 2022-2022        | Loss           |
| 2023300380      | INDEMNITY  | 03/09/202         | 3 LOGAN TOWNSHIP               | M-PHARMACY                            |               | \$32.62           | 2023-2023        | Loss           |
|                 |            |                   |                                |                                       | Check Amount: | \$526.78          |                  |                |
| Check Numb      | er: 28744  | Check Date: 03/08 | 2024 Payee Name: INSPIRA MEDIC | AL CENTER MULLICA HILL                |               |                   |                  |                |
| 2024324316      | INDEMNITY  | 01/19/202         | 4 GLASSBORO BOROUGH            | M-ACUTE CARE HOSPITAL                 |               | \$1,935.17        | 2024-2024        | Loss           |
| 2024324907      | MEDICAL ON | ILY 01/25/202     | 4 HARRISON TOWNSHIP            | M-ACUTE CARE HOSPITAL                 |               | \$1,245.96        | 2024-2024        | Loss           |
|                 |            |                   |                                |                                       | Check Amount: | \$3,181.13        |                  |                |
| Check Numb      | er: 28745  | Check Date: 03/08 | 2024 Payee Name: DR CAROL SCH  | IOBER PSYD                            |               |                   |                  |                |
| 2023295148      | INDEMNITY  | 01/27/202         | 3 WOODBURY CITY                | M-BEHAVIORAL HEALTH                   |               | \$145.00          | 2023-2023        | Loss           |
|                 |            |                   |                                |                                       | Check Amount: | \$145.00          |                  |                |
| Check Numb      | er: 28746  | Check Date: 03/08 | 2024 Payee Name: STRIVE PHYSIC | AL THERAPY SPECIALISTS LLC            |               |                   |                  |                |
| 2023281080      | INDEMNITY  | 08/19/202         | 2 MONROE TOWNSHIP(TRIJIF)      | M-PHYSICIAN FEES                      |               | \$270.00          | 2022-2022        | Loss           |
| 2024319174      | INDEMNITY  | 11/08/202         | 3 DEPTFORD TOWNSHIP            | M-PHYSICIAN FEES                      |               | \$270.00          | 2023-2023        | Loss           |



| Claim<br>Number | Claimant   | Туре      | DOL          | Insured Name                     | Transaction Typ            | e             | Payment<br>Amount | Policy<br>Period | Payme<br>Type |
|-----------------|------------|-----------|--------------|----------------------------------|----------------------------|---------------|-------------------|------------------|---------------|
| 2024321516      | INDEMNITY  | 1         | 2/11/2023    | MONROE TOWNSHIP(TRIJIF)          | M-PHYSICIAN FEES           |               | \$360.00          | 2023-2023        | Loss          |
| 2024322505      | INDEMNITY  | 1         | 2/21/2023    | BOROUGH OF NATIONAL PARK         | M-PHYSICIAN FEES           |               | \$720.00          | 2023-2023        | Loss          |
| 2024324316      | INDEMNITY  | C         | 01/19/2024   | GLASSBORO BOROUGH                | M-PHYSICIAN FEES           |               | \$270.00          | 2024-2024        | Loss          |
|                 |            |           |              |                                  |                            | Check Amount: | \$1,890.00        |                  |               |
| Check Numb      | er: 28747  | Check Dat | te: 03/08/20 | 24 Payee Name: SOUTH JERSEY      | REHAB & SPINE INC          |               |                   |                  |               |
| 2021225591      | INDEMNITY  | C         | )1/07/2021   | GLASSBORO BOROUGH                | M-PHYSICIAN FEES           |               | \$144.35          | 2021-2021        | Loss          |
|                 |            |           |              |                                  |                            | Check Amount: | \$144.35          |                  |               |
| Check Numb      | er: 28748  | Check Dat | te: 03/08/20 | 24 Payee Name: VIRTUA RECONS     | TRUCTIVE ORTHOPEDICS       |               |                   |                  |               |
| 2021223164      | INDEMNITY  | 1         | 2/10/2020    | DEPTFORD TOWNSHIP                | M-ORTHO/NEURO FEES         |               | \$184.48          | 2020-2020        | Loss          |
|                 |            |           |              |                                  |                            | Check Amount: | \$184.48          |                  |               |
| Check Numb      | er: 28749  | Check Dat | te: 03/08/20 | 24 Payee Name: QUALCARE INC      |                            |               |                   |                  |               |
| 2024328254      | MEDICAL ON | NLY C     | 2/29/2024    | DEPTFORD TOWNSHIP                | M-MEDICAL REHAB/NON VOCA   | TIONAL WC     | \$565.00          | 2024-2024        | Loss          |
|                 |            |           |              |                                  |                            | Check Amount: | \$565.00          |                  |               |
| Check Numb      | er: 28750  | Check Dat | te: 03/15/20 | 24 Payee Name: CAPEHART & SC     | ATCHARD PA                 |               |                   |                  |               |
| 2023304027      | PERSONAL I | INJURY 1  | 2/14/2021    | ELK TOWNSHIP                     | L-LEGAL GL                 |               | \$500.00          | 2021-2021        | Legal         |
|                 |            |           |              |                                  |                            | Check Amount: | \$500.00          |                  |               |
| Check Numb      | er: 28751  | Check Dat | te: 03/15/20 | 24 Payee Name: SOUTH JERSEY      | PHYSICIAN ASSOCS           |               |                   |                  |               |
| 2022271117      | INDEMNITY  | C         | 04/16/2022   | PENNSVILLE TOWNSHIP              | E-ALLOCATED MED EXAM WC    |               | \$1,000.00        | 2022-2022        | Expense       |
|                 |            |           |              |                                  |                            | Check Amount: | \$1,000.00        |                  |               |
| Check Numb      | er: 28752  | Check Dat | te: 03/15/20 | 24 Payee Name: FRAN CONVERY      | & SON AUTO BODY            |               |                   |                  |               |
| 2024328054      | COMPREHE   | NSIVE C   | )2/24/2024   | PAULSBORO BOROUGH                | M-MISC MED(WC) & PD (NON-W | C) PR COLL    | \$3,139.91        | 2024-2024        | Loss          |
|                 |            |           |              |                                  |                            | Check Amount: | \$3,139.91        |                  |               |
| Check Numb      | er: 28753  | Check Dat | te: 03/15/20 | 24 Payee Name: I C U INVESTIGA   | TIONS INC                  |               |                   |                  |               |
| 2023281080      | INDEMNITY  | C         | 8/19/2022    | MONROE TOWNSHIP(TRIJIF)          | E-MISC ALL OTHER WC        |               | \$2,575.00        | 2022-2022        | Expense       |
|                 |            |           |              |                                  |                            | Check Amount: | \$2,575.00        |                  |               |
| Check Numb      | er: 28754  | Check Dat | te: 03/15/20 | 24 Payee Name: ATLANTIC SECU     | RITY INT'L                 |               |                   |                  |               |
| 2024327389      | INDEMNITY  | C         | 2/20/2024    | WOODBURY CITY                    | E-MISC ALL OTHER WC        |               | \$375.00          | 2024-2024        | Expense       |
|                 |            |           |              |                                  |                            | Check Amount: | \$375.00          |                  |               |
|                 | er: 28755  |           | te: 03/15/20 | 24 Payee Name: Veritext Corporat | - Comisso Inc              |               |                   |                  |               |



|                 | LINKING 100 10 | GOMENT GEA | WM SERVICES    |                     |                              |                         |               |                   |                  |                |
|-----------------|----------------|------------|----------------|---------------------|------------------------------|-------------------------|---------------|-------------------|------------------|----------------|
| Claim<br>Number | Claimant       | Туре       | DOL            |                     | Insured Name                 | Transaction Ty          | pe            | Payment<br>Amount | Policy<br>Period | Paymen<br>Type |
| 2022251866      | PERSONAL       | NJURY      | 03/31/2021     | MANNING             | TON TOWNSHIP                 | L-LEGAL GL              |               | \$1,478.58        | 2021-2021        | Legal          |
|                 |                |            |                |                     |                              |                         | Check Amount: | \$1,478.58        |                  |                |
| Check Numb      | oer: 28756     | Check D    | Date: 03/15/20 | 024 Pa              | ayee Name: LEO S PETETTI LLC |                         |               |                   |                  |                |
| 2024328054      | COMPREHE       | NSIVE      | 02/24/2024     | PAULSBO             | RO BOROUGH                   | E-APPRAISERS PR         |               | \$156.70          | 2024-2024        | Expense        |
|                 |                |            |                |                     |                              |                         | Check Amount: | \$156.70          |                  |                |
| Check Numb      | oer: 28757     | Check D    | Date: 03/15/20 | 024 Pa              | yee Name: DAVID S DEWEESE    |                         |               |                   |                  |                |
| 2024313960      | PUB OFF PI     |            | 10/11/2022     | DEPTFOR             | D TOWNSHIP                   | L-LEGAL GL              |               | \$750.00          | 2022-2022        | Legal          |
| 2024325492      | EPL PI         |            | 07/01/2023     | MONROE              | TOWNSHIP(TRIJIF)             | L-LEGAL GL              |               | \$750.00          | 2023-2023        | Legal          |
| 2024327524      | PUB OFF PI     |            | 08/21/2022     | WOOLWIC             | CH TOWNSHIP                  | L-LEGAL GL              |               | \$750.00          | 2022-2022        | Legal          |
|                 |                |            |                |                     |                              |                         | Check Amount: | \$2,250.00        |                  |                |
| Check Numb      | oer: 28758     | Check D    | Date: 03/15/20 | 024 Pa              | yee Name: CLIFF GRAY APPRA   | ISAL SERVICE            |               |                   |                  |                |
| 2024325080      | 3RD PARTY      | PD         | 01/18/2024     | WEST DE             | PTFORD TOWNSHIP              | E-APPRAISERS AL         |               | \$115.00          | 2024-2024        | Expense        |
|                 |                |            |                |                     |                              |                         | Check Amount: | \$115.00          |                  |                |
| Check Numb      | oer: 28759     | Check D    | Date: 03/15/20 | 024 Pa              | yee Name: THE DEWEESE LAW    | / FIRM                  |               |                   |                  |                |
| 2020197911      | INLAND MAR     | RINE       | 02/20/2020     | FAIRFIELD           | TOWNSHIP                     | L-LEGAL PR              |               | \$232.00          | 2020-2020        | Legal          |
| 2022261747      | INDEMNITY      |            | 01/21/2022     | GLASSBO             | RO BOROUGH                   | E-SUBROGATION EXPENSE W | 'C            | \$318.53          | 2022-2022        | Expense        |
| 2022265587      | INDEMNITY      |            | 02/18/2022     | MONROE              | TOWNSHIP(TRIJIF)             | E-SUBROGATION EXPENSE W | ۲C            | \$350.00          | 2022-2022        | Expense        |
| 2022271264      | MEDICAL OF     | NLY        | 04/24/2022     | DEPTFOR             | D TOWNSHIP                   | E-SUBROGATION EXPENSE W | 'C            | \$150.00          | 2022-2022        | Expense        |
| 2022273404      | INLAND MAR     | RINE       | 11/07/2021     | GLASSBO             | RO BOROUGH                   | L-LEGAL PR              |               | \$138.09          | 2021-2021        | Legal          |
| 2023283220      | MEDICAL O      | NLY        | 09/08/2022     | GLASSBO             | RO BOROUGH                   | E-SUBROGATION EXPENSE W | 'C            | \$150.00          | 2022-2022        | Expense        |
| 2023298233      | 1ST PARTY      | COLL PD    | 03/06/2023     | MONROE              | TOWNSHIP(TRIJIF)             | L-LEGAL PR              |               | \$167.22          | 2023-2023        | Legal          |
| 2024321516      | INDEMNITY      |            | 12/11/2023     | MONROE              | TOWNSHIP(TRIJIF)             | E-SUBROGATION EXPENSE W | /C            | \$984.03          | 2023-2023        | Expense        |
|                 |                |            |                |                     |                              |                         | Check Amount: | \$2,489.87        |                  |                |
| Check Numb      | oer: 28760     | Check D    | Date: 03/15/20 | 024 Pa              | yee Name: AFFANATO MARUT     | LLC                     |               |                   |                  |                |
| 2023293464      | INDEMNITY      |            | 01/11/2023     | MANTUA <sup>-</sup> | TOWNSHIP                     | L-LEGAL WC              |               | \$168.00          | 2023-2023        | Legal          |
|                 |                |            |                |                     |                              |                         | Check Amount: | \$168.00          |                  |                |
| Check Numb      | oer: 28761     | Check D    | Date: 03/15/20 | 024 Pa              | yee Name: ExamWorks LLC      |                         |               |                   |                  |                |
| 2020194546      | INDEMNITY      |            | 01/12/2020     | DEPTFOR             | D TOWNSHIP                   | E-ALLOCATED MED EXAM WC |               | \$200.00          | 2020-2020        | Expense        |
|                 |                |            |                |                     |                              |                         |               | \$1,445.00        |                  |                |



| Claim<br>Number | Claimant   | Type DOL             | Insured Name                      | Transaction Type               |              | Payment<br>Amount | Policy<br>Period | Paymen<br>Type |
|-----------------|------------|----------------------|-----------------------------------|--------------------------------|--------------|-------------------|------------------|----------------|
|                 |            |                      |                                   | Ch                             | neck Amount: | \$1,645.00        |                  |                |
| Check Numb      | er: 28762  | Check Date: 03/15/20 | 024 Payee Name: PIETRAS SARACINO  | SMITH & MEEK LLP               |              |                   |                  |                |
| 2022265587      | INDEMNITY  | 02/18/2022           | MONROE TOWNSHIP(TRIJIF)           | L-LEGAL WC                     |              | \$791.00          | 2022-2022        | Legal          |
| 2023279056      | INDEMNITY  | 07/21/2022           | WOODBURY CITY                     | L-LEGAL WC                     |              | \$641.50          | 2022-2022        | Legal          |
|                 |            |                      |                                   | Ch                             | neck Amount: | \$1,432.50        |                  |                |
| Check Numb      | er: 28763  | Check Date: 03/15/20 | 24 Payee Name: MONROE TOWNSHIP    | P(TRIJIF)                      |              |                   |                  |                |
| 2024321516      | INDEMNITY  | 12/11/2023           | MONROE TOWNSHIP(TRIJIF)           | I-TEMPORARY TOTAL DISABILITY   |              | \$586.00          | 2023-2023        | Loss           |
|                 |            |                      |                                   | Ch                             | neck Amount: | \$586.00          |                  |                |
| Check Numb      | er: 28764  | Check Date: 03/15/20 | 24 Payee Name: QUAL-LYNX          |                                |              |                   |                  |                |
| 2021235053      | INLAND MAR | INE 04/09/2021       | WENONAH BOROUGH                   | E-SUBROGATION EXPENSE PR       |              | \$1,080.00        | 2021-2021        | Expense        |
|                 |            |                      |                                   | Ch                             | neck Amount: | \$1,080.00        |                  |                |
| Check Numb      | er: 28765  | Check Date: 03/15/20 | 024 Payee Name: MONROE TOWNSHIP   | P(TRIJIF)                      |              |                   |                  |                |
| 2023281080      | INDEMNITY  | 08/19/2022           | MONROE TOWNSHIP(TRIJIF)           | I-TEMPORARY TOTAL DISABILITY   |              | \$1,632.62        | 2022-2022        | Loss           |
|                 |            |                      |                                   | Ch                             | neck Amount: | \$1,632.62        |                  |                |
| Check Numb      | er: 28766  | Check Date: 03/15/20 | 024 Payee Name: LOGAN TOWNSHIP    |                                |              |                   |                  |                |
| 2023300380      | INDEMNITY  | 03/09/2023           | LOGAN TOWNSHIP                    | I-TEMPORARY TOTAL DISABILITY   |              | \$2,198.00        | 2023-2023        | Loss           |
|                 |            |                      |                                   | Ch                             | neck Amount: | \$2,198.00        |                  |                |
| Check Numb      | er: 28767  | Check Date: 03/15/20 | 024 Payee Name: Diane Izzo        |                                |              |                   |                  |                |
| 2024322505      | INDEMNITY  | 12/21/2023           | BOROUGH OF NATIONAL PARK          | I-TEMPORARY TOTAL DISABILITY   |              | \$586.00          | 2023-2023        | Loss           |
|                 |            |                      |                                   | Ch                             | neck Amount: | \$586.00          |                  |                |
| Check Numb      | er: 28768  | Check Date: 03/15/20 | 024 Payee Name: Robert Tanner     |                                |              |                   |                  |                |
| 2023286231      | INDEMNITY  | 10/17/2022           | WASHINGTON TOWNSHIP               | I-PERMANENT PARTIAL DISABILITY | (            | \$1,136.00        | 2022-2022        | Loss           |
|                 |            |                      |                                   | Ch                             | neck Amount: | \$1,136.00        |                  |                |
| Check Numb      | er: 28769  | Check Date: 03/15/20 | 224 Payee Name: Jamie Cucugliello |                                |              |                   |                  |                |
| 2022247312      | INDEMNITY  | 09/07/2021           | WEST DEPTFORD TOWNSHIP            | I-PERMANENT PARTIAL DISABILITY | (            | \$1,177.44        | 2021-2021        | Loss           |
|                 |            |                      |                                   | Ch                             | neck Amount: | \$1,177.44        |                  |                |
| Check Numb      | er: 28770  | Check Date: 03/15/20 | D24 Payee Name: LOWER ALLOWAYS    | CREEK TOWNSHIP                 |              |                   |                  |                |
| 2024318359      | COMPREHE   | NSIVE 10/30/2023     | LOWER ALLOWAYS CREEK TOWNSHIP     | M-MISC MED(WC) & PD (NON-WC) F | PR COLL      | \$3,017.18        | 2023-2023        | Loss           |
|                 |            |                      |                                   | Ch                             | neck Amount: | \$3,017.18        |                  |                |



| Claim<br>Number | Claimant   | Type DOL            | Insured Name                     | Transaction 1                 | Гуре             | Payment<br>Amount | Policy<br>Period | Paymen<br>Type |
|-----------------|------------|---------------------|----------------------------------|-------------------------------|------------------|-------------------|------------------|----------------|
| Check Numb      | er: 28771  | Check Date: 03/15/2 | 024 Payee Name: WENONAH BOROU    | JGH                           |                  |                   |                  |                |
| 2021235053      | INLAND MAR | INE 04/09/2021      | WENONAH BOROUGH                  | M-MISC MED(WC) & PD (NON      | -WC) OTR LOSS PR | \$1,000.00        | 2021-2021        | Loss           |
|                 |            |                     |                                  |                               | Check Amount:    | \$1,000.00        |                  |                |
| Check Numb      | er: 28772  | Check Date: 03/15/2 | 024 Payee Name: WOODBURY CITY    |                               |                  |                   |                  |                |
| 2024329419      | INLAND MAR | INE 03/12/2024      | WOODBURY CITY                    | M-MISC MED(WC) & PD (NON      | -WC) OTR LOSS PR | \$7,395.00        | 2024-2024        | Loss           |
|                 |            |                     |                                  |                               | Check Amount:    | \$7,395.00        |                  |                |
| Check Numb      | er: 28773  | Check Date: 03/15/2 | 024 Payee Name: COASTAL SPINE, F | °C.                           |                  |                   |                  |                |
| 2022264323      | INDEMNITY  | 02/08/2022          | MONROE TOWNSHIP(TRIJIF)          | M-ORTHO/NEURO FEES            |                  | \$83.27           | 2022-2022        | Loss           |
|                 |            |                     |                                  |                               | Check Amount:    | \$83.27           |                  |                |
| Check Numb      | er: 28774  | Check Date: 03/15/2 | 024 Payee Name: IVYREHAB NETWC   | ORK INC                       |                  |                   |                  |                |
| 2023293464      | INDEMNITY  | 01/11/2023          | MANTUA TOWNSHIP                  | M-PHYSICIAN FEES              |                  | \$234.00          | 2023-2023        | Loss           |
| 2024320615      | INDEMNITY  | 11/28/2023          | GREENWICH TOWNSHIP               | M-PHYSICIAN FEES              |                  | \$404.00          | 2023-2023        | Loss           |
|                 |            |                     |                                  |                               | Check Amount:    | \$638.00          |                  |                |
| Check Numb      | er: 28775  | Check Date: 03/15/2 | 024 Payee Name: PREMIER ORTHOP   | EDIC OF SOUTH JERSEY          |                  |                   |                  |                |
| 2024315983      | INDEMNITY  | 10/04/2023          | GLASSBORO BOROUGH                | M-ORTHO/NEURO FEES            |                  | \$205.80          | 2023-2023        | Loss           |
| 2024319174      | INDEMNITY  | 11/08/2023          | DEPTFORD TOWNSHIP                | M-ORTHO/NEURO FEES            |                  | \$333.25          | 2023-2023        | Loss           |
|                 |            |                     |                                  |                               | Check Amount:    | \$539.05          |                  |                |
| Check Numb      | er: 28776  | Check Date: 03/15/2 | 024 Payee Name: TWIN BORO PHYS   | ICAL THERAPY ASSOCIATES PA    |                  |                   |                  |                |
| 2024315983      | INDEMNITY  | 10/04/2023          | GLASSBORO BOROUGH                | M-PHYSICIAN FEES              |                  | \$240.00          | 2023-2023        | Loss           |
|                 |            |                     |                                  |                               | Check Amount:    | \$240.00          |                  |                |
| Check Numb      | er: 28777  | Check Date: 03/15/2 | 024 Payee Name: ONE CALL CARE D  | DIAGNOSTICS                   |                  |                   |                  |                |
| 2023281080      | INDEMNITY  | 08/19/2022          | MONROE TOWNSHIP(TRIJIF)          | M-MRI                         |                  | \$510.00          | 2022-2022        | Loss           |
| 2024320516      | INDEMNITY  | 11/20/2023          | WOODBURY CITY                    | M-MRI                         |                  | \$485.00          | 2023-2023        | Loss           |
| 2024322505      | INDEMNITY  | 12/21/2023          | BOROUGH OF NATIONAL PARK         | M-MRI                         |                  | \$970.00          | 2023-2023        | Loss           |
|                 |            |                     |                                  |                               | Check Amount:    | \$1,965.00        |                  |                |
| Check Numb      | er: 28778  | Check Date: 03/15/2 | 024 Payee Name: MATTHEW J PITER  | A MD PA                       |                  |                   |                  |                |
| 2023295148      | INDEMNITY  | 01/27/2023          | WOODBURY CITY                    | M-BEHAVIORAL HEALTH           |                  | \$450.00          | 2023-2023        | Loss           |
|                 |            |                     |                                  |                               | Check Amount:    | \$450.00          |                  |                |
|                 | er: 28779  | Check Date: 03/15/2 |                                  | SICIAN ASSOCIATES OF SOUTH JE |                  |                   |                  |                |



| Claim<br>Number | Claimant   | Type DOL          | Insured Name                   | Transaction T                   | уре                | Payment<br>Amount | Policy<br>Period | Paymen<br>Type |
|-----------------|------------|-------------------|--------------------------------|---------------------------------|--------------------|-------------------|------------------|----------------|
| 2024324927      | INDEMNITY  | 01/24/202         | 4 DEPTFORD TOWNSHIP            | M-PHYSICIAN FEES                |                    | \$1,105.00        | 2024-2024        | Loss           |
| 2024325883      | MEDICAL ON | ILY 02/03/202     | 4 MONROE TOWNSHIP(TRIJIF)      | M-PHYSICIAN FEES                |                    | \$1,215.00        | 2024-2024        | Loss           |
| 2024326754      | MEDICAL ON | ILY 02/13/202     | 4 DEPTFORD TOWNSHIP            | M-PHYSICIAN FEES                |                    | \$1,166.00        | 2024-2024        | Loss           |
|                 |            |                   |                                |                                 | Check Amount:      | \$3,486.00        |                  |                |
| Check Numb      | er: 28780  | Check Date: 03/15 | /2024 Payee Name: SOUTH JERSI  | EY HS EMG PHYS SV, PA           |                    |                   |                  |                |
| 2024327473      | MEDICAL ON | ILY 02/20/202     | 4 QUINTON TOWNSHIP             | M-PHYSICIAN FEES                |                    | \$531.00          | 2024-2024        | Loss           |
|                 |            |                   |                                |                                 | Check Amount:      | \$531.00          |                  |                |
| Check Numb      | er: 28781  | Check Date: 03/15 | /2024 Payee Name: CENTER FOR   | EYECARE LLC                     |                    |                   |                  |                |
| 2024326893      | MEDICAL ON | ILY 02/13/202     | 4 CLAYTON BOROUGH              | M-PHYSICIAN FEES                |                    | \$240.00          | 2024-2024        | Loss           |
|                 |            |                   |                                |                                 | Check Amount:      | \$240.00          |                  |                |
| Check Numb      | er: 28782  | Check Date: 03/15 | /2024 Payee Name: NovaCare Reh | nabilitation                    |                    |                   |                  |                |
| 2024320516      | INDEMNITY  | 11/20/202         | 3 WOODBURY CITY                | M-PHYSICIAN FEES                |                    | \$100.94          | 2023-2023        | Loss           |
|                 |            |                   |                                |                                 | Check Amount:      | \$100.94          |                  |                |
| Check Numb      | er: 28783  | Check Date: 03/15 | /2024 Payee Name: PREMIER ORT  | THOPAEDIC & SPORTS MEDICINE ASS | DCIATES OF SNJ LLC |                   |                  |                |
| 2023281080      | INDEMNITY  | 08/19/202         | 2 MONROE TOWNSHIP(TRIJIF)      | M-PHYSICIAN FEES                |                    | \$88.09           | 2022-2022        | Loss           |
| 2024324960      | INDEMNITY  | 01/24/202         | 4 WOODBURY CITY                | M-ORTHO/NEURO FEES              |                    | \$303.61          | 2024-2024        | Loss           |
| 2024325590      | INDEMNITY  | 02/01/202         | 4 WASHINGTON TOWNSHIP          | M-ORTHO/NEURO FEES              |                    | \$132.13          | 2024-2024        | Loss           |
|                 |            |                   |                                |                                 | Check Amount:      | \$523.83          |                  |                |
| Check Numb      | er: 28784  | Check Date: 03/15 | 2024 Payee Name: HOME CARE 0   | CONNECT LLC                     |                    |                   |                  |                |
| 2024325590      | INDEMNITY  | 02/01/202         | 4 WASHINGTON TOWNSHIP          | M-DME/PROSTHETICS               |                    | \$253.06          | 2024-2024        | Loss           |
|                 |            |                   |                                |                                 | Check Amount:      | \$253.06          |                  |                |
| Check Numb      | er: 28785  | Check Date: 03/15 | 2024 Payee Name: KIRSHNER SP   | PINE INSTITUTE                  |                    |                   |                  |                |
| 2024320516      | INDEMNITY  | 11/20/202         | 3 WOODBURY CITY                | M-ORTHO/NEURO FEES              |                    | \$208.00          | 2023-2023        | Loss           |
|                 |            |                   |                                |                                 | Check Amount:      | \$208.00          |                  |                |
| Check Numb      | er: 28786  | Check Date: 03/15 | 2024 Payee Name: STRIVE PHYS   | ICAL THERAPY SPECIALISTS LLC    |                    |                   |                  |                |
| 2023281080      | INDEMNITY  | 08/19/202         | 2 MONROE TOWNSHIP(TRIJIF)      | M-PHYSICIAN FEES                |                    | \$270.00          | 2022-2022        | Loss           |
| 2024319174      | INDEMNITY  | 11/08/202         | 3 DEPTFORD TOWNSHIP            | M-PHYSICIAN FEES                |                    | \$270.00          | 2023-2023        | Loss           |
| 2024321516      | INDEMNITY  | 12/11/202         | 3 MONROE TOWNSHIP(TRIJIF)      | M-PHYSICIAN FEES                |                    | \$90.00           | 2023-2023        | Loss           |
| 2024324316      | INDEMNITY  | 01/19/202         | 4 GLASSBORO BOROUGH            | M-PHYSICIAN FEES                |                    | \$90.00           | 2024-2024        | Loss           |



| 2024328902         N           Check Number         2022277308         F           Check Number         2022265402         E | MEDICAL ON<br>MEDICAL ON<br>r: 28788<br>POLICE PROI                            | LY 03/07/2024<br>Check Date: 03/22/20<br>F PI 11/09/2021<br>Check Date: 03/22/20                  | MONROE TOWNSHIP(TRIJIF)<br>GREENWICH TOWNSHIP<br>024 Payee Name: CAPEHART & So<br>DEPTFORD TOWNSHIP | M-MEDICAL REHAB/NON VOCA                                            | TIONAL WC<br>Check Amount: | \$565.00<br><b>\$1,130.00</b> | 2024-2024<br>2024-2024 | Loss<br>Loss |
|------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|----------------------------|-------------------------------|------------------------|--------------|
| 2024328786 N<br>2024328902 N<br>Check Number<br>2022277308 F<br>Check Number<br>2022265402 E                                 | MEDICAL ON<br>MEDICAL ON<br>r: 28788<br>POLICE PROI<br>r: 28789<br>BODILY INJU | LY 03/06/2024<br>LY 03/07/2024<br>Check Date: 03/22/20<br>F PI 11/09/2021<br>Check Date: 03/22/20 | MONROE TOWNSHIP(TRIJIF)<br>GREENWICH TOWNSHIP<br>024 Payee Name: CAPEHART & So<br>DEPTFORD TOWNSHIP | M-MEDICAL REHAB/NON VOCA<br>M-MEDICAL REHAB/NON VOCA<br>CATCHARD PA | TIONAL WC<br>Check Amount: | \$565.00<br><b>\$1,130.00</b> |                        |              |
| 2024328902         N           Check Number         2022277308         F           Check Number         2022265402         E | MEDICAL ON<br>r: 28788<br>POLICE PROI<br>r: 28789<br>BODILY INJU               | LY 03/07/2024<br>Check Date: 03/22/20<br>F PI 11/09/2021<br>Check Date: 03/22/20                  | GREENWICH TOWNSHIP<br>024 Payee Name: CAPEHART & Se<br>DEPTFORD TOWNSHIP                            | M-MEDICAL REHAB/NON VOCA                                            | TIONAL WC<br>Check Amount: | \$565.00<br><b>\$1,130.00</b> |                        |              |
| Check Number<br>2022277308 F<br>Check Number<br>2022265402 E                                                                 | r: 28788<br>Police Proi<br>r: 28789<br>Bodily Injui                            | Check Date: 03/22/20<br>F PI 11/09/2021<br>Check Date: 03/22/20                                   | D24 Payee Name: CAPEHART & So<br>DEPTFORD TOWNSHIP                                                  | CATCHARD PA                                                         | Check Amount:              | \$1,130.00                    | 2024-2024              | Loss         |
| 2022277308 F<br>Check Number<br>2022265402 E                                                                                 | POLICE PROP<br>r: 28789<br>BODILY INJU                                         | F PI 11/09/2021<br>Check Date: 03/22/20                                                           | DEPTFORD TOWNSHIP                                                                                   |                                                                     |                            |                               |                        |              |
| 2022277308 F<br>Check Number<br>2022265402 E                                                                                 | POLICE PROP<br>r: 28789<br>BODILY INJU                                         | F PI 11/09/2021<br>Check Date: 03/22/20                                                           | DEPTFORD TOWNSHIP                                                                                   |                                                                     |                            | \$816.00                      |                        |              |
| <b>Check Number</b><br>022265402 E                                                                                           | r: <b>28789</b><br>BODILY INJU                                                 | Check Date: 03/22/20                                                                              |                                                                                                     | L-LEGAL GL                                                          |                            | \$816.00                      |                        |              |
| 2022265402 E                                                                                                                 | BODILY INJU                                                                    |                                                                                                   | 024 Pavee Name: MADDEN & MAD                                                                        |                                                                     |                            |                               | 2021-2021              | Legal        |
| 022265402 E                                                                                                                  | BODILY INJU                                                                    |                                                                                                   | 024 Pavee Name: MADDEN & MAD                                                                        |                                                                     | Check Amount:              | \$816.00                      |                        |              |
|                                                                                                                              |                                                                                | RY 01/30/2022                                                                                     |                                                                                                     | DDEN PA                                                             |                            |                               |                        |              |
| 024316758 F                                                                                                                  | POLICE PROI                                                                    |                                                                                                   | CLAYTON BOROUGH                                                                                     | L-LEGAL GL                                                          |                            | \$198.00                      | 2022-2022              | Legal        |
|                                                                                                                              |                                                                                | F PI 09/13/2022                                                                                   | MANTUA TOWNSHIP                                                                                     | L-LEGAL GL                                                          |                            | \$413.00                      | 2022-2022              | Legal        |
|                                                                                                                              |                                                                                |                                                                                                   |                                                                                                     |                                                                     | Check Amount:              | \$611.00                      |                        |              |
| Check Number                                                                                                                 | r: 28790                                                                       | Check Date: 03/22/20                                                                              | D24 Payee Name: MRO CORPORA                                                                         | TION                                                                |                            |                               |                        |              |
| 023286429 II                                                                                                                 | INDEMNITY                                                                      | 10/18/2022                                                                                        | WEST DEPTFORD TOWNSHIP                                                                              | E-INDEP ADJUSTOR WC                                                 |                            | \$65.00                       | 2022-2022              | Expense      |
|                                                                                                                              |                                                                                |                                                                                                   |                                                                                                     |                                                                     | Check Amount:              | \$65.00                       |                        |              |
| Check Number                                                                                                                 | r: 28791                                                                       | Check Date: 03/22/20                                                                              | 024 Payee Name: I C U INVESTIGA                                                                     | TIONS INC                                                           |                            |                               |                        |              |
| 024315983 II                                                                                                                 | INDEMNITY                                                                      | 10/04/2023                                                                                        | GLASSBORO BOROUGH                                                                                   | E-INDEP ADJUSTOR WC                                                 |                            | \$475.00                      | 2023-2023              | Expense      |
|                                                                                                                              |                                                                                |                                                                                                   |                                                                                                     |                                                                     | Check Amount:              | \$475.00                      |                        |              |
| Check Number                                                                                                                 | r: 28792                                                                       | Check Date: 03/22/20                                                                              | 024 Payee Name: DAVID K CUNEC                                                                       | )                                                                   |                            |                               |                        |              |
| 020199828 II                                                                                                                 | INDEMNITY                                                                      | 03/06/2020                                                                                        | SWEDESBORO BOROUGH                                                                                  | I-ASSESSMENT-W.C. IND                                               |                            | \$17,269.00                   | 2020-2020              | Loss         |
|                                                                                                                              |                                                                                |                                                                                                   |                                                                                                     |                                                                     | Check Amount:              | \$17,269.00                   |                        |              |
| Check Number                                                                                                                 | r: 28793                                                                       | Check Date: 03/22/20                                                                              | D24 Payee Name: THE DEWEESE                                                                         | LAW FIRM                                                            |                            |                               |                        |              |
| 022270445 N                                                                                                                  | MEDICAL ON                                                                     | LY 04/11/2022                                                                                     | FRANKLIN TOWNSHIP                                                                                   | E-MISC LEGAL EXPENSE WC                                             |                            | \$447.06                      | 2022-2022              | Expense      |
|                                                                                                                              |                                                                                |                                                                                                   |                                                                                                     |                                                                     | Check Amount:              | \$447.06                      |                        |              |
| Check Number                                                                                                                 | r: 28794                                                                       | Check Date: 03/22/20                                                                              | 024 Payee Name: AFFANATO MAR                                                                        | RUT LLC                                                             |                            |                               |                        |              |
| 020199828 II                                                                                                                 | INDEMNITY                                                                      | 03/06/2020                                                                                        | SWEDESBORO BOROUGH                                                                                  | L-LEGAL WC                                                          |                            | \$252.00                      | 2020-2020              | Legal        |
|                                                                                                                              |                                                                                |                                                                                                   |                                                                                                     |                                                                     | Check Amount:              | \$252.00                      |                        |              |
| Check Number                                                                                                                 | r: 28795                                                                       | Check Date: 03/22/20                                                                              | 024 Payee Name: MAGNA LEGAL                                                                         | SERVICES LLC                                                        |                            |                               |                        |              |
| 021235211 E                                                                                                                  | BODILY INJU                                                                    | RY 02/13/2021                                                                                     | MONROE TOWNSHIP(TRIJIF)                                                                             | L-LEGAL GL                                                          |                            | \$150.00                      | 2021-2021              | Legal        |
| cessed Date:                                                                                                                 |                                                                                | through Mar 31, 2024                                                                              | Insurance Type                                                                                      | e(s): All                                                           |                            |                               |                        |              |



| Claim<br>Number | Claimant <sup>-</sup> | Гуре    | DOL            |            | Insured Name                | Transaction Ty                     | ре            | Payment<br>Amount | Policy<br>Period | Payment<br>Type |
|-----------------|-----------------------|---------|----------------|------------|-----------------------------|------------------------------------|---------------|-------------------|------------------|-----------------|
|                 |                       |         |                |            |                             |                                    | Check Amount: | \$150.00          |                  |                 |
| Check Numbe     | er: 28796             | Check D | Date: 03/22/20 | 024 Payee  | Name: HOWARD HAMMER P       | SY D LLC                           |               |                   |                  |                 |
| 2022246088      | INDEMNITY             |         | 08/23/2021     | MONROE TOW | VNSHIP(TRIJIF)              | M-BEHAVIORAL HEALTH                |               | \$165.00          | 2021-2021        | Loss            |
| 2022246208      | INDEMNITY             |         | 08/23/2021     | DEPTFORD T | OWNSHIP                     | M-BEHAVIORAL HEALTH                |               | \$165.00          | 2021-2021        | Loss            |
|                 |                       |         |                |            |                             |                                    | Check Amount: | \$330.00          |                  |                 |
| Check Numbe     | er: 28797             | Check D | Date: 03/22/20 | 024 Payee  | Name: PIETRAS SARACINO S    | MITH & MEEK LLP                    |               |                   |                  |                 |
| 2022265167      | INDEMNITY             |         | 02/16/2022     | MONROE TOW | VNSHIP(TRIJIF)              | L-LEGAL WC                         |               | \$475.50          | 2022-2022        | Legal           |
|                 |                       |         |                |            |                             |                                    | Check Amount: | \$475.50          |                  |                 |
| Check Numbe     | er: 28798             | Check D | Date: 03/22/20 | 024 Payee  | Name: Michael Kane, Lori Ka | ne and Trinity & Farsiou LLC their | attorneys     |                   |                  |                 |
| 2021224925      | BODILY INJU           | RY      | 10/04/2020     | EAST GREEN | WICH TOWNSHIP               | I-LUMP SUM SETTLEMENT GL           | BI            | \$18,750.00       | 2020-2020        | Loss            |
|                 |                       |         |                |            |                             |                                    | Check Amount: | \$18,750.00       |                  |                 |
| Check Numbe     | er: 28799             | Check D | Date: 03/22/20 | 024 Payee  | Name: WOODBURY CITY         |                                    |               |                   |                  |                 |
| 2023295148      | INDEMNITY             |         | 01/27/2023     | WOODBURY   | CITY                        | I-TEMPORARY TOTAL DISABIL          | ITY           | \$2,198.00        | 2023-2023        | Loss            |
|                 |                       |         |                |            |                             |                                    | Check Amount: | \$2,198.00        |                  |                 |
| Check Numbe     | er: 28800             | Check D | Date: 03/22/20 | 024 Payee  | Name: QUAL-LYNX             |                                    |               |                   |                  |                 |
| 2022273404      | INLAND MAR            | INE     | 11/07/2021     | GLASSBORO  | BOROUGH                     | E-SUBROGATION EXPENSE PR           | २             | \$22.50           | 2021-2021        | Expense         |
|                 |                       |         |                |            |                             |                                    | Check Amount: | \$22.50           |                  |                 |
| Check Numbe     | er: 28801             | Check D | Date: 03/22/20 | 024 Payee  | Name: QUAL-LYNX             |                                    |               |                   |                  |                 |
| 2018125077      | 1ST PARTY C           | OLL PD  | 01/31/2018     | WASHINGTON | TOWNSHIP                    | E-SUBROGATION EXPENSE PR           | २             | \$186.09          | 2018-2018        | Expense         |
|                 |                       |         |                |            |                             |                                    | Check Amount: | \$186.09          |                  |                 |
| Check Numbe     | er: 28802             | Check D | Date: 03/22/20 | 024 Payee  | Name: GLASSBORO BOROU       | GH                                 |               |                   |                  |                 |
| 2024315983      | INDEMNITY             |         | 10/04/2023     | GLASSBORO  | BOROUGH                     | I-TEMPORARY TOTAL DISABIL          | ITY           | \$1,648.76        | 2023-2023        | Loss            |
|                 |                       |         |                |            |                             |                                    | Check Amount: | \$1,648.76        |                  |                 |
| Check Numbe     | er: 28803             | Check D | Date: 03/22/20 | 024 Payee  | Name: GLASSBORO BOROU       | GH                                 |               |                   |                  |                 |
| 2024315983      | INDEMNITY             |         | 10/04/2023     | GLASSBORO  | BOROUGH                     | I-TEMPORARY TOTAL DISABIL          | ITY           | \$353.31          | 2023-2023        | Loss            |
|                 |                       |         |                |            |                             |                                    | Check Amount: | \$353.31          |                  |                 |
| Check Numbe     | er: 28804             | Check D | Date: 03/22/20 | 024 Payee  | Name: GREENWICH TOWNSH      | liP                                |               |                   |                  |                 |
| 2024320615      | INDEMNITY             |         | 11/28/2023     | GREENWICH  | TOWNSHIP                    | I-TEMPORARY TOTAL DISABIL          | ITY           | \$586.00          | 2023-2023        | Loss            |
|                 |                       |         |                |            |                             |                                    | Check Amount: | \$586.00          |                  |                 |
|                 |                       |         |                |            |                             |                                    |               |                   |                  |                 |



| Claim<br>Number                                                    | Claimant                                | Type DOL                  | Insured Name                                         | Transaction Type                     | Payment<br>Amount | Policy<br>Period | Payment<br>Type                                 |
|--------------------------------------------------------------------|-----------------------------------------|---------------------------|------------------------------------------------------|--------------------------------------|-------------------|------------------|-------------------------------------------------|
| Check Numb                                                         | er: 28805                               | Check Date: 03/22/20      | 24 Payee Name: PENNS GROVE B                         | OROUGH                               |                   | 1                |                                                 |
| 2024321967                                                         | INDEMNITY                               | 12/16/2023                | PENNS GROVE BOROUGH                                  | I-TEMPORARY TOTAL DISABILITY         | \$2,141.84        | 2023-2023        | Loss                                            |
|                                                                    |                                         |                           |                                                      | Check Amount:                        | \$2,141.84        |                  |                                                 |
| Check Numb                                                         | er: 28806                               | Check Date: 03/22/20      | 24 Payee Name: PENNS GROVE B                         | OROUGH                               |                   |                  |                                                 |
| 2024321967                                                         | INDEMNITY                               | 12/16/2023                | PENNS GROVE BOROUGH                                  | I-TEMPORARY TOTAL DISABILITY         | \$1,529.89        | 2023-2023        | Loss                                            |
|                                                                    |                                         |                           |                                                      | Check Amount:                        | \$1,529.89        |                  |                                                 |
| Check Numb                                                         | er: 28807                               | Check Date: 03/22/20      | 24 Payee Name: John Gangemi                          |                                      |                   |                  |                                                 |
| 2020199828                                                         | INDEMNITY                               | 03/06/2020                | SWEDESBORO BOROUGH                                   | I-PERMANENT PARTIAL DISABILITY       | \$76,382.00       | 2020-2020        | Loss                                            |
|                                                                    |                                         |                           |                                                      | Check Amount:                        | \$76,382.00       |                  |                                                 |
| Check Numb                                                         | er: 28808                               | Check Date: 03/22/20      | 24 Payee Name: Aaron Glenn                           |                                      |                   |                  |                                                 |
| 2024318990                                                         | INDEMNITY                               | 11/04/2023                | MONROE TOWNSHIP(TRIJIF)                              | I-TEMPORARY TOTAL DISABILITY         | \$2,198.00        | 2023-2023        | Loss                                            |
|                                                                    |                                         |                           |                                                      | Check Amount:                        | \$2,198.00        |                  |                                                 |
| Check Numb                                                         | er: 28809                               | Check Date: 03/22/20      | Payee Name: Michael Beecher                          |                                      |                   |                  |                                                 |
| 2024319174                                                         | INDEMNITY                               | 11/08/2023                | DEPTFORD TOWNSHIP                                    | I-TEMPORARY TOTAL DISABILITY         | \$1,495.04        | 2023-2023        | Loss                                            |
|                                                                    |                                         |                           |                                                      | Check Amount:                        | \$1,495.04        |                  |                                                 |
| Check Numb                                                         | er: 28810                               | Check Date: 03/22/20      | Payee Name: Salvatore Oldrati                        |                                      |                   |                  |                                                 |
| 2022247967                                                         | INDEMNITY                               | 09/14/2021                | MANTUA TOWNSHIP                                      | I-TEMPORARY TOTAL DISABILITY         | \$1,938.00        | 2021-2021        | Loss                                            |
|                                                                    |                                         |                           |                                                      | Check Amount:                        | \$1,938.00        |                  |                                                 |
| Check Numb                                                         | er: 28811                               | Check Date: 03/22/20      | Payee Name: Sarah Scapellato                         |                                      |                   |                  |                                                 |
| 2022249302                                                         | INDEMNITY                               | 09/22/2021                | GLASSBORO BOROUGH                                    | I-PERMANENT PARTIAL DISABILITY       | \$1,140.64        | 2021-2021        | Loss                                            |
|                                                                    |                                         |                           |                                                      | Check Amount:                        | \$1,140.64        |                  |                                                 |
| Check Numb                                                         | er: 28812                               | Check Date: 03/22/20      | 24 Payee Name: WASHINGTON TO                         | WNSHIP                               |                   |                  |                                                 |
| 2018125077                                                         | 1ST PARTY (                             | COLL PD 01/31/2018        | WASHINGTON TOWNSHIP                                  | M-MISC MED(WC) & PD (NON-WC) PR COLL | \$1,000.00        | 2018-2018        | Loss                                            |
|                                                                    |                                         |                           |                                                      | Check Amount:                        | \$1,000.00        |                  |                                                 |
| Check Numb                                                         | er: 28813                               | Check Date: 03/22/20      | 24 Payee Name: DEPTFORD TOWN                         | ISHIP                                |                   |                  |                                                 |
| 2023306629                                                         | 1ST PARTY (                             | COLL PD 05/24/2023        | DEPTFORD TOWNSHIP                                    | M-MISC MED(WC) & PD (NON-WC) PR COLL | \$1,000.00        | 2023-2023        | Loss                                            |
|                                                                    |                                         |                           |                                                      | Check Amount:                        | \$1,000.00        |                  |                                                 |
| Check Numb                                                         | er: 28814                               | Check Date: 03/22/20      | 24 Payee Name: QUAL-LYNX                             |                                      |                   |                  |                                                 |
| 2024315983                                                         | INDEMNITY                               | 10/04/2023                | GLASSBORO BOROUGH                                    | E-MISC ALL OTHER WC                  | \$4.25            | 2023-2023        | Expense                                         |
| ocessed Date:<br>ate Of Loss:<br>sured Name(s):<br>ink Account(s): | Mar 1, 2024<br>All<br>All<br>1000399354 | through Mar 31, 2024<br>4 | Insurance Type(s<br>Claimant Type(s)<br>Coverage(s): |                                      |                   |                  | Page 22 (<br>e: 4/2/2024 15:1<br>Cognos Version |



| Claim<br>Number | Claimant   | Type DOL             | Insured Name                     | Transaction Typ          | De            | Payment<br>Amount | Policy<br>Period | Payment<br>Type |
|-----------------|------------|----------------------|----------------------------------|--------------------------|---------------|-------------------|------------------|-----------------|
| 2024321516      | INDEMNITY  | 12/11/2023           | MONROE TOWNSHIP(TRIJIF)          | E-MISC ALL OTHER WC      | I             | \$4.25            | 2023-2023        | Expense         |
| 2024324316      | INDEMNITY  | 01/19/2024           | GLASSBORO BOROUGH                | E-MISC ALL OTHER WC      |               | \$4.25            | 2024-2024        | Expense         |
| 2024324450      | MEDICAL ON | LY 01/20/2024        | PENNSVILLE TOWNSHIP              | E-MISC ALL OTHER WC      |               | \$4.25            | 2024-2024        | Expense         |
| 2024325491      | MEDICAL ON | LY 01/31/2024        | MONROE TOWNSHIP(TRIJIF)          | E-MISC ALL OTHER WC      |               | \$4.25            | 2024-2024        | Expense         |
| 2024325508      | MEDICAL ON | LY 01/12/2024        | GLASSBORO BOROUGH                | E-MISC ALL OTHER WC      |               | \$4.25            | 2024-2024        | Expense         |
| 2024325513      | MEDICAL ON | LY 01/31/2024        | WEST DEPTFORD TOWNSHIP           | E-MISC ALL OTHER WC      |               | \$4.25            | 2024-2024        | Expense         |
| 2024325514      | MEDICAL ON | LY 01/31/2024        | WEST DEPTFORD TOWNSHIP           | E-MISC ALL OTHER WC      |               | \$4.25            | 2024-2024        | Expense         |
| 2024325590      | INDEMNITY  | 02/01/2024           | WASHINGTON TOWNSHIP              | E-MISC ALL OTHER WC      |               | \$4.25            | 2024-2024        | Expense         |
| 2024325883      | MEDICAL ON | LY 02/03/2024        | MONROE TOWNSHIP(TRIJIF)          | E-MISC ALL OTHER WC      |               | \$4.25            | 2024-2024        | Expense         |
| 2024325904      | MEDICAL ON | LY 02/04/2024        | PENNSVILLE TOWNSHIP              | E-MISC ALL OTHER WC      |               | \$4.25            | 2024-2024        | Expense         |
| 2024326754      | MEDICAL ON | LY 02/13/2024        | DEPTFORD TOWNSHIP                | E-MISC ALL OTHER WC      |               | \$4.25            | 2024-2024        | Expense         |
| 2024326893      | MEDICAL ON | LY 02/13/2024        | CLAYTON BOROUGH                  | E-MISC ALL OTHER WC      |               | \$4.25            | 2024-2024        | Expense         |
| 2024327212      | MEDICAL ON | LY 02/17/2024        | LOWER ALLOWAYS CREEK TOWNSHIP    | E-MISC ALL OTHER WC      |               | \$4.25            | 2024-2024        | Expense         |
| 2024327389      | INDEMNITY  | 02/20/2024           | WOODBURY CITY                    | E-MISC ALL OTHER WC      |               | \$4.25            | 2024-2024        | Expense         |
|                 |            |                      |                                  |                          | Check Amount: | \$63.75           |                  |                 |
| Check Numb      | er: 28815  | Check Date: 03/22/20 | 024 Payee Name: IVYREHAB NETWOR  | K INC                    |               |                   |                  |                 |
| 2024320615      | INDEMNITY  | 11/28/2023           | GREENWICH TOWNSHIP               | M-PHYSICIAN FEES         |               | \$255.00          | 2023-2023        | Loss            |
| 2024321967      | INDEMNITY  | 12/16/2023           | PENNS GROVE BOROUGH              | M-PHYSICIAN FEES         |               | \$809.00          | 2023-2023        | Loss            |
|                 |            |                      |                                  |                          | Check Amount: | \$1,064.00        |                  |                 |
| Check Numb      | er: 28816  | Check Date: 03/22/20 | D24 Payee Name: COOPER SURGICAL  | ASSOCIATES PA            |               |                   |                  |                 |
| 2023293877      | INDEMNITY  | 01/16/2023           | WEST DEPTFORD TOWNSHIP           | M-PHYSICIAN FEES         |               | \$460.20          | 2023-2023        | Loss            |
|                 |            |                      |                                  |                          | Check Amount: | \$460.20          |                  |                 |
| Check Numb      | er: 28817  | Check Date: 03/22/20 | 024 Payee Name: TWIN BORO PHYSIC | AL THERAPY ASSOCIATES PA |               |                   |                  |                 |
| 2024315983      | INDEMNITY  | 10/04/2023           | GLASSBORO BOROUGH                | M-PHYSICIAN FEES         |               | \$240.00          | 2023-2023        | Loss            |
|                 |            |                      |                                  |                          | Check Amount: | \$240.00          |                  |                 |
| Check Numb      | er: 28818  | Check Date: 03/22/20 | 024 Payee Name: CONCENTRA MEDIC  | AL CENTERS               |               |                   |                  |                 |
| 2024326754      | MEDICAL ON | LY 02/13/2024        | DEPTFORD TOWNSHIP                | M-OCCUPATIONAL MEDICINE  |               | \$147.90          | 2024-2024        | Loss            |
|                 |            |                      |                                  |                          | Check Amount: | \$147.90          |                  |                 |
|                 |            |                      |                                  |                          |               | ,                 |                  |                 |



| Claim<br>Number               | Claimant    | Type DOL             | Insured Name                            | Transaction Ty             | ре                | Payment<br>Amount | Policy<br>Period | Paymen<br>Type     |
|-------------------------------|-------------|----------------------|-----------------------------------------|----------------------------|-------------------|-------------------|------------------|--------------------|
| 2024324927                    | INDEMNITY   | 01/24/2024           | DEPTFORD TOWNSHIP                       | M-PHYSICIAN FEES           |                   | \$500.00          | 2024-2024        | Loss               |
|                               |             |                      |                                         |                            | Check Amount:     | \$500.00          |                  |                    |
| Check Numb                    | er: 28820   | Check Date: 03/22/2  | 024 Payee Name: CENTER FOR EYECA        | RELLC                      |                   |                   |                  |                    |
| 2024326893                    | MEDICAL ON  | LY 02/13/2024        | CLAYTON BOROUGH                         | M-PHYSICIAN FEES           |                   | \$266.93          | 2024-2024        | Loss               |
|                               |             |                      |                                         |                            | Check Amount:     | \$266.93          |                  |                    |
| Check Numb                    | er: 28821   | Check Date: 03/22/2  | 024 Payee Name: NovaCare Rehabilitati   | on                         |                   |                   |                  |                    |
| 2023300380                    | INDEMNITY   | 03/09/2023           | LOGAN TOWNSHIP                          | M-PHYSICIAN FEES           |                   | \$201.88          | 2023-2023        | Loss               |
|                               |             |                      |                                         |                            | Check Amount:     | \$201.88          |                  |                    |
| Check Numb                    | er: 28822   | Check Date: 03/22/20 | 024 Payee Name: UNITED ANESTHESIA       | SERVICES P.C.              |                   |                   |                  |                    |
| 2023300380                    | INDEMNITY   | 03/09/2023           | LOGAN TOWNSHIP                          | M-PHYSICIAN FEES           |                   | \$873.00          | 2023-2023        | Loss               |
|                               |             |                      |                                         |                            | Check Amount:     | \$873.00          |                  |                    |
| Check Numb                    | er: 28823   | Check Date: 03/22/20 | 024 Payee Name: VIRTUA MEDICAL GR       | OUP, PA                    |                   |                   |                  |                    |
| 2024318990                    | INDEMNITY   | 11/04/2023           | MONROE TOWNSHIP(TRIJIF)                 | M-ORTHO/NEURO FEES         |                   | \$184.48          | 2023-2023        | Loss               |
|                               |             |                      |                                         |                            | Check Amount:     | \$184.48          |                  |                    |
| Check Numb                    | er: 28824   | Check Date: 03/22/20 | 024 Payee Name: PREMIER ORTHOPAE        | DIC & SPORTS MEDICINE ASSO | CIATES OF SNJ LLC |                   |                  |                    |
| 2023298255                    | INDEMNITY   | 03/07/2023           | DEPTFORD TOWNSHIP                       | M-ORTHO/NEURO FEES         |                   | \$88.09           | 2023-2023        | Loss               |
| 2024321516                    | INDEMNITY   | 12/11/2023           | MONROE TOWNSHIP(TRIJIF)                 | M-PAIN MANAGEMENT          |                   | \$282.87          | 2023-2023        | Loss               |
| 2024321814                    | INDEMNITY   | 11/30/2023           | MANTUA TOWNSHIP                         | M-OCCUPATIONAL MEDICINE    |                   | \$158.56          | 2023-2023        | Loss               |
| 2024325590                    | INDEMNITY   | 02/01/2024           | WASHINGTON TOWNSHIP                     | M-OCCUPATIONAL MEDICINE    |                   | \$70.47           | 2024-2024        | Loss               |
|                               |             |                      |                                         |                            | Check Amount:     | \$599.99          |                  |                    |
| Check Numb                    | er: 28825   | Check Date: 03/22/2  | 024 Payee Name: MSC GROUP INC           |                            |                   |                   |                  |                    |
| 2024324960                    | INDEMNITY   | 01/24/2024           | WOODBURY CITY                           | M-DME/PROSTHETICS          |                   | \$124.58          | 2024-2024        | Loss               |
|                               |             |                      |                                         |                            | Check Amount:     | \$124.58          |                  |                    |
| Check Numb                    | er: 28826   | Check Date: 03/22/20 | 024 Payee Name: HOME CARE CONNE         | CT LLC                     |                   |                   |                  |                    |
| 2024321516                    | INDEMNITY   | 12/11/2023           | MONROE TOWNSHIP(TRIJIF)                 | M-DME/PROSTHETICS          |                   | \$350.00          | 2023-2023        | Loss               |
| 2024321814                    | INDEMNITY   | 11/30/2023           | MANTUA TOWNSHIP                         | M-DME/PROSTHETICS          |                   | \$451.30          | 2023-2023        | Loss               |
|                               |             |                      |                                         |                            | Check Amount:     | \$801.30          |                  |                    |
| Check Numb                    | er: 28827   | Check Date: 03/22/20 | 024 Payee Name: INSPIRA MEDICAL CE      | INTER MULLICA HILL         |                   |                   |                  |                    |
| 2024325904                    | MEDICAL ON  | LY 02/04/2024        | PENNSVILLE TOWNSHIP                     | M-ACUTE CARE HOSPITAL      |                   | \$1,317.04        | 2024-2024        | Loss               |
| ocessed Date:<br>ite Of Loss: | Mar 1, 2024 | through Mar 31, 2024 | Insurance Type(s):<br>Claimant Type(s): | All                        |                   |                   | Due Data         | Page<br>: 4/2/2024 |



| Claim<br>Number | Claimant  | Type DOL             | Insured Name                       | Transaction 1         | Гуре          | Payment<br>Amount | Policy<br>Period | Payment<br>Type |
|-----------------|-----------|----------------------|------------------------------------|-----------------------|---------------|-------------------|------------------|-----------------|
|                 |           |                      |                                    |                       | Check Amount: | \$1,317.04        |                  |                 |
| Check Numb      | er: 28828 | Check Date: 03/22/20 | D24 Payee Name: DR CAROL SCHOBER   | PSYD                  |               |                   |                  |                 |
| 2023295148      | INDEMNITY | 01/27/2023           | WOODBURY CITY                      | M-BEHAVIORAL HEALTH   |               | \$290.00          | 2023-2023        | Loss            |
|                 |           |                      |                                    |                       | Check Amount: | \$290.00          |                  |                 |
| Check Numb      | er: 28829 | Check Date: 03/22/20 | 024 Payee Name: STRIVE PHYSICAL TH | ERAPY SPECIALISTS LLC |               |                   |                  |                 |
| 2024319174      | INDEMNITY | 11/08/2023           | DEPTFORD TOWNSHIP                  | M-PHYSICIAN FEES      |               | \$180.00          | 2023-2023        | Loss            |
| 2024321516      | INDEMNITY | 12/11/2023           | MONROE TOWNSHIP(TRIJIF)            | M-PHYSICIAN FEES      |               | \$180.00          | 2023-2023        | Loss            |
|                 |           |                      |                                    |                       | Check Amount: | \$360.00          |                  |                 |
| Check Numb      | er: 28830 | Check Date: 03/22/20 | Payee Name: ISO SERVICES INC       |                       |               |                   |                  |                 |
| 2020194546      | INDEMNITY | 01/12/2020           | DEPTFORD TOWNSHIP                  | E-MISC ALL OTHER WC   |               | \$13.75           | 2020-2020        | Expense         |
| 2021225591      | INDEMNITY | 01/07/2021           | GLASSBORO BOROUGH                  | E-MISC ALL OTHER WC   |               | \$13.75           | 2021-2021        | Expense         |
| 2021229863      | INDEMNITY | 02/13/2021           | FRANKLIN TOWNSHIP                  | E-MISC ALL OTHER WC   |               | \$13.75           | 2021-2021        | Expense         |
| 2021230606      | INDEMNITY | 01/23/2021           | PENNSVILLE TOWNSHIP                | E-MISC ALL OTHER WC   |               | \$13.75           | 2021-2021        | Expense         |
| 2021236459      | INDEMNITY | 04/30/2021           | GLASSBORO BOROUGH                  | E-MISC ALL OTHER WC   |               | \$13.75           | 2021-2021        | Expense         |
| 2022245499      | INDEMNITY | 08/16/2021           | WASHINGTON TOWNSHIP                | E-MISC ALL OTHER WC   |               | \$13.75           | 2021-2021        | Expense         |
| 2022246520      | INDEMNITY | 08/24/2021           | DEPTFORD TOWNSHIP                  | E-MISC ALL OTHER WC   |               | \$13.75           | 2021-2021        | Expense         |
| 2022247895      | INDEMNITY | 09/07/2021           | MONROE TOWNSHIP(TRIJIF)            | E-MISC ALL OTHER WC   |               | \$13.75           | 2021-2021        | Expense         |
| 2022250738      | INDEMNITY | 10/05/2021           | MONROE TOWNSHIP(TRIJIF)            | E-MISC ALL OTHER WC   |               | \$13.75           | 2021-2021        | Expense         |
| 2022256214      | INDEMNITY | 12/06/2021           | WASHINGTON TOWNSHIP                | E-MISC ALL OTHER WC   |               | \$13.75           | 2021-2021        | Expense         |
| 2022257379      | INDEMNITY | 12/15/2021           | GLASSBORO BOROUGH                  | E-MISC ALL OTHER WC   |               | \$13.75           | 2021-2021        | Expense         |
| 2022258301      | INDEMNITY | 12/23/2021           | DEPTFORD TOWNSHIP                  | E-MISC ALL OTHER WC   |               | \$13.75           | 2021-2021        | Expense         |
| 2022258700      | INDEMNITY | 12/27/2021           | DEPTFORD TOWNSHIP                  | E-MISC ALL OTHER WC   |               | \$13.75           | 2021-2021        | Expense         |
| 2022262384      | INDEMNITY | 01/26/2022           | WASHINGTON TOWNSHIP                | E-MISC ALL OTHER WC   |               | \$13.75           | 2022-2022        | Expense         |
| 2022264323      | INDEMNITY | 02/08/2022           | MONROE TOWNSHIP(TRIJIF)            | E-MISC ALL OTHER WC   |               | \$13.75           | 2022-2022        | Expense         |
| 2022265167      | INDEMNITY | 02/16/2022           | MONROE TOWNSHIP(TRIJIF)            | E-MISC ALL OTHER WC   |               | \$13.75           | 2022-2022        | Expense         |
| 2022265587      | INDEMNITY | 02/18/2022           | MONROE TOWNSHIP(TRIJIF)            | E-MISC ALL OTHER WC   |               | \$13.75           | 2022-2022        | Expense         |
| 2022269384      | INDEMNITY | 03/29/2022           | DEPTFORD TOWNSHIP                  | E-MISC ALL OTHER WC   |               | \$13.75           | 2022-2022        | Expense         |
| 2022269424      | INDEMNITY | 04/01/2022           | DEPTFORD TOWNSHIP                  | E-MISC ALL OTHER WC   |               | \$13.75           | 2022-2022        | Expense         |
| 2022270730      | INDEMNITY | 03/09/2022           | GLASSBORO BOROUGH                  | E-MISC ALL OTHER WC   |               | \$13.75           | 2022-2022        | Expense         |
| 2023279056      | INDEMNITY | 07/21/2022           | WOODBURY CITY                      | E-MISC ALL OTHER WC   |               | \$13.75           | 2022-2022        | Expense         |

Processed Date:Mar 1, 2024 through Mar 31, 2024Date Of Loss:AllInsured Name(s):AllBank Account(s):1000399354



| Claim<br>Number                                                     | Claimant Type                                     | DOL            | Insured Name                          | Transaction Type                  | Payment<br>Amount | Policy<br>Period | Payment<br>Type                                     |
|---------------------------------------------------------------------|---------------------------------------------------|----------------|---------------------------------------|-----------------------------------|-------------------|------------------|-----------------------------------------------------|
| 2023286429                                                          | INDEMNITY                                         | 10/18/2022     | WEST DEPTFORD TOWNSHIP                | E-MISC ALL OTHER WC               | \$13.75           | 2022-2022        | Expense                                             |
| 2023287881                                                          | INDEMNITY                                         | 11/01/2022     | MONROE TOWNSHIP(TRIJIF)               | E-MISC ALL OTHER WC               | \$13.75           | 2022-2022        | Expense                                             |
| 2023289053                                                          | INDEMNITY                                         | 10/21/2022     | PAULSBORO BOROUGH                     | E-MISC ALL OTHER WC               | \$13.75           | 2022-2022        | Expense                                             |
| 2024315983                                                          | INDEMNITY                                         | 10/04/2023     | GLASSBORO BOROUGH                     | E-MISC ALL OTHER WC               | \$13.75           | 2023-2023        | Expense                                             |
| 2024324316                                                          | INDEMNITY                                         | 01/19/2024     | GLASSBORO BOROUGH                     | E-MISC ALL OTHER WC               | \$13.75           | 2024-2024        | Expense                                             |
| 2024325491                                                          | MEDICAL ONLY                                      | 01/31/2024     | MONROE TOWNSHIP(TRIJIF)               | E-MISC ALL OTHER WC               | \$13.75           | 2024-2024        | Expense                                             |
| 2024325508                                                          | MEDICAL ONLY                                      | 01/12/2024     | GLASSBORO BOROUGH                     | E-MISC ALL OTHER WC               | \$13.75           | 2024-2024        | Expense                                             |
| 2024325513                                                          | MEDICAL ONLY                                      | 01/31/2024     | WEST DEPTFORD TOWNSHIP                | E-MISC ALL OTHER WC               | \$13.75           | 2024-2024        | Expense                                             |
| 2024325514                                                          | MEDICAL ONLY                                      | 01/31/2024     | WEST DEPTFORD TOWNSHIP                | E-MISC ALL OTHER WC               | \$13.75           | 2024-2024        | Expense                                             |
| 2024325590                                                          | INDEMNITY                                         | 02/01/2024     | WASHINGTON TOWNSHIP                   | E-MISC ALL OTHER WC               | \$13.75           | 2024-2024        | Expense                                             |
| 2024325752                                                          | BODILY INJURY                                     | 12/12/2023     | WASHINGTON TOWNSHIP                   | E-MISC ALL OTHER GL               | \$13.75           | 2023-2023        | Expense                                             |
| 2024325883                                                          | MEDICAL ONLY                                      | 02/03/2024     | MONROE TOWNSHIP(TRIJIF)               | E-MISC ALL OTHER WC               | \$13.75           | 2024-2024        | Expense                                             |
| 2024325904                                                          | MEDICAL ONLY                                      | 02/04/2024     | PENNSVILLE TOWNSHIP                   | E-MISC ALL OTHER WC               | \$13.75           | 2024-2024        | Expense                                             |
| 2024326691                                                          | BODILY INJURY                                     | 02/06/2024     | HOPEWELL TOWNSHIP (Cumberland County) | E-MISC ALL OTHER GL               | \$13.75           | 2024-2024        | Expense                                             |
| 2024326754                                                          | MEDICAL ONLY                                      | 02/13/2024     | DEPTFORD TOWNSHIP                     | E-MISC ALL OTHER WC               | \$13.75           | 2024-2024        | Expense                                             |
| 2024326893                                                          | MEDICAL ONLY                                      | 02/13/2024     | CLAYTON BOROUGH                       | E-MISC ALL OTHER WC               | \$13.75           | 2024-2024        | Expense                                             |
| 2024326979                                                          | BODILY INJURY                                     | 02/26/2023     | PENNSVILLE TOWNSHIP                   | E-MISC ALL OTHER GL               | \$13.75           | 2023-2023        | Expense                                             |
| 2024327212                                                          | MEDICAL ONLY                                      | 02/17/2024     | LOWER ALLOWAYS CREEK TOWNSHIP         | E-MISC ALL OTHER WC               | \$13.75           | 2024-2024        | Expense                                             |
| 2024327389                                                          | INDEMNITY                                         | 02/20/2024     | WOODBURY CITY                         | E-MISC ALL OTHER WC               | \$13.75           | 2024-2024        | Expense                                             |
| 2024327473                                                          | MEDICAL ONLY                                      | 02/20/2024     | QUINTON TOWNSHIP                      | E-MISC ALL OTHER WC               | \$13.75           | 2024-2024        | Expense                                             |
| 2024327953                                                          | BODILY INJURY                                     | 01/19/2024     | GLASSBORO BOROUGH                     | E-MISC ALL OTHER GL               | \$13.75           | 2024-2024        | Expense                                             |
| 2024328056                                                          | BODILY INJURY                                     | 12/16/2023     | WASHINGTON TOWNSHIP                   | E-MISC ALL OTHER GL               | \$13.75           | 2023-2023        | Expense                                             |
|                                                                     |                                                   |                |                                       | Check Amount:                     | \$591.25          |                  |                                                     |
| Check Numb                                                          | er: 28831 Check                                   | Date: 03/22/2  | D24 Payee Name: QUALCARE INC          |                                   |                   |                  |                                                     |
| 2024329469                                                          | MEDICAL ONLY                                      | 03/13/2024     | PAULSBORO BOROUGH                     | M-MEDICAL REHAB/NON VOCATIONAL WC | \$565.00          | 2024-2024        | Loss                                                |
| 2024329811                                                          | MEDICAL ONLY                                      | 03/04/2024     | WASHINGTON TOWNSHIP                   | M-MEDICAL REHAB/NON VOCATIONAL WC | \$565.00          | 2024-2024        | Loss                                                |
|                                                                     |                                                   |                |                                       | Check Amount:                     | \$1,130.00        |                  |                                                     |
| Check Numb                                                          | er: 28832 Check                                   | Date: 03/22/20 | 024 Payee Name: QUAL-LYNX             |                                   |                   |                  |                                                     |
| 2021227856                                                          | INDEMNITY                                         | 01/24/2021     | WEST DEPTFORD TOWNSHIP                | E-MISC ALL OTHER WC               | \$3.25            | 2021-2021        | Expense                                             |
| 2022253367                                                          | INDEMNITY                                         | 10/09/2021     | GLASSBORO BOROUGH                     | E-MISC ALL OTHER WC               | \$13.00           | 2021-2021        | Expense                                             |
| rocessed Date:<br>ate Of Loss:<br>sured Name(s):<br>ank Account(s): | Mar 1, 2024 through I<br>All<br>All<br>1000399354 | Mar 31, 2024   |                                       |                                   |                   |                  | Page 26 of<br>: 4/2/2024 15:17:<br>Cognos Version 1 |



| Claim<br>Number | Claimant    | Туре     | DOL           | Insured Name                        | Transaction Typ            | e             | Payment<br>Amount | Policy<br>Period | Payment<br>Type |
|-----------------|-------------|----------|---------------|-------------------------------------|----------------------------|---------------|-------------------|------------------|-----------------|
| 2022259937      | INDEMNITY   | (        | 03/24/2020    | GLASSBORO BOROUGH                   | E-MISC ALL OTHER WC        |               | \$35.75           | 2020-2020        | Expense         |
| 2022262718      | INDEMNITY   | (        | 01/07/2021    | GLASSBORO BOROUGH                   | E-MISC ALL OTHER WC        |               | \$5.42            | 2021-2021        | Expense         |
| 2022274651      | INDEMNITY   | (        | 09/23/2021    | PITMAN BOROUGH                      | E-MISC ALL OTHER WC        |               | \$29.25           | 2021-2021        | Expense         |
|                 |             |          |               |                                     |                            | Check Amount: | \$86.67           |                  |                 |
| Check Numb      | er: 28833   | Check Da | ate: 03/29/20 | 24 Payee Name: MADDEN & MADDEN P    | Ά                          |               |                   |                  |                 |
| 2022251866      | PERSONAL I  | NJURY (  | 03/31/2021    | MANNINGTON TOWNSHIP                 | L-LEGAL GL                 |               | \$4,324.60        | 2021-2021        | Legal           |
|                 |             |          |               |                                     |                            | Check Amount: | \$4,324.60        |                  |                 |
| Check Numb      | er: 28834   | Check Da | ate: 03/29/20 | 24 Payee Name: STATE SHORTHAND R    | EPORTING SERVICE           |               |                   |                  |                 |
| 2020199828      | INDEMNITY   | (        | 03/06/2020    | SWEDESBORO BOROUGH                  | E-MISC LEGAL EXPENSE WC    |               | \$75.00           | 2020-2020        | Expense         |
| 2023292119      | INDEMNITY   |          | 12/25/2022    | WASHINGTON TOWNSHIP                 | E-MISC LEGAL EXPENSE WC    |               | \$75.00           | 2022-2022        | Expense         |
|                 |             |          |               |                                     |                            | Check Amount: | \$150.00          |                  |                 |
| Check Numb      | er: 28835   | Check Da | ate: 03/29/20 | 24 Payee Name: FRAN CONVERY & SO    | N AUTO BODY                |               |                   |                  |                 |
| 2024330413      | 1ST PARTY C | OLL PD   | 03/22/2024    | SWEDESBORO BOROUGH                  | M-MISC MED(WC) & PD (NON-W | C) PR COLL    | \$765.47          | 2024-2024        | Loss            |
|                 |             |          |               |                                     |                            | Check Amount: | \$765.47          |                  |                 |
| Check Numb      | er: 28836   | Check Da | ate: 03/29/20 | 24 Payee Name: I C U INVESTIGATIONS | INC                        |               |                   |                  |                 |
| 2024321967      | INDEMNITY   |          | 12/16/2023    | PENNS GROVE BOROUGH                 | E-INDEP ADJUSTOR WC        |               | \$475.00          | 2023-2023        | Expense         |
|                 |             |          |               |                                     |                            | Check Amount: | \$475.00          |                  |                 |
| Check Numb      | er: 28837   | Check Da | ate: 03/29/20 | Payee Name: BIRCHMEIER & POWEI      | LL LLC                     |               |                   |                  |                 |
| 2021235211      | BODILY INJU | RY (     | 02/13/2021    | MONROE TOWNSHIP(TRIJIF)             | L-LEGAL GL                 |               | \$2,104.50        | 2021-2021        | Legal           |
|                 |             |          |               |                                     |                            | Check Amount: | \$2,104.50        |                  |                 |
| Check Numb      | er: 28838   | Check Da | ate: 03/29/20 | 24 Payee Name: EXAMWORKS INC        |                            |               |                   |                  |                 |
| 2022243970      | INDEMNITY   | (        | 07/17/2021    | WEST DEPTFORD TOWNSHIP              | M-IND MED EXAMS WC         |               | \$350.00          | 2021-2021        | Loss            |
|                 |             |          |               |                                     |                            | Check Amount: | \$350.00          |                  |                 |
| Check Numb      | er: 28839   | Check Da | ate: 03/29/20 | 24 Payee Name: MANTUA COLLISION II  | NC                         |               |                   |                  |                 |
| 2024325815      | 1ST PARTY ( | OLL PD   | 01/15/2024    | DEPTFORD TOWNSHIP                   | M-MISC MED(WC) & PD (NON-W | C) PR COLL    | \$799.98          | 2024-2024        | Loss            |
|                 |             |          |               |                                     |                            | Check Amount: | \$799.98          |                  |                 |
| Check Numb      | er: 28840   | Check Da | ate: 03/29/20 | 24 Payee Name: CLIFF GRAY APPRAIS   | AL SERVICE                 |               |                   |                  |                 |
| 2024325815      | 1ST PARTY O | OLL PD   | 01/15/2024    | DEPTFORD TOWNSHIP                   | E-APPRAISERS PR            |               | \$35.00           | 2024-2024        | Expense         |
|                 |             |          |               |                                     |                            | Check Amount: | \$35.00           |                  |                 |



| Claim<br>Number | Claimant    | Туре    | DOL            |       | Insured Name                 | Transaction Ty             | be            | Payment<br>Amount | Policy<br>Period | Paymen<br>Type |
|-----------------|-------------|---------|----------------|-------|------------------------------|----------------------------|---------------|-------------------|------------------|----------------|
| Check Numb      | er: 28841   | Check D | )ate: 03/29/20 | 024   | Payee Name: CLIFF GRAY APPRA | SAL SERVICE                |               |                   |                  |                |
| 2024325815      | 1ST PARTY   | COLL PD | 01/15/2024     | DEPTF | ORD TOWNSHIP                 | E-APPRAISERS PR            |               | \$110.00          | 2024-2024        | Expense        |
|                 |             |         |                |       |                              |                            | Check Amount: | \$110.00          |                  |                |
| Check Numb      | er: 28842   | Check D | Date: 03/29/20 | )24   | Payee Name: AFFANATO MARUT L | LC                         |               |                   |                  |                |
| 2023292119      | INDEMNITY   |         | 12/25/2022     | WASHI | NGTON TOWNSHIP               | L-LEGAL WC                 |               | \$252.00          | 2022-2022        | Legal          |
|                 |             |         |                |       |                              |                            | Check Amount: | \$252.00          |                  |                |
| Check Numb      | er: 28843   | Check D | Date: 03/29/20 | 024   | Payee Name: HOWARD HAMMER P  | SY D LLC                   |               |                   |                  |                |
| 2022246088      | INDEMNITY   |         | 08/23/2021     | MONR  | DE TOWNSHIP(TRIJIF)          | M-BEHAVIORAL HEALTH        |               | \$165.00          | 2021-2021        | Loss           |
|                 |             |         |                |       |                              |                            | Check Amount: | \$165.00          |                  |                |
| Check Numb      | er: 28844   | Check D | Date: 03/29/20 | 024   | Payee Name: ISO SERVICES INC |                            |               |                   |                  |                |
| 2024325356      | BODILY INJU | RY      | 12/21/2023     | WEST  | DEPTFORD TOWNSHIP            | E-MISC ALL OTHER GL        |               | \$13.75           | 2023-2023        | Expense        |
| 2024325356      | BODILY INJU | RY      | 12/21/2023     | WEST  | DEPTFORD TOWNSHIP            | E-MISC ALL OTHER GL        |               | \$13.75           | 2023-2023        | Expense        |
| 2024325356      | BODILY INJU | RY      | 12/21/2023     | WEST  | DEPTFORD TOWNSHIP            | E-MISC ALL OTHER GL        |               | \$13.75           | 2023-2023        | Expense        |
|                 |             |         |                |       |                              |                            | Check Amount: | \$41.25           |                  |                |
| Check Numb      | er: 28845   | Check D | Date: 03/29/20 | 024   | Payee Name: PIETRAS SARACINO | SMITH & MEEK LLP           |               |                   |                  |                |
| 2022245499      | INDEMNITY   |         | 08/16/2021     | WASHI | NGTON TOWNSHIP               | L-LEGAL WC                 |               | \$2,730.50        | 2021-2021        | Legal          |
|                 |             |         |                |       |                              |                            | Check Amount: | \$2,730.50        |                  |                |
| Check Numb      | er: 28846   | Check D | Date: 03/29/20 | 024   | Payee Name: MONROE TOWNSHIP  | (TRIJIF)                   |               |                   |                  |                |
| 2024321516      | INDEMNITY   |         | 12/11/2023     | MONR  | DE TOWNSHIP(TRIJIF)          | I-TEMPORARY TOTAL DISABILI | ТҮ            | \$586.00          | 2023-2023        | Loss           |
|                 |             |         |                |       |                              |                            | Check Amount: | \$586.00          |                  |                |
| Check Numb      | er: 28847   | Check D | Date: 03/29/20 | 024   | Payee Name: MANTUA TOWNSHIP  |                            |               |                   |                  |                |
| 2024321814      | INDEMNITY   |         | 11/30/2023     | MANTL | JA TOWNSHIP                  | I-TEMPORARY TOTAL DISABILI | ТҮ            | \$1,823.98        | 2023-2023        | Loss           |
|                 |             |         |                |       |                              |                            | Check Amount: | \$1,823.98        |                  |                |
| Check Numb      | er: 28848   | Check D | Date: 03/29/20 | 024   | Payee Name: MEL PROPERTY     |                            |               |                   |                  |                |
| 2021209871      | BLDG/CONT   | ENT     | 07/10/2020     | CARNE | YS POINT TOWNSHIP            | M-MISC MED(WC) & PD (NON-V | /C) BLD & CNT | \$20,117.53       | 2020-2020        | Loss           |
|                 |             |         |                |       |                              |                            | Check Amount: | \$20,117.53       |                  |                |
| Check Numb      | er: 28849   | Check D | Date: 03/29/20 | 024   | Payee Name: MEL PROPERTY     |                            |               |                   |                  |                |
| 2021224601      | BLDG/CONT   | ENT     | 12/25/2020     | PITMA | NBOROUGH                     | M-MISC MED(WC) & PD (NON-V | /C) BLD & CNT | \$11,643.18       | 2020-2020        | Loss           |
|                 |             |         |                |       |                              |                            | Check Amount: | \$11,643.18       |                  |                |



| Claim<br>Number                                | Claimant                  | Туре        | DOL          |        | Insured Name                                            | Transaction Typ            | e             | Payment<br>Amount | Policy<br>Period | Payment<br>Type                           |
|------------------------------------------------|---------------------------|-------------|--------------|--------|---------------------------------------------------------|----------------------------|---------------|-------------------|------------------|-------------------------------------------|
| Check Numbe                                    | er: 28850                 | Check Da    | te: 03/29/20 | )24    | Payee Name: MONROE TOWNSHIP(                            | TRIJIF)                    | · · · ·       |                   |                  |                                           |
| 2023281080                                     | INDEMNITY                 | C           | 08/19/2022   | MONRO  | E TOWNSHIP(TRIJIF)                                      | I-TEMPORARY TOTAL DISABILI | ГҮ            | \$1,632.62        | 2022-2022        | Loss                                      |
|                                                |                           |             |              |        |                                                         |                            | Check Amount: | \$1,632.62        |                  |                                           |
| Check Numbe                                    | er: 28851                 | Check Da    | te: 03/29/20 | )24    | Payee Name: LOGAN TOWNSHIP                              |                            |               |                   |                  |                                           |
| 2023300380                                     | INDEMNITY                 | C           | )3/09/2023   | LOGAN  | TOWNSHIP                                                | I-TEMPORARY TOTAL DISABILI | ΓY            | \$2,198.00        | 2023-2023        | Loss                                      |
|                                                |                           |             |              |        |                                                         |                            | Check Amount: | \$2,198.00        |                  |                                           |
| Check Numbe                                    | er: 28852                 | Check Da    | te: 03/29/20 | 24     | Payee Name: WASHINGTON TOWN                             | SHIP                       |               |                   |                  |                                           |
| 2024325590                                     | INDEMNITY                 | C           | )2/01/2024   | WASHIN | IGTON TOWNSHIP                                          | I-TEMPORARY TOTAL DISABILI | ΓY            | \$4,524.00        | 2024-2024        | Loss                                      |
|                                                |                           |             |              |        |                                                         |                            | Check Amount: | \$4,524.00        |                  |                                           |
| Check Numbe                                    | er: 28853                 | Check Da    | te: 03/29/20 | )24    | Payee Name: RICHARD DITOMASO                            | ESQ PC                     |               |                   |                  |                                           |
| 2023292119                                     | INDEMNITY                 | 1           | 2/25/2022    | WASHIN | IGTON TOWNSHIP                                          | I-ASSESSMENT-W.C. IND      |               | \$5,260.00        | 2022-2022        | Loss                                      |
|                                                |                           |             |              |        |                                                         |                            | Check Amount: | \$5,260.00        |                  |                                           |
| Check Numbe                                    | er: 28854                 | Check Da    | te: 03/29/20 | )24    | Payee Name: Michael Durr                                |                            |               |                   |                  |                                           |
| 2024321286                                     | 3RD PARTY F               | PD 1        | 2/07/2023    | PITMAN | BOROUGH                                                 | M-MISC MED(WC) & PD (NON-W | C) AL PD      | \$500.00          | 2023-2023        | Loss                                      |
|                                                |                           |             |              |        |                                                         |                            | Check Amount: | \$500.00          |                  |                                           |
| Check Numbe                                    | er: 28855                 | Check Da    | te: 03/29/20 | 24     | Payee Name: Jessica Walton                              |                            |               |                   |                  |                                           |
| 2023292119                                     | INDEMNITY                 | 1           | 2/25/2022    | WASHIN | IGTON TOWNSHIP                                          | I-PERMANENT PARTIAL DISABI | _ITY          | \$14,552.00       | 2022-2022        | Loss                                      |
|                                                |                           |             |              |        |                                                         |                            | Check Amount: | \$14,552.00       |                  |                                           |
| Check Numbe                                    | er: 28856                 | Check Da    | te: 03/29/20 | 24     | Payee Name: Diane Izzo                                  |                            |               |                   |                  |                                           |
| 2024322505                                     | INDEMNITY                 | 1           | 2/21/2023    | BOROU  | GH OF NATIONAL PARK                                     | I-TEMPORARY TOTAL DISABILI | ΓY            | \$586.00          | 2023-2023        | Loss                                      |
|                                                |                           |             |              |        |                                                         |                            | Check Amount: | \$586.00          |                  |                                           |
| Check Numbe                                    | er: 28857                 | Check Da    | te: 03/29/20 | 24     | Payee Name: Steve DeFelice                              |                            |               |                   |                  |                                           |
| 2021238864                                     | INDEMNITY                 | C           | )5/10/2021   | MONRO  | E TOWNSHIP(TRIJIF)                                      | I-PERMANENT PARTIAL DISABI | _ITY          | \$1,140.64        | 2021-2021        | Loss                                      |
|                                                |                           |             |              |        |                                                         |                            | Check Amount: | \$1,140.64        |                  |                                           |
| Check Numbe                                    | er: 28858                 | Check Da    | te: 03/29/20 | 24     | Payee Name: KYLE RIEPEN                                 |                            |               |                   |                  |                                           |
| 2022251631                                     | INDEMNITY                 | 1           | 0/13/2021    | MANTU  | A TOWNSHIP                                              | I-PERMANENT PARTIAL DISABI | LITY          | \$1,177.44        | 2021-2021        | Loss                                      |
|                                                |                           |             |              |        |                                                         |                            | Check Amount: | \$1,177.44        |                  |                                           |
| Check Numbe                                    | er: 28859                 | Check Da    | te: 03/29/20 | 24     | Payee Name: Ronald Nye                                  |                            |               |                   |                  |                                           |
| 2020202846                                     | INDEMNITY                 | C           | 04/17/2020   | MONRO  | E TOWNSHIP(TRIJIF)                                      | I-PERMANENT PARTIAL DISABI | LITY          | \$1,764.00        | 2020-2020        | Loss                                      |
| ocessed Date:<br>te Of Loss:<br>sured Name(s): | Mar 1, 2024<br>All<br>All | through Mar | 31, 2024     |        | Insurance Type(s):<br>Claimant Type(s):<br>Coverage(s): | All <b>6</b> 3             |               |                   |                  | Page 29<br>:: 4/2/2024 15<br>Cognos Versi |



| Claim<br>Number | Claimant  | Туре    | DOL           |          | Insured Name                   | Transaction Typ            | )e              | Payment<br>Amount | Policy<br>Period | Paymen<br>Type |
|-----------------|-----------|---------|---------------|----------|--------------------------------|----------------------------|-----------------|-------------------|------------------|----------------|
|                 | ,         |         |               |          |                                | 1                          | Check Amount:   | \$1,764.00        |                  |                |
| Check Numb      | er: 28860 | Check D | ate: 03/29/20 | )24 F    | Payee Name: PAUL BUNN          |                            |                 |                   |                  |                |
| 2021229388      | INDEMNITY |         | 02/08/2021    | WOODB    | URY CITY                       | I-PERMANENT PARTIAL DISABI | LITY            | \$1,177.44        | 2021-2021        | Loss           |
|                 |           |         |               |          |                                |                            | Check Amount:   | \$1,177.44        |                  |                |
| Check Numb      | er: 28861 | Check D | ate: 03/29/20 | )24 F    | Payee Name: FAIRFIELD TOWNSHIP |                            |                 |                   |                  |                |
| 2024327643      | BLDG/CONT | ENT     | 02/16/2024    | FAIRFIEI | _D TOWNSHIP                    | M-MISC MED(WC) & PD (NON-W | /C) BLD & CNT   | \$4,659.00        | 2024-2024        | Loss           |
|                 |           |         |               |          |                                |                            | Check Amount:   | \$4,659.00        |                  |                |
| Check Numb      | er: 28862 | Check D | ate: 03/29/20 | )24 F    | Payee Name: WOODBURY CITY      |                            |                 |                   |                  |                |
| 2024326176      | BLDG/CONT | ENT     | 02/07/2024    | WOODB    | URY CITY                       | M-MISC MED(WC) & PD (NON-W | /C) BLD & CNT   | \$24,000.00       | 2024-2024        | Loss           |
|                 |           |         |               |          |                                |                            | Check Amount:   | \$24,000.00       |                  |                |
| Check Numb      | er: 28863 | Check D | ate: 03/29/20 | )24 F    | Payee Name: WOODBURY CITY      |                            |                 |                   |                  |                |
| 2024313632      | MONEY/SEC | INSIDE  | 09/12/2023    | WOODB    | URY CITY                       | M-MISC MED(WC) & PD (NON-W | /C) OTR LOSS PR | \$13,705.74       | 2023-2023        | Loss           |
|                 |           |         |               |          |                                |                            | Check Amount:   | \$13,705.74       |                  |                |
| Check Numb      | er: 28864 | Check D | ate: 03/29/20 | )24 F    | Payee Name: FRANKLIN TOWNSHIP  |                            |                 |                   |                  |                |
| 2024309858      | BLDG/CONT | ENT     | 09/22/2022    | FRANKL   | IN TOWNSHIP                    | M-MISC MED(WC) & PD (NON-W | /C) BLD & CNT   | \$15,332.09       | 2022-2022        | Loss           |
|                 |           |         |               |          |                                |                            | Check Amount:   | \$15,332.09       |                  |                |
| Check Numb      | er: 28865 | Check D | ate: 03/29/20 | )24 F    | Payee Name: DEPTFORD TOWNSHIP  |                            |                 |                   |                  |                |
| 2024326303      | 1ST PARTY | COLL PD | 02/03/2024    | DEPTFO   | RD TOWNSHIP                    | M-MISC MED(WC) & PD (NON-W | /C) PR COLL     | \$22,494.28       | 2024-2024        | Loss           |
|                 |           |         |               |          |                                |                            | Check Amount:   | \$22,494.28       |                  |                |
| Check Numb      | er: 28866 | Check D | ate: 03/29/20 | )24 F    | Payee Name: MONROE TOWNSHIP(   | RIJIF)                     |                 |                   |                  |                |
| 2020185687      | 1ST PARTY | COLL PD | 09/23/2019    | MONRO    | E TOWNSHIP(TRIJIF)             | M-MISC MED(WC) & PD (NON-W | /C) PR COLL     | \$1,000.00        | 2019-2019        | Loss           |
|                 |           |         |               |          |                                |                            | Check Amount:   | \$1,000.00        |                  |                |
| Check Numb      | er: 28867 | Check D | ate: 03/29/20 | )24 F    | Payee Name: COASTAL SPINE, PC. |                            |                 |                   |                  |                |
| 2022264323      | INDEMNITY |         | 02/08/2022    | MONRO    | E TOWNSHIP(TRIJIF)             | M-ORTHO/NEURO FEES         |                 | \$83.27           | 2022-2022        | Loss           |
|                 |           |         |               |          |                                |                            | Check Amount:   | \$83.27           |                  |                |
| Check Numb      | er: 28868 | Check D | ate: 03/29/20 | )24 F    | Payee Name: IVYREHAB NETWORK   | INC                        |                 |                   |                  |                |
| 2024320615      | INDEMNITY |         | 11/28/2023    | GREENV   | VICH TOWNSHIP                  | M-PHYSICIAN FEES           |                 | \$404.00          | 2023-2023        | Loss           |
| 2024321814      | INDEMNITY |         | 11/30/2023    | MANTUA   | TOWNSHIP                       | M-PHYSICIAN FEES           |                 | \$175.00          | 2023-2023        | Loss           |
| 2024321967      | INDEMNITY |         | 12/16/2023    | PENNS (  | GROVE BOROUGH                  | M-PHYSICIAN FEES           |                 | \$560.00          | 2023-2023        | Loss           |



Insured Name(s): Bank Account(s):

# **Check Register** Insurer: TRIJIF-TRI.COUNTY MUN.JIF

| Claim<br>Number              | Claimant                | Type DOL               |         | Insured Name                      | Transaction Ty              | pe                | Payment<br>Amount | Policy<br>Period | Payment<br>Type                 |
|------------------------------|-------------------------|------------------------|---------|-----------------------------------|-----------------------------|-------------------|-------------------|------------------|---------------------------------|
|                              |                         | 1                      |         |                                   |                             | Check Amount:     | \$1,139.00        |                  |                                 |
| Check Numb                   | er: 28869               | Check Date: 03/29      | /2024   | Payee Name: EMERGENCY CARE S      | SERVICES OF NJ              |                   |                   |                  |                                 |
| 2024328254                   | MEDICAL ON              | NLY 02/29/202          | 4 DEPT  | FORD TOWNSHIP                     | M-PHYSICIAN FEES            |                   | \$1,732.00        | 2024-2024        | Loss                            |
|                              |                         |                        |         |                                   |                             | Check Amount:     | \$1,732.00        |                  |                                 |
| Check Numb                   | er: 28870               | Check Date: 03/29      | /2024   | Payee Name: PREMIER ORTHOPED      | DIC OF SOUTH JERSEY         |                   |                   |                  |                                 |
| 2024322505                   | INDEMNITY               | 12/21/202              | 3 BORC  | OUGH OF NATIONAL PARK             | M-ORTHO/NEURO FEES          |                   | \$115.99          | 2023-2023        | Loss                            |
|                              |                         |                        |         |                                   |                             | Check Amount:     | \$115.99          |                  |                                 |
| Check Numb                   | er: 28871               | Check Date: 03/29      | /2024   | Payee Name: INSPIRA MEDICAL CI    | ENTER ELMER                 |                   |                   |                  |                                 |
| 2024327212                   | MEDICAL ON              | NLY 02/17/202          | 4 LOWE  | R ALLOWAYS CREEK TOWNSHIP         | M-ACUTE CARE HOSPITAL       |                   | \$1,031.58        | 2024-2024        | Loss                            |
|                              |                         |                        |         |                                   |                             | Check Amount:     | \$1,031.58        |                  |                                 |
| Check Numb                   | er: 28872               | Check Date: 03/29      | /2024   | Payee Name: MID-ATLANTIC ANES     | THESIA ASSOCIATES PA        |                   |                   |                  |                                 |
| 2021225591                   | INDEMNITY               | 01/07/202              | 1 GLAS  | SBORO BOROUGH                     | M-PHYSICIAN FEES            |                   | \$663.60          | 2021-2021        | Loss                            |
|                              |                         |                        |         |                                   |                             | Check Amount:     | \$663.60          |                  |                                 |
| Check Numb                   | er: 28873               | Check Date: 03/29      | /2024   | Payee Name: TWIN BORO PHYSIC      | AL THERAPY ASSOCIATES PA    |                   |                   |                  |                                 |
| 2024315983                   | INDEMNITY               | 10/04/202              | 3 GLAS  | SBORO BOROUGH                     | M-PHYSICIAN FEES            |                   | \$160.00          | 2023-2023        | Loss                            |
|                              |                         |                        |         |                                   |                             | Check Amount:     | \$160.00          |                  |                                 |
| Check Numb                   | er: 28874               | Check Date: 03/29      | /2024   | Payee Name: CENTER FOR EYECA      | RE LLC                      |                   |                   |                  |                                 |
| 2024326893                   | MEDICAL ON              | NLY 02/13/202          | 4 CLAY  | TON BOROUGH                       | M-PHYSICIAN FEES            |                   | \$105.85          | 2024-2024        | Loss                            |
|                              |                         |                        |         |                                   |                             | Check Amount:     | \$105.85          |                  |                                 |
| Check Numb                   | er: 28875               | Check Date: 03/29      | /2024   | Payee Name: NovaCare Rehabilitat  | ion                         |                   |                   |                  |                                 |
| 2023300380                   | INDEMNITY               | 03/09/202              | 23 LOGA | N TOWNSHIP                        | M-PHYSICIAN FEES            |                   | \$302.82          | 2023-2023        | Loss                            |
|                              |                         |                        |         |                                   |                             | Check Amount:     | \$302.82          |                  |                                 |
| Check Numb                   | er: 28876               | Check Date: 03/29      | /2024   | Payee Name: CLINICAL HEALTH C     | ARE ASSOCIATES OF NEW JERSE | EY, PC            |                   |                  |                                 |
| 2021227856                   | INDEMNITY               | 01/24/202              | 1 WEST  | DEPTFORD TOWNSHIP                 | M-OCCUPATIONAL MEDICINE     |                   | \$339.00          | 2021-2021        | Loss                            |
|                              |                         |                        |         |                                   |                             | Check Amount:     | \$339.00          |                  |                                 |
| Check Numb                   | er: 28877               | Check Date: 03/29      | /2024   | Payee Name: AFC URGENT CARE I     | PARAMUS                     |                   |                   |                  |                                 |
| 024328786                    | MEDICAL ON              | NLY 03/06/202          | 4 MONF  | ROE TOWNSHIP(TRIJIF)              | M-URGENT CARE CENTER        |                   | \$320.00          | 2024-2024        | Loss                            |
|                              |                         |                        |         |                                   |                             | Check Amount:     | \$320.00          |                  |                                 |
| Check Numb                   | er: 28878               | Check Date: 03/29      | /2024   | Payee Name: PREMIER ORTHOPAE      | EDIC & SPORTS MEDICINE ASSO | CIATES OF SNJ LLC |                   |                  |                                 |
| cessed Date:                 |                         | 4 through Mar 31, 2024 |         | Insurance Type(s):                | All                         |                   |                   | Dur D (          | Page 31                         |
| te Of Loss:<br>ured Name(s): | All<br>All<br>100039935 |                        |         | Claimant Type(s):<br>Coverage(s): | 165                         |                   |                   |                  | : 4/2/2024 15:<br>Cognos Versio |



| 11/28/2023<br>12/11/2023<br>11/30/2023<br>01/24/2024<br>01/24/2024<br>Check Date: 03/29/2<br>01/19/2024        | DEPTFORD TOWNSHIP<br>GREENWICH TOWNSHIP<br>MONROE TOWNSHIP(TRIJIF)<br>MANTUA TOWNSHIP<br>CLAYTON BOROUGH<br>WOODBURY CITY<br>Payee Name: INSPIRA HEALTH<br>GLASSBORO BOROUGH<br>WOODBURY CITY | M-ORTHO/NEURO FEES<br>M-ORTHO/NEURO FEES<br>M-PAIN MANAGEMENT<br>M-ORTHO/NEURO FEES<br>M-ORTHO/NEURO FEES<br>M-ORTHO/NEURO FEES<br>M-ORTHO/NEURO FEES<br>M-OCCUPATIONAL MEDICINE<br>M-OCCUPATIONAL MEDICINE | Check Amount:                                                        | \$88.09<br>\$88.09<br>\$61.66<br>\$88.09<br>\$88.09<br><b>\$475.68</b>                                                                                              | 2023-2023<br>2023-2023<br>2023-2023<br>2023-2023<br>2024-2024<br>2024-2024                                                                                              | Loss<br>Loss<br>Loss<br>Loss<br>Loss<br>Loss                                                                                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 12/11/2023<br>11/30/2023<br>01/24/2024<br>01/24/2024<br><b>Check Date: 03/29/2</b><br>01/19/2024<br>02/20/2024 | MONROE TOWNSHIP(TRIJIF)<br>MANTUA TOWNSHIP<br>CLAYTON BOROUGH<br>WOODBURY CITY<br>024 Payee Name: INSPIRA HEALTH<br>GLASSBORO BOROUGH                                                         | M-PAIN MANAGEMENT<br>M-ORTHO/NEURO FEES<br>M-ORTHO/NEURO FEES<br>M-ORTHO/NEURO FEES<br>NETWORK URGENT CARE PC<br>M-OCCUPATIONAL MEDICINE                                                                    | Check Amount:                                                        | \$88.09<br>\$61.66<br>\$88.09<br>\$88.09<br><b>\$475.68</b>                                                                                                         | 2023-2023<br>2023-2023<br>2024-2024                                                                                                                                     | Loss<br>Loss<br>Loss                                                                                                                                                                                                                    |
| 11/30/2023<br>01/24/2024<br>01/24/2024<br><b>Check Date: 03/29/2</b><br>01/19/2024<br>02/20/2024               | MANTUA TOWNSHIP<br>CLAYTON BOROUGH<br>WOODBURY CITY<br>24 Payee Name: INSPIRA HEALTH<br>GLASSBORO BOROUGH                                                                                     | M-ORTHO/NEURO FEES<br>M-ORTHO/NEURO FEES<br>M-ORTHO/NEURO FEES<br>NETWORK URGENT CARE PC<br>M-OCCUPATIONAL MEDICINE                                                                                         | Check Amount:                                                        | \$61.66<br>\$88.09<br>\$88.09<br><b>\$475.68</b>                                                                                                                    | 2023-2023<br>2024-2024                                                                                                                                                  | Loss<br>Loss                                                                                                                                                                                                                            |
| 01/24/2024<br>01/24/2024<br><b>Check Date: 03/29/2</b><br>01/19/2024<br>02/20/2024                             | CLAYTON BOROUGH<br>WOODBURY CITY<br>024 Payee Name: INSPIRA HEALTH<br>GLASSBORO BOROUGH                                                                                                       | M-ORTHO/NEURO FEES<br>M-ORTHO/NEURO FEES<br>NETWORK URGENT CARE PC<br>M-OCCUPATIONAL MEDICINE                                                                                                               | Check Amount:                                                        | \$88.09<br>\$88.09<br><b>\$475.68</b>                                                                                                                               | 2024-2024                                                                                                                                                               | Loss                                                                                                                                                                                                                                    |
| 01/24/2024<br>Check Date: 03/29/2<br>01/19/2024<br>02/20/2024                                                  | WOODBURY CITY<br>24 Payee Name: INSPIRA HEALTH<br>GLASSBORO BOROUGH                                                                                                                           | M-ORTHO/NEURO FEES NETWORK URGENT CARE PC M-OCCUPATIONAL MEDICINE                                                                                                                                           | Check Amount:                                                        | \$88.09<br><b>\$475.68</b>                                                                                                                                          |                                                                                                                                                                         |                                                                                                                                                                                                                                         |
| <b>Check Date: 03/29/2</b><br>01/19/2024<br>02/20/2024                                                         | <b>Payee Name: INSPIRA HEALTH</b><br>GLASSBORO BOROUGH                                                                                                                                        | NETWORK URGENT CARE PC<br>M-OCCUPATIONAL MEDICINE                                                                                                                                                           | Check Amount:                                                        | \$475.68                                                                                                                                                            | 2024-2024                                                                                                                                                               | Loss                                                                                                                                                                                                                                    |
| 01/19/2024<br>02/20/2024                                                                                       | GLASSBORO BOROUGH                                                                                                                                                                             | M-OCCUPATIONAL MEDICINE                                                                                                                                                                                     | Check Amount:                                                        |                                                                                                                                                                     |                                                                                                                                                                         |                                                                                                                                                                                                                                         |
| 01/19/2024<br>02/20/2024                                                                                       | GLASSBORO BOROUGH                                                                                                                                                                             | M-OCCUPATIONAL MEDICINE                                                                                                                                                                                     |                                                                      | ¢400.00                                                                                                                                                             |                                                                                                                                                                         |                                                                                                                                                                                                                                         |
| 02/20/2024                                                                                                     |                                                                                                                                                                                               |                                                                                                                                                                                                             |                                                                      | ¢400.00                                                                                                                                                             |                                                                                                                                                                         |                                                                                                                                                                                                                                         |
|                                                                                                                | WOODBURY CITY                                                                                                                                                                                 | M-OCCUPATIONAL MEDICINE                                                                                                                                                                                     |                                                                      | \$129.39                                                                                                                                                            | 2024-2024                                                                                                                                                               | Loss                                                                                                                                                                                                                                    |
| Check Date: 03/29/2                                                                                            |                                                                                                                                                                                               |                                                                                                                                                                                                             |                                                                      | \$129.39                                                                                                                                                            | 2024-2024                                                                                                                                                               | Loss                                                                                                                                                                                                                                    |
| Check Date: 03/29/2                                                                                            |                                                                                                                                                                                               |                                                                                                                                                                                                             | Check Amount:                                                        | \$258.78                                                                                                                                                            |                                                                                                                                                                         |                                                                                                                                                                                                                                         |
|                                                                                                                | 24 Payee Name: PRINCETON BRAI                                                                                                                                                                 | IN AND SPINE CARE LLC                                                                                                                                                                                       |                                                                      |                                                                                                                                                                     |                                                                                                                                                                         |                                                                                                                                                                                                                                         |
| 12/21/2023                                                                                                     | BOROUGH OF NATIONAL PARK                                                                                                                                                                      | M-ORTHO/NEURO FEES                                                                                                                                                                                          |                                                                      | \$200.00                                                                                                                                                            | 2023-2023                                                                                                                                                               | Loss                                                                                                                                                                                                                                    |
|                                                                                                                |                                                                                                                                                                                               |                                                                                                                                                                                                             | Check Amount:                                                        | \$200.00                                                                                                                                                            |                                                                                                                                                                         |                                                                                                                                                                                                                                         |
| Check Date: 03/29/2                                                                                            | Payee Name: BTD RADIOLOGY                                                                                                                                                                     | AT SALEM PA                                                                                                                                                                                                 |                                                                      |                                                                                                                                                                     |                                                                                                                                                                         |                                                                                                                                                                                                                                         |
| LY 10/16/2023                                                                                                  | CARNEYS POINT TOWNSHIP                                                                                                                                                                        | M-DIAGNOSTICS                                                                                                                                                                                               |                                                                      | \$35.00                                                                                                                                                             | 2023-2023                                                                                                                                                               | Loss                                                                                                                                                                                                                                    |
|                                                                                                                |                                                                                                                                                                                               |                                                                                                                                                                                                             | Check Amount:                                                        | \$35.00                                                                                                                                                             |                                                                                                                                                                         |                                                                                                                                                                                                                                         |
| Check Date: 03/29/2                                                                                            | 24 Payee Name: FUSION HEALTHC                                                                                                                                                                 | CARE SOLUTIONS                                                                                                                                                                                              |                                                                      |                                                                                                                                                                     |                                                                                                                                                                         |                                                                                                                                                                                                                                         |
| 03/09/2023                                                                                                     | LOGAN TOWNSHIP                                                                                                                                                                                | M-DME/PROSTHETICS                                                                                                                                                                                           |                                                                      | \$812.00                                                                                                                                                            | 2023-2023                                                                                                                                                               | Loss                                                                                                                                                                                                                                    |
|                                                                                                                |                                                                                                                                                                                               |                                                                                                                                                                                                             | Check Amount:                                                        | \$812.00                                                                                                                                                            |                                                                                                                                                                         |                                                                                                                                                                                                                                         |
| Check Date: 03/29/2                                                                                            | 24 Payee Name: JEFFERSON UNIV                                                                                                                                                                 | <b>VERSITY PHYSICIANS OF NEW JERSI</b>                                                                                                                                                                      | ΞY                                                                   |                                                                                                                                                                     |                                                                                                                                                                         |                                                                                                                                                                                                                                         |
| LY 02/13/2024                                                                                                  | DEPTFORD TOWNSHIP                                                                                                                                                                             | M-PHYSICIAN FEES                                                                                                                                                                                            |                                                                      | \$81.97                                                                                                                                                             | 2024-2024                                                                                                                                                               | Loss                                                                                                                                                                                                                                    |
|                                                                                                                |                                                                                                                                                                                               |                                                                                                                                                                                                             | Check Amount:                                                        | \$81.97                                                                                                                                                             |                                                                                                                                                                         |                                                                                                                                                                                                                                         |
| Check Date: 03/29/2                                                                                            | 24 Payee Name: myMATRIXX                                                                                                                                                                      |                                                                                                                                                                                                             |                                                                      |                                                                                                                                                                     |                                                                                                                                                                         |                                                                                                                                                                                                                                         |
| 12/21/2023                                                                                                     | BOROUGH OF NATIONAL PARK                                                                                                                                                                      | M-PHARMACY                                                                                                                                                                                                  |                                                                      | \$76.99                                                                                                                                                             | 2023-2023                                                                                                                                                               | Loss                                                                                                                                                                                                                                    |
|                                                                                                                |                                                                                                                                                                                               |                                                                                                                                                                                                             | Check Amount:                                                        | \$76.99                                                                                                                                                             |                                                                                                                                                                         |                                                                                                                                                                                                                                         |
|                                                                                                                | 124 Payee Name: INSPIRA MEDICA                                                                                                                                                                | L CENTER MULLICA HILL                                                                                                                                                                                       |                                                                      | •                                                                                                                                                                   |                                                                                                                                                                         |                                                                                                                                                                                                                                         |
| Check Date: 03/29/2                                                                                            | •                                                                                                                                                                                             | M-ACUTE CARE HOSPITAL                                                                                                                                                                                       |                                                                      | \$269.30                                                                                                                                                            | 2023-2023                                                                                                                                                               | Loss                                                                                                                                                                                                                                    |
|                                                                                                                |                                                                                                                                                                                               |                                                                                                                                                                                                             | Check Amount:                                                        |                                                                                                                                                                     |                                                                                                                                                                         |                                                                                                                                                                                                                                         |
|                                                                                                                | eck Date: 03/29/20                                                                                                                                                                            |                                                                                                                                                                                                             | eck Date: 03/29/2024 Payee Name: INSPIRA MEDICAL CENTER MULLICA HILL | Check Amount:         Deck Date: 03/29/2024       Payee Name: INSPIRA MEDICAL CENTER MULLICA HILL       O3/09/2023       LOGAN TOWNSHIP       M-ACUTE CARE HOSPITAL | Check Amount:     \$76.99       Payee Name: INSPIRA MEDICAL CENTER MULLICA HILL     \$269.30       03/09/2023     LOGAN TOWNSHIP     M-ACUTE CARE HOSPITAL     \$269.30 | Check Amount:         \$76.99           Payee Name: INSPIRA MEDICAL CENTER MULLICA HILL         \$269.30         2023-2023           03/09/2023         LOGAN TOWNSHIP         M-ACUTE CARE HOSPITAL         \$269.30         2023-2023 |



| Claim<br>Number                                                           | Claimant                     | Type DOL                                            | Insured Name                     | Transaction                                                  | Туре                              | Payment<br>Amount | Policy<br>Period | Paymen<br>Type |
|---------------------------------------------------------------------------|------------------------------|-----------------------------------------------------|----------------------------------|--------------------------------------------------------------|-----------------------------------|-------------------|------------------|----------------|
| Check Numb                                                                | er: 28886                    | Check Date: 03/29/                                  | 2024 Payee Name: INSPIRA HEALTH  | H CENTER WOODBURY                                            |                                   |                   |                  |                |
| 2024317060                                                                | MEDICAL ON                   | ILY 10/15/202                                       | WOODBURY CITY                    | M-OCCUPATIONAL MEDICIN                                       | NE                                | \$876.92          | 2023-2023        | Loss           |
|                                                                           |                              |                                                     |                                  |                                                              | Check Amount:                     | \$876.92          |                  |                |
| Check Numb                                                                | er: 28887                    | Check Date: 03/29/                                  | 2024 Payee Name: STRIVE PHYSICA  | AL THERAPY SPECIALISTS LLC                                   |                                   |                   |                  |                |
| 2024319174                                                                | INDEMNITY                    | 11/08/2023                                          | 3 DEPTFORD TOWNSHIP              | M-PHYSICIAN FEES                                             |                                   | \$360.00          | 2023-2023        | Loss           |
| 2024321516                                                                | INDEMNITY                    | 12/11/2023                                          | 3 MONROE TOWNSHIP(TRIJIF)        | M-PHYSICIAN FEES                                             |                                   | \$180.00          | 2023-2023        | Loss           |
| 2024322505                                                                | INDEMNITY                    | 12/21/2023                                          | BOROUGH OF NATIONAL PARK         | M-PHYSICIAN FEES                                             |                                   | \$360.00          | 2023-2023        | Loss           |
| 2024324316                                                                | INDEMNITY                    | 01/19/2024                                          | 4 GLASSBORO BOROUGH              | M-PHYSICIAN FEES                                             |                                   | \$90.00           | 2024-2024        | Loss           |
| 2024325590                                                                | INDEMNITY                    | 02/01/2024                                          | WASHINGTON TOWNSHIP              | M-PHYSICIAN FEES                                             |                                   | \$180.00          | 2024-2024        | Loss           |
|                                                                           |                              |                                                     |                                  |                                                              | Check Amount:                     | \$1,170.00        |                  |                |
| Check Numb                                                                | er: 28888                    | Check Date: 03/29/                                  | 2024 Payee Name: ISO SERVICES IN | ٩C                                                           |                                   |                   |                  |                |
| 2020199828                                                                | INDEMNITY                    | 03/06/2020                                          | ) SWEDESBORO BOROUGH             | E-MISC ALL OTHER WC                                          |                                   | \$13.75           | 2020-2020        | Expense        |
|                                                                           |                              |                                                     |                                  |                                                              | Check Amount:                     | \$13.75           |                  |                |
| Check Numb                                                                | er: 28889                    | Check Date: 03/29/                                  | 2024 Payee Name: QUALCARE INC    |                                                              |                                   |                   |                  |                |
| 2024327356                                                                | MEDICAL ON                   | ILY 02/20/2024                                      | MONROE TOWNSHIP(TRIJIF)          | M-MEDICAL REHAB/NON VO                                       | DCATIONAL WC                      | \$565.00          | 2024-2024        | Loss           |
| 2024330047                                                                | MEDICAL ON                   | ILY 03/15/2024                                      | WOODBURY CITY                    | M-MEDICAL REHAB/NON VO                                       | DCATIONAL WC                      | \$565.00          | 2024-2024        | Loss           |
| 2024330085 MEDICAL ONLY                                                   |                              | ILY 07/13/202                                       | 3 WENONAH BOROUGH                | M-MEDICAL REHAB/NON VO                                       | M-MEDICAL REHAB/NON VOCATIONAL WC |                   | 2023-2023        | Loss           |
|                                                                           |                              |                                                     |                                  |                                                              | Check Amount:                     | \$1,695.00        |                  |                |
|                                                                           |                              |                                                     | Total of TRI                     | CTY MUN JIF IV Account                                       |                                   |                   |                  |                |
| Number of Cl<br>Number of Pa<br>Expense Pay<br>Legal Payme<br>Loss Paymer | ayments:<br>ments:<br>nts:   | 261<br>536<br>\$28,743.4<br>\$35,076.1<br>\$624,966 | 0                                | Total Payments:<br>First Check Number:<br>Last Check Number: | \$688,785.59<br>28629<br>28889    |                   |                  |                |
|                                                                           |                              |                                                     |                                  | Grand Total                                                  |                                   |                   |                  |                |
| Number of C<br>Number of Pa<br>Expense Pay<br>Legal Payme<br>Loss Payme   | ayments:<br>vments:<br>ents: | 261<br>536<br>\$28,743.4<br>\$35,076.1<br>\$624.966 | 0                                | Total Payments:<br>First Check Number:<br>Last Check Number: | \$688,785.59<br>28629<br>28889    |                   |                  |                |

Insurance Type(s): All Claimant Type(s): Coverage(s): 1617

## FY 2023 Dividend AELCF Member Allocation

### GLOUCESTER, SALEM & CUMBERLAND COUNTIES MUNICIPAL JOINT INSURANCE FUND AELCF MEMBER DATA FY 2024

|                               | E-JIF Dividend | FY 2024  | FY 2024    | FY 2024  | FY 2024    |
|-------------------------------|----------------|----------|------------|----------|------------|
|                               | 31-Jan-24      | February | 29-Feb-24  | March    | 31-Mar-24  |
|                               | Balance        | Interest | Balance    | Interest | Balance    |
| Alloway Township              | 5,954.38       | 13.15    | 5,967.53   | 14.87    | 5,982.40   |
| Carneys Point Township        | 14,162.30      | 31.28    | 14,193.57  | 35.37    | 14,228.94  |
| Clayton Borough               | 2,469.33       | 5.45     | 2,474.78   | 6.17     | 2,480.95   |
| Deptford Township             | 49,318.67      | 108.91   | 49,427.58  | 123.16   | 49,550.74  |
| East Greenwich Township       | 10,006.20      | 22.10    | 10,028.30  | 24.99    | 10,053.28  |
| Elk Township                  | 1,236.99       | 2.73     | 1,239.72   | 3.09     | 1,242.81   |
| Elsinboro Township            | 83.39          | 0.18     | 83.58      | 0.21     | 83.79      |
| Fairfield Township            | 11,579.37      | 25.57    | 11,604.94  | 28.92    | 11,633.85  |
| Franklin Township             | 5,446.82       | 12.03    | 5,458.85   | 13.60    | 5,472.45   |
| Glassboro Borough             | 6,715.40       | 14.83    | 6,730.23   | 16.77    | 6,747.00   |
| Greenwich Township            | 8,996.57       | 19.87    | 9,016.44   | 22.47    | 9,038.91   |
| Harrison Township             | 16,194.38      | 35.76    | 16,230.14  | 40.44    | 16,270.58  |
| Logan Township                | 11,116.15      | 24.55    | 11,140.70  | 27.76    | 11,168.46  |
| Lower Alloways Creek Township | 1,035.32       | 2.29     | 1,037.61   | 2.59     | 1,040.20   |
| Mannington Township           | 216.20         | 0.48     | 216.68     | 0.54     | 217.22     |
| Mantua Township               | 26,198.64      | 57.86    | 26,256.50  | 65.42    | 26,321.92  |
| Monroe Township               | 53,378.73      | 117.88   | 53,496.61  | 133.30   | 53,629.91  |
| Oldmans Township              | 3,313.21       | 7.32     | 3,320.53   | 8.27     | 3,328.80   |
| Paulsboro Borough             | 2,168.66       | 4.79     | 2,173.45   | 5.42     | 2,178.86   |
| Penns Grove Borough           | 9,002.73       | 19.88    | 9,022.62   | 22.48    | 9,045.10   |
| Pennsville Township           | 24,315.64      | 53.70    | 24,369.34  | 60.72    | 24,430.06  |
| Pilesgrove Township           | 7,230.35       | 15.97    | 7,246.32   | 18.06    | 7,264.37   |
| Pitman Borough                | 3,286.06       | 7.26     | 3,293.32   | 8.21     | 3,301.52   |
| Pittsgrove                    | 125,510.20     | 277.17   | 125,787.36 | 313.42   | 126,100.78 |
| Quinton Township              | 6,604.79       | 14.59    | 6,619.37   | 16.49    | 6,635.87   |
| Shiloh Borough                | 982.65         | 2.17     | 984.82     | 2.45     | 987.28     |
| South Harrison Township       | 4,454.46       | 9.84     | 4,464.30   | 11.12    | 4,475.42   |
| Stow Creek                    | 9,239.92       | 20.40    | 9,260.32   | 23.07    | 9,283.40   |
| Swedesboro Borough            | 3,784.66       | 8.36     | 3,793.02   | 9.45     | 3,802.47   |
| Upper Pittsgrove Township     | 6,391.62       | 14.11    | 6,405.74   | 15.96    | 6,421.70   |
| Washington Township           | 170,289.83     | 376.06   | 170,665.89 | 425.24   | 171,091.13 |
| Wenonah Borough               | 4,269.69       | 9.43     | 4,279.12   | 10.66    | 4,289.78   |
| Westville Borough             | 8,291.24       | 18.31    | 8,309.55   | 20.70    | 8,330.25   |
| Woodbury City                 | 20,930.80      | 46.22    | 20,977.02  | 52.27    | 21,029.29  |
| Woodbury Heights Borough      | 5,510.13       | 12.17    | 5,522.29   | 13.76    | 5,536.05   |
| Woodstown Borough             | 6,620.98       | 14.62    | 6,635.60   | 16.53    | 6,652.13   |
| Woolwich Township             | 5,588.39       | 12.34    | 5,600.73   | 13.96    | 5,614.69   |
|                               | 652,111.40     | 1,402.04 | 653,513.44 | 1,628.34 | 655,141.78 |

Former Members

#### GLOUCESTER, SALEM, CUMBERLAND COUNTIES MUNICIPAL JIF BILL LIST - April 2024

| Payable To:                                        | FY 2024    | FY 2023   | Appropriation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Description                                              |
|----------------------------------------------------|------------|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| 1 Risk Program Administrators LLC                  | 67.501.00  | 112020    | Prof Services/Administration                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | April 2024 Fees                                          |
| 2 Risk Program Administrators LLC                  | 40.99      |           | Misc/Postage/Copies/Faxes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | March 2024 Fees                                          |
| 3 Risk Program Administrators LLC                  | 80.49      |           | Safety Incentive Program                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | QR holders and app; split                                |
| 4 David DeWeese                                    | 10,138.00  |           | Prof Services/Attorney                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | April 2024 Fees                                          |
| 5 Qual-Lynx                                        | 47,604.00  |           | Prof Services/Claims Admin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | April 2024 Fees                                          |
| 6 Joyce Media                                      | 390.00     |           | Misc/JIF Website                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | April 2024 Fees                                          |
| 7 Christopher J. Winter Sr.                        | 1,907.00   |           | Training/Police Risk Services                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Law Enforcement Consultant-April 2024 Fee                |
| 8 Kris Kristie                                     | 447.00     |           | Misc/Recording Secretary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | April 2024 Fees                                          |
| 9 J.A. Montgomery Consulting                       | 19,160.00  |           | Prof Services/Safety Director                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | April 2024 Fees                                          |
| 10 J. A. Montgomery Consulting                     |            | 56,424.00 | Training/Right to Know                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 2023 RTK labeling services                               |
| 11 Wintsec Consulting LLC                          | 4,414.00   |           | Prof Services/Technology Risk Risk Risk Risk Risk Risk Risk Risk |                                                          |
| 12 Tom Tontarski                                   | 1,270.00   |           | Prof Services/Treasurer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | April 2024 Fees                                          |
| 13 Tom Tontarski                                   | 15.23      |           | Misc/Postage/Copies/Faxes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Virtual meeting March-cks sent; split                    |
| 14 Conner Strong & Buckelew                        | 1,005.00   |           | Prof Services/Underwriting Manager                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | April 2024 Fees                                          |
| 15 Debby Schiffer                                  | 5,108.00   |           | Wellness                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | April 2024 Fees                                          |
| 16 Apex Insurance Services c/o Lexington Insurance | 876,621.50 |           | EPL/POL Policy - Excess Insurance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                          |
| 17 ARC Reprographics                               | 405.00     |           | Misc/Printing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Safety Breakfast 4/2/24 handouts, Inv#282814             |
| 18 Auletto Caterers                                | 3,696.00   |           | Safety Incentive Program                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Safety Breakfast 4/2/24                                  |
| 19 Bowman & Company LLP                            |            | 12,350.50 | Prof Services/Auditor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Inv#115607 12/31 Auditor progressive billing             |
| 20 Bowman & Company LLP                            | 10,188.50  |           | Prof Services/Payroll Auditor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Inv#115608 2023 payroll auditor progressive billing      |
| 21 Conner Strong & Buckelew                        | 2,163.00   |           | · · · ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Exe Dir/Treasurer/Claims admin fidelity bond             |
| 22 Insight Public Sector SLED                      | 11,872.00  |           | EPL/CYBER/Cyber Risk Services                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | DBA Wizer; online cyber training, notification, phishing |
| 23 Iron Mountain                                   | 102.03     |           | Misc/Records Retention Service                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Inv#JJCH931; Storage 4/1-30/24; Service 2/21-3/26/24     |
| 24 William Walsh                                   | 600.00     |           | Safety Incentive Program                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Safety Breakfast Presentor                               |
| 25 Carneys Point Township                          |            | 4,200.00  | Safety Incentive Program                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Direct check reimbursement                               |
| 26 Borough of Clayton                              |            | 4,200.00  | Safety Incentive Program                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Direct check reimbursement                               |
| 27 Elk Township                                    |            | 3,000.00  | Safety Incentive Program                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Direct check reimbursement                               |
| 28 Township of Franklin                            |            | 4,300.00  | Safety Incentive Program                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Direct check reimbursement                               |
| 29 Fairfield Township                              |            | 3,000.00  | Safety Incentive Program                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Direct check reimbursement                               |
| 30 Borough of Glassboro                            |            | 5,250.00  | Safety Incentive Program                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Direct check reimbursement                               |
| 31 Greenwich Township                              |            | 3,950.00  | Safety Incentive Program                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Direct check reimbursement                               |
| 32 Harrison Township                               |            | 3,450.00  | Safety Incentive Program                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Direct check reimbursement                               |
| 33 Mannington Township                             |            | 2,250.00  | Safety Incentive Program                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Direct check reimbursement                               |
| 34 Township of Mantua                              |            | 4,050.00  | Safety Incentive Program                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Direct check reimbursement                               |
| 35 Monroe Township                                 |            | 5,250.00  | Safety Incentive Program                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Direct check reimbursement                               |

|    | 1                           | 1            |              |                                  |                                         |
|----|-----------------------------|--------------|--------------|----------------------------------|-----------------------------------------|
| 36 | Borough of Penns Grove      |              | 3,950.00     | Safety Incentive Program         | Direct check reimbursement              |
| 37 | Pennsville Township         |              | 4,300.00     | Safety Incentive Program         | Direct check reimbursement              |
| 38 | Pilesgrove Township         |              | 2,500.00     | Safety Incentive Program         | Direct check reimbursement              |
| 39 | Pilesgrove Township         | 235.03       |              | Wellness                         | Healthy foods-veggies/fruit             |
| 40 | Borough of Pitman           | 2,500.00     |              | EPL/CYBER/EPL/Cyber Incentive Pr | IT, Cyber upgrades/security             |
| 41 | Borough of Pitman           |              | 4,800.00     | Safety Incentive Program         | Direct check reimbursement              |
| 42 | Borough of Pitman           | 85.55        |              | Wellness                         | Stress Relief basket                    |
| 43 | Quinton Township            |              | 2,750.00     | Safety Incentive Program         | Direct check reimbursement              |
| 44 | South Harrison Township     |              | 3,000.00     | Safety Incentive Program         | Direct check reimbursement              |
| 45 | Upper Pittsgrove Township   |              | 2,250.00     | Safety Incentive Program         | Direct check reimbursement              |
| 46 | Township of Washington      |              | 5,500.00     | Safety Incentive Program         | Direct check reimbursement              |
| 47 | Borough of Wenonah          |              | 2,500.00     | Safety Incentive Program         | Direct check reimbursement              |
| 48 | West Deptford Township      |              | 5,250.00     | Safety Incentive Program         | Direct check reimbursement              |
| 49 | Hardenbergh Insurance Group | 53,211.00    |              | Risk Management Consultants      | 1st installment - Hopewell and Vineland |
| 50 | Henry D. Young, Inc.        | 1,343.00     |              | Risk Management Consultants      | 1st installment - Elsinboro             |
|    | Subtotals                   | 1,122,103.32 | 148,474.50   |                                  |                                         |
|    | JIF BILL LIST TOTAL         |              | 1,270,577.82 | ]                                |                                         |



9 Campus Drive – Suite 216 Parsippany, NJ 07054 *Tel* (201) 881-7632 *Fax* (201) 881-7633

Date: Friday March 22, 2024

To: Gloucester, Salem & Cumberland Counties Municipal Joint Insurance Fund

Subject: MEL March 2024 Report

**Management Committee:** This committee met on March 18<sup>th</sup> and discussed the following contracts and/or services that were up for renewal:

- **§ Fund Treasurer** Michael Zambito, has submitted his resignation notice as of July 1, 2024. The MEL will recognize and honor Mr. Zambito's years of service to the MEL at its June 10, 2024 meeting. In addition, a replacement candidate will be submitting a proposal for services; more information will be provided at the next meeting.
- **§** Joint Cash Management & Investment Program (JCMI) Professionals The Board of Fund Commissioners adopted a resolution authorizing award of Professional Service Agreement to Eagle Asset Management for Asset Manager, The Bank of New York for Custodial Services/Accounting and NW Financial Services as Financial Advisor.
- **§** Archivist The Board of Fund Commissioners adopted a resolution authorizing award of services to PolicyFind for Confidential Insurance Archaeology Services.
- **§** Southern New Jersey Marketing Consultant This contract is set to expire on May 8<sup>th</sup>; the Fund office in conjunction with the Qualified Purchasing Agent (QPA) issued Request for Proposals (RFP) and received one proposal from PJM Consultants LLC.

**Banking Services Request For Proposals (RFP):** The Joint Cash Management & Investment Program (JCMI) Operating Committee issued an RFP for Banking Services, which was due on January 17<sup>th</sup>. Responses were submitted by Citizens Bank (*incumbent*), Republic Bank and TD Bank. The JCMI Operating Committee reviewed the responses and made a recommendation to the MEL Investment Committee at their March 19<sup>th</sup> meeting; copies of those minutes were submitted for information. The Board of Fund Commissioners adopted a resolution awarding services to TD Bank effective July 1, 2024.

**Emergency Restoration Services Vendors**: The Fund's Qualified Purchasing Agent (QPA) prepared a Request for Qualifications (RFQ) #24-02 for Emergency Restoration Services, which was due on March 6<sup>th</sup>. Via this process, the MEL prequalifies vendors that provide emergency cleanup and restoration services to assist members in securing these services during an emergency. Eleven (11) responses were received and reviewed by the QPA; the QPA's bid summary report was submitted for information and noted all but one (1) vendor was "responsive". The Board of Fund Commissioners approved the list of Emergency Restoration Service vendors. A copy of the responses will be posted to the MEL website for members to access. Confirmed vendors are:

- 1. AllRisk Property Damage Experts
- 2. Belfor Property Restoration
- 3. CPR Restoration and Cleaning LLC
- 4. Ferreira Construction Co Inc.
- 5. Montana Construction Corp. Inc
- 6. National Restoration LLC

- 7. Nela Carpentry & Masonry
- 8. Rapid Recovery Services LLC
- 9. Timeless Restore LLC dba ServiceMaster by Timeless
- 10. Vaspro LLC dba SERVPRO

**MEL Committee Reports:** 

**Safety & Education Committee:** This committee met on February 9, 2024; submitted for information were the minutes of that meeting. Committee is scheduled to meet next on May 3, 2024 at 10:30AM. **Coverage Committee:** A meeting of this committee will be scheduled during the 2<sup>nd</sup> quarter of 2024.

**Legislative Committee:** This committee last met on February 23, 2024; submitted for information were the minutes of that meeting.

**Claims Committee:** This committee last met on January 8, 2024 and met after today's meeting. Minutes of these meetings are sent to the full MEL Board separately from the agenda.

**MEL Financials:** The preliminary year-end financials indicate the MEL will close out Fund Year 2023 with approximately \$14.3 million in surplus and is not expected to be issuing any additional assessments to the local JIFs.

**Residual Claims Fund (RCF):** Submitted for information was a copy of Commissioner Clarke's report on the RCF 2024 Reorganization meeting.

**Cyber JIF:** Submitted for information was the Cyber JIF report on the 2024 Reorganization meeting. The Cyber JIF met on March 21<sup>st</sup> and will be considering reimbursement to those JIFs that already contracted for cyber security control services at their next meeting.

**2023/2024 Elected Officials Seminar:** The MEL's Annual Elected Officials Seminar was held as part of the League of Municipalities Conference. Credits for attendees have been applied to the billing. The course has now been uploaded into the MEL's Learning Management System. Submitted for information were the directions to access the program.

**2024 MEL, MR HIF & NJCE JIF Educational Seminar:** The 14th annual seminar will be conducted virtually on 2 half-day sessions: Friday April 19<sup>th</sup> and Friday April 26<sup>th</sup> from 9AM to 12PM. The seminar qualifies for Continuing Educational Credits including CFO/CMFO, Public Works, Clerks, Insurance Producers and Purchasing Agents. There is no fee for employees, insurance producers, as well as personnel who work for services companies associated with the Municipal Excess Liability Joint Insurance Fund (MEL JIF), Municipal Reinsurance Health Insurance Fund (MR HIF) and New Jersey Counties Excess Joint Insurance Fund (NJCE JIF). A copy of the invitation, along with directions to register was submitted for information.

**MEL Memorandum/Notices to Members:** In early February, the Fund Attorney prepared a memorandum, which addressed "Recent Trends in Billboard Litigation". The memo included some information to assist members in evaluating billboard litigation and existing sign ordinances that may require revisions.

**2024 Financial Disclosures:** JIF Commissioners should anticipate the online filing of the Financial Disclosure forms inclusive of any other municipal related positions that require filing. It is anticipated the Division of Local Government Services will distribute a notice with filing instruction in March with a deadline to file by April 30th.

**Retirement Acknowledgement:** Donna Setzer of QualCare, the MEL's Managed Care Organization announced her retirement as of March 31<sup>st</sup> and was acknowledged for her years of service on the MEL account.

**NJ Code of Conduct for Youth Sporting Events:** Fund Attorney summarized a claim arising out of the NJ Code of Conduct for Youth Sporting Events statute. In 2022, the state amended the law to establish guidelines for conduct of behavior by any student, coach, official, parent or other person, which could result in a ban on attending future sport events and includes a remediation process for the banned individual.

**Order of Meetings:** The Board was asked to consider changing the order of meetings, so the MEL meeting occurs first since the RCF and EJIF typically adopt initiatives led by the MEL. In addition, consideration was asked to hold the MEL and RCF claims meetings on separate days than the regular JIF meetings.

**Executive Session**: An executive session was held to discuss a claim matter. Board confirmed authorization given to Fund Attorney to meet with the town, along with one or two members of the board.



## **Municipal Excess Liability Residual Claims Fund**

9 Campus Drive – Suite 216 Parsippany, New Jersey 07054 *Tel* (201) 881-7632 *Fax* (201) 881-7633

March 22, 2024

Memo to: Gloucester, Salem & Cumberland Counties Municipal Joint Insurance Fund

Re: RCF March Meeting

**2024 Cash Management Plan Amendment:** Resolution 2-24 Establishing the RCF 2024 Fiscal Management Plan, adopted at the RCF January reorganizational meeting, was amended to include an additional claims signatory from Qual-Lynx.

**Crime Bond Renewal:** The Board passed a motion to renew Selective Insurance policy for commercial crime coverage for the Fund's Executive Director, Treasurer and Claims as of 5/1/2024 for a premium of \$1,514.00. The policy was enhanced to include additional coverages for 2024.

**Financial Disclosures:** JIF Fund Commissioners should anticipate the online filing of the Financial Disclosure forms in April.

**Claims Committee:** The Claims Review Committee met on January 8, 2024 and the morning of the Commissioner's meeting.

**Next Meeting:** The next meeting of the RCF is scheduled for June 10, 2024 at 10:30 AM at Forsgate Country Club.



# New Jersey Municipal Environmental Risk Management Fund

9 Campus Drive, Suite 216 Parsippany, New Jersey 07054 *Tel* (201) 881-7632 *Fax* (201) 881-7633

DATE: March 22, 2024

TO: Gloucester, Salem & Cumberland Counties Municipal Joint Insurance Fund

SUBJECT: Summary of Topics Discussed at E-JIF Meeting

**REVISED 2024 BUDGET AND RELATED 2024 PROFESSIONAL FEE AMENDMENTS:** The EIJE 2024 budget that was adorted at the January 8, 2024 meeting was been revised to reflect

The EJIF 2024 budget that was adopted at the January 8, 2024 meeting was been revised to reflect a new member, Willingboro MUA, who joined February 1, 2024. The change is .05% and does not need to be filed with the state. The change in membership slightly changed the professional fees for Fund Attorney, Executive Director, Underwriting Managers, Environmental Services and Claims Administrator. A motion was passed to adopt the amended budget and approve the changes for the mentioned Fund professionals. A motion was passed to adopt the amended budget and approve the changes for the mentioned Fund professionals.

**BANKING SERVICES REQUEST FOR PROPOSALS (RFP):** The MEL's Joint Cash & Management Investment Program (JCMI) oversaw the release of an RFP for banking services and later this morning the MEL will discuss the appointment. At our next meeting in June the EJIF will discuss the outcome of the MEL's decision and decide if the Fund will follow the MEL's lead. No action was taken at the March meeting.

**FINANCIAL DISCLOSURES**: JIF Commissioners should anticipate the online filing notice of the Financial Disclosure forms inclusive of any other municipal related positions that require filing before the deadline of April 30<sup>th</sup>.

**NEXT MEETING -** The next meeting of the EJIF is scheduled for Monday June 10, 2024 at Forsgate Country Club, Monroe Twp, N.J



NEW JERSEY CYBER RISK MANAGEMENT FUND

9 Campus Drive – Suite 216 Parsippany, NJ 07054 Tel 201.881.7632

**Date:** March 21, 2024

**To:** Gloucester, Salem & Cumberland Counties Municipal Joint Insurance Fund

**Banking Services:** The Cyber JIF will review the MEL's decision to appoint a new banking services provider and consider if they will follow the MEL's lead.

**Cyber Security Framework:** Using feedback and questions received from the membership over the past year, the Underwriting Manager made updates to the Cyber Security Framework to better assist members in obtaining Basic, Intermediate or Advanced cyber compliance. Members are encouraged to continue sharing their feedback. The Underwriting Manager's office notified Fund Commissioners and Risk Management Consultants that the updates have been posted on the Cyber JIF website in the Secure Documents section for members only.

**Cyber Website:** The Cyber JIF website has had an increase in activity and member login requests has increased as well. Login requests are vetted through each JIF's Executive Director's office.

**Cyber Controls:** D2 Cybersecurity, the JIF's vender for cyber training, phishing and vulnerability scanning, began launching their training program to registered members in February. Deadline to complete the training is June 30, 2024.

**Cyber Best Banking Practice Reference**: The following wording was shared for members wishing to update their cash management plan to meet the MEL's JCMI requirement. This language ensures that should the JCMI make any changes, that every municipality does not have to amend their plans, it is automatically incorporated: "The Township will follow the MEL's JCMI Banking Best Practices governing Wire Transfers, ACH Payments and Check Issuance. The Finance Office will further confirm that its financial institutions adhere to these requirements."

**JIF Reimbursements:** A motion was passed to consider reimbursement for JIF's that already have contracted cyber control services, and a resolution will be presented next month.

**Timing of Collecting Deductibles**: XL, the excess carrier, bills the Cyber JIF as it makes payments until its deductible is met. The Board passed a motion to bill back the deductible to the member on a quarterly basis until the deductible is exhausted rather than at the close of the claim.

**Financial Disclosures**: The New Jersey Department of Community Affairs will soon open their website for financial disclosures. The Fund office will notify Fund Commissioners and the deadline to complete filing is April 30<sup>th</sup>.

Next Meeting Date: Thursday, May 16, 2024 at 3:30 PM via video / audio teleconference.

# GLOUCESTER, SALEM, CUMBERLAND COUNTIES MUNICIPAL JOINT INSURANCE FUND RESOLUTION #2024-\_\_\_\_

#### RESOLUTION AUTHORIZING THE RELEASE OF FUND YEAR 2021 CLOSED SESSION EXECUTIVE CLAIMS COMMITTEE MEETING MINUTES AS RECOMMENDED BY THE FUND SOLICITOR

WHEREAS, the Gloucester, Salem, Cumberland Counties Municipal Joint Insurance Fund has been organized pursuant to N.J.S.A. 40A:10-36 et. seq.; and

**WHEREAS**, the Gloucester, Salem, Cumberland Counties Municipal Joint Insurance Fund is duly constituted as a Municipal Self Insurance Fund to provide insurance coverage to its member municipalities; and

**WHEREAS**, the Gloucester, Salem, Cumberland Counties Municipal Joint Insurance Fund is subject to the provisions of NJSA 10:4-6 the "Open Public Meetings Act"; and

**WHEREAS**, in 2021 the Executive Committee, during Executive Claims Committee scheduled meetings of the Fund, deemed it necessary to enter into a closed session to discuss matters affecting the safety and property of the public and to discuss pending or anticipated litigation and/or contract negotiations as authorized by NJSA10:4-12; and

**WHEREAS**, in accordance with NJSA10:4-14 minutes of these Executive Claims closed sessions were transcribed by the Fund Recording Secretary and approved by the Executive Committee; and

**WHEREAS**, in correspondence dated February 15, 2024, the Fund Recording Secretary requested that the Fund Solicitor review the closed session meeting minutes from Fund Year 2021 to make a determination as to whether any of the redacted minutes could be released to the public; and

**WHEREAS**, in correspondence dated April 1, 2024, a copy of which is attached hereto and incorporated herein by reference, the Fund Solicitor advised the Executive Director's Office that previously redacted sections of the Closed Session Minutes from the 2021 Executive Claims Committee Meetings can now be released to the public in their entirety;

**NOW THEREFORE BE IT RESOLVED,** by the Commissioners of the Gloucester, Salem Cumberland Counties Municipal Joint Insurance Fund that the Closed Session Minutes from the 2021 Executive Claims Committee Meetings can be released to the public in their entirety;

**BE IT FURTHER RESOLVED** that a copy of this Resolution by forwarded to the Fund Recording Secretary and Executive Director for their knowledge and action as required.

This Resolution was duly adopted by the Gloucester, Salem Cumberland Counties Municipal Joint Insurance Fund at a public meeting held on April 22, 2024.

#### GLOUCESTER, SALEM, CUMBERLAND COUNTIES MUNICIPAL JOINT INSURANCE FUND

Attest:

Robert Diaz, Secretary

By: \_\_\_

Karen Sweeney, Chairperson



DAVID S. DEWEESE, ESQUIRE david@deweeselawfirm.com

D. SCOTT DEWEESE, II, ESQUIRE scott@deweeselawfirm.com

JOHN AMENHAUSER, ESQUIRE john@deweeselawfirm.com

Of Counsel MICHELLE L. DEWEESE, ESQUIRE michelle@deweeselawfirm.com

Phone: (609) 522-5599 Facsimile: (609) 522-3003 www.DeWeeseLawFirm.com

April 1, 2024

Paul A. Forlenza, Executive Director, TRICOJIF ARTHUR J. GALLAGHER RISK MGT. SERVICES, INC. P.O. Box 530 6000 Sagemore Drive, Suite 6203 Marlton, New Jersey 08053

[via paul\_forlenza@riskprogramadministrators.com]

### RE: <u>TRICOJIF 2021 Closed Session Meeting Minutes</u> <u>TRICOJIF 2021 Executive Claims Closed Session Meeting Minutes</u>

Dear Paul:

Please be advised that I have reviewed the remaining redaction from the Closed Session Meeting Minutes from the Fund Year 2021 (January through December) and based upon my review of that redaction to the September 27, 2021 minutes regarding the *Dean v. Glassboro* matter, the minutes can be released in their entirety.

If you have any questions, or need for additional information please do not hesitate to contact me.

Very truly yours, THE DEWEESE LAW FIRM, P.C.

David S. DeWeese *Dictated not read* 

DSD/b

cc:

Tracy Forlenza, Recording Secretary, TRICOJIF Kris Kristie, Sr. Account Representative, Risk Program Administrators Kamini Patel, MBA, CIC, CPCU, Pooling Administrator Chris Roselli, Acct. Mgt., Qual-Lynx Karen Sweeney, TRICOJIF Fund Chair

# GLOUCESTER, SALEM, CUMBERLAND COUNTIES MUNICIPAL JOINT INSURANCE FUND RESOLUTION #2024-\_\_\_\_

#### RESOLUTION AUTHORIZING THE RELEASE OF FUND YEAR 2022 CLOSED SESSION EXECUTIVE CLAIMS COMMITTEE MEETING MINUTES AS RECOMMENDED BY THE FUND SOLICITOR

WHEREAS, the Gloucester, Salem, Cumberland Counties Municipal Joint Insurance Fund has been organized pursuant to N.J.S.A. 40A:10-36 et. seq.; and

**WHEREAS**, the Gloucester, Salem, Cumberland Counties Municipal Joint Insurance Fund is duly constituted as a Municipal Self Insurance Fund to provide insurance coverage to its member municipalities; and

**WHEREAS**, the Gloucester, Salem, Cumberland Counties Municipal Joint Insurance Fund is subject to the provisions of NJSA 10:4-6 the "Open Public Meetings Act"; and

**WHEREAS**, in 2022 the Executive Committee, during Executive Claims Committee scheduled meetings of the Fund, deemed it necessary to enter into a closed session to discuss matters affecting the safety and property of the public and to discuss pending or anticipated litigation and/or contract negotiations as authorized by NJSA10:4-12; and

WHEREAS, in accordance with NJSA10:4-14 minutes of these Executive Claims closed sessions were transcribed by the Fund Recording Secretary and approved by the Executive Committee; and

**WHEREAS**, in correspondence dated February 15, 2024, the Fund Recording Secretary requested that the Fund Solicitor review the closed session meeting minutes from Fund Year 2022 to make a determination as to whether any of the redacted minutes could be released to the public; and

**WHEREAS**, in correspondence dated April 1, 2024, a copy of which is attached hereto and incorporated herein by reference, the Fund Solicitor advised the Executive Director's Office that previously redacted sections of the Closed Session Minutes from the 2022 Executive Claims Committee Meetings can now be released to the public in their entirety;

**NOW THEREFORE BE IT RESOLVED,** by the Commissioners of the Gloucester, Salem Cumberland Counties Municipal Joint Insurance Fund that the Closed Session Minutes from the 2022 Executive Claims Committee Meetings can be released to the public in their entirety;

**BE IT FURTHER RESOLVED** that a copy of this Resolution by forwarded to the Fund Recording Secretary and Executive Director for their knowledge and action as required.

This Resolution was duly adopted by the Gloucester, Salem Cumberland Counties Municipal Joint Insurance Fund at a public meeting held on April 22, 2024.

#### GLOUCESTER, SALEM, CUMBERLAND COUNTIES MUNICIPAL JOINT INSURANCE FUND

Attest:

Robert Diaz, Secretary

By: \_\_\_

Karen Sweeney, Chairperson



DAVID S. DEWEESE, ESQUIRE david@deweeselawfirm.com

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April 1, 2024

Paul A. Forlenza, Executive Director, TRICOJIF ARTHUR J. GALLAGHER RISK MGT. SERVICES, INC. P.O. Box 530 6000 Sagemore Drive, Suite 6203 Marlton, New Jersey 08053

[via paul\_forlenza@riskprogramadministrators.com]

### RE: <u>TRICOJIF 2022 Closed Session Meeting Minutes</u> <u>TRICOJIF 2022 Executive Claims Closed Session Meeting Minutes</u>

Dear Paul:

Please be advised that I have reviewed the remaining redactions from the Closed Session Meeting Minutes from the Fund Year 2022 (January through December) and based upon my review of those redactions to the February 28, 2022 and May 23, 2022 minutes, the minutes can now be released in their entirety.

If you have any questions, or need for additional information please do not hesitate to contact me.

Very truly yours, THE DEWEESE LAW FIRM, P.C.

David S. DeWeese *Dictated not read* 

DSD/b

cc:

Tracy Forlenza, Recording Secretary, TRICOJIF Kris Kristie, Sr. Account Representative, Risk Program Administrators Kamini Patel, MBA, CIC, CPCU, Pooling Administrator Chris Roselli, Acct. Mgt., Qual-Lynx Karen Sweeney, TRICOJIF Fund Chair

# GLOUCESTER, SALEM, CUMBERLAND COUNTIES MUNICIPAL JOINT INSURANCE FUND RESOLUTION #2024-\_\_\_\_

#### RESOLUTION AUTHORIZING THE RELEASE OF FUND YEAR 2023 CLOSED SESSION EXECUTIVE CLAIMS COMMITTEE MEETING MINUTES AS RECOMMENDED BY THE FUND SOLICITOR

WHEREAS, the Gloucester, Salem, Cumberland Counties Municipal Joint Insurance Fund has been organized pursuant to N.J.S.A. 40A:10-36 et. seq.; and

**WHEREAS**, the Gloucester, Salem, Cumberland Counties Municipal Joint Insurance Fund is duly constituted as a Municipal Self Insurance Fund to provide insurance coverage to its member municipalities; and

**WHEREAS**, the Gloucester, Salem, Cumberland Counties Municipal Joint Insurance Fund is subject to the provisions of NJSA 10:4-6 the "Open Public Meetings Act"; and

**WHEREAS**, in 2023 the Executive Committee, during Executive Claims Committee scheduled meetings of the Fund, deemed it necessary to enter into a closed session to discuss matters affecting the safety and property of the public and to discuss pending or anticipated litigation and/or contract negotiations as authorized by NJSA10:4-12; and

**WHEREAS**, in accordance with NJSA10:4-14 minutes of these Executive Claims closed sessions were transcribed by the Fund Recording Secretary and approved by the Executive Committee; and

**WHEREAS**, in correspondence dated February 15, 2024, the Fund Recording Secretary requested that the Fund Solicitor review the closed session meeting minutes from Fund Year 2023 to make a determination as to whether any of these minutes could be released to the public; and

WHEREAS, in correspondence dated April 1, 2024, a copy of which is attached hereto and incorporated herein by reference, the Fund Solicitor advised the Executive Director's Office that the Closed Session Minutes from the 2023 Executive Claims Committee Meetings can be released to the public in their entirety, except for the following specific sections of these minutes, as the matters discussed are still unresolved the Fund Solicitor advised the Executive Director's Office that the Closed Session Minutes from the 2023 Executive Claims Committee Meetings can be released in entirety;

**NOW THEREFORE BE IT RESOLVED,** by the Commissioners of the Gloucester, Salem Cumberland Counties Municipal Joint Insurance Fund that the Closed Session Minutes from the 2023 Executive Claims Committee Meetings can be released to the public in their entirety;

**BE IT FURTHER RESOLVED** that a copy of this Resolution by forwarded to the Fund Recording Secretary and Executive Director for their knowledge and action as required.

This Resolution was duly adopted by the Gloucester, Salem Cumberland Counties Municipal Joint Insurance Fund at a public meeting held on April 22, 2024.

#### GLOUCESTER, SALEM, CUMBERLAND COUNTIES MUNICIPAL JOINT INSURANCE FUND

Attest: \_

Robert Diaz, Secretary

By: \_\_\_

Karen Sweeney, Chairperson



DAVID S. DEWEESE, ESQUIRE david@deweeselawfirm.com

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April 1, 2024

Paul A. Forlenza, Executive Director, TRICOJIF ARTHUR J. GALLAGHER RISK MGT. SERVICES, INC. P.O. Box 530 6000 Sagemore Drive, Suite 6203 Marlton, New Jersey 08053

[via paul\_forlenza@riskprogramadministrators.com]

### RE: <u>TRICOJIF 2023 Closed Session Meeting Minutes</u> <u>TRICOJIF 2023 Executive Claims Closed Session Meeting Minutes</u>

Dear Paul:

Please be advised that I have reviewed the Closed Session Meeting Minutes from the Fund Year 2023 (January through December) and based upon my review of those minutes, the minutes can be released in their entirety.

If you have any questions, or need for additional information, please do not hesitate to contact me.

Very truly yours, THE DEWEESE LAW FIRM, P.C.

David S. DeWeese

DSD/b cc:

Tracy Forlenza, Recording Secretary, TRICOJIF Kris Kristie, Sr. Account Representative, Risk Program Administrators Kamini Patel, MBA, CIC, CPCU, Pooling Administrator Chris Roselli, Acct. Mgt., Qual-Lynx Karen Sweeney, TRICOJIF Fund Chair