



Riverside County Works 501(C)3

Zoom Online Video/Audio Conference

Meeting ID: 919 9310 7328 **Password:** 92507

Online: <https://zoom.us/j/91993107328?pwd=VGZXYmNWaVQ0UzQwbktXdzJxbTV3dz09>

Phone: (877) 853-5247 or (888) 788-0099

One tap mobile: +16699009128,,91993107328#,,1#,92507#

Board of Directors Virtual Committee Meeting

**October 21, 2020
10:30 a.m. - 11:30 a.m.**

Participants are advised that by engaging in meeting telephonically or electronically they acknowledge that input may be recorded, such recording is subject to inspection pursuant to the California Public Records Act.

Riverside County Works 501(c)(3)



Riverside Workforce Development Center
1325 Spruce Street, Room 4A - Riverside, CA

Meeting Agenda

October 21, 2020
10:30 a.m. – 11:30 a.m.

I WELCOME

A. Call to Order

Jamil Dada

II ACTION ITEMS

A. Approve the minutes from August 19, 2020

All

III DISCUSSION ITEM

- A. 2019/2020 Annual Report
- B. Youth Entrepreneur Update

Leslie Trainor
Leslie Trainor

IV PUBLIC COMMENTS

The WIOA Title I financially assisted program or activity is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Please call 951.955.3100, 951.955.3744 TTY, CA Relay 711, or ADACoordinator@rivcoeda.org 5 to 7 days in advance.

PUBLIC NOTICE

While the WDB Meetings are open to the public, time constraints limit the WDB's ability to permit open discussions with members of the audience. Persons requesting to address the WDB on matters not on the agenda but are within the jurisdiction of the WDB should do so under the agenda item Public Comments. Persons requesting to address the WDB on an agenda item should register with staff prior to the meeting. The Chair will impose a 3-minute time limit on all speakers addressing the WDB.

NON-EXEMPT MATERIALS

Non-exempt materials related to an item on this agenda submitted to the Workforce Development Board after distribution of the agenda packet are available for public inspection on the Riverside County Economic Development Agency Workforce Division's website at www.rivcoeda.com.

POSTED MATERIALS

Such documents are also available on the Riverside County Economic Development Agency Board Division's website at www.rivcoeda.com subject to staff's ability to post the documents before the meeting.

Jamil Dada
WDB Chairperson

Carrie Harmon
WDB Executive Director



Patrick Ellis
WDB Vice Chairperson

Leslie Trainor
WDB Deputy Director

Infinite Opportunity, Lasting Prosperity

Riverside County Works August 19, 2020

WDB Chair Jamil Dada called the meeting to order at 9:32 a.m.

Members in Attendance

Jamil Dada	Patrick Ellis	Mary Jo Ramirez	Morris Myers
Francisca Hernandez			

Guests

Julissa			
---------	--	--	--

Staff

Heidi Marshall	Carrie Harmon	Leslie Trainor	Jasmine Guerrero
Rilla Jacobs	Tammy Mathis	Maira Durazo	Loren Sims
Leah Deslate-Soliva	Carolina Garcia	Cathy Lovell	

Action Item: Approve the Minutes from June 17, 2020

Motion:

Moved by	Mary Jo Ramirez	Second by	Patrick Ellis	Abstain	None
Vote	Aye	5	No	0	Abstain
Status	Approved				

Reports:

Activities Year-to-Date Financial Status Report

Leslie Trainor	<p>Leslie presented the Riverside County Works Statement of Financial Activities and gave an overview of the revenues and expenses incurred for this year. The Jamil Dada Youth Character Excellence Award (JDYCEA) was the largest expense. Because this year the event was held after the fiscal closing in June, we are still waiting for final adjustments to the expenses. Jamil informed the board the Moreno Valley Rotary Club will sending in its contribution of \$500.00 for the JDYCEA.</p> <p>Members briefly discussed their goal of growing funds to be able to have endowments to assist in revenue growth. Having unrestricted fund balances will allow our nonprofit to help in other activities.</p> <p>Jamil mentioned how disappointed Congressmen Calvert and Takano were to hear the Youth Advocacy will not be traveling to Washington D.C. this year. They suggested we provide a virtual meeting with their offices and include Senators Feinstein and Ruiz.</p>
----------------	--

Discussion Item: Strategic Planning

Discussion

JDYCEA	<p>Mary Jo discussed how well the virtual event was received and the support it obtained from the attendees. This was a good way to stay connected to our legislators and our community. We should send out reminders and begin collecting for next year's event. Carrie suggested a video highlight of the event be created and sent to the sponsors. Jamil informed everyone the Press Enterprise will run a Press Release of the event in its community section.</p>
Identifying Workforce Developments Needs and Gaps	<p>Carrie – After COVID -19 dies down our fund-raising focus should be on supporting youth and small business. Mary Jo commented on the struggles young adults are experiencing financially, emotionally, and mentally and the COVID crisis continues. CFCLC is encouraging all of their clients to take advantage of any training and educational opportunities they can during this period to help them feel supported. The mental health of young adults is also a concern.</p>

	<p>Jamil asked Francisca if her hospital was still hiring youth during the COVID emergency. She responded they are beginning to open up some of their internships. We are seeing mass exodus of healthcare workers who have concerns for their family's safety and childcare challenges. We are working with staff to give them more flexibility. We have large openings for hiring so we will be hiring and training internally.</p> <p>Francisca will also work with her group to fund raise for the JDYCEA.</p>
Establishing targeted Initiatives and Funding Goals	<p>Carrie spoke on expanding entrepreneurial opportunities for youth. Patrick agreed, any youth with a business idea should be encouraged and supported. He stressed workforce should focus a little more concentration on this idea. More conversations were held on this idea and Mary Jo suggested the Chambers could be part of the process by showing youth how to start a business, write a business plan, and find seed money to finance it. Patrick suggested the chambers be used as mentors to fill in gaps. Leslie suggested RivCoWorks would be better able to assist with launching entrepreneurs. Mary Jo suggested having one of the JDYCEA be used for entrepreneurial idea.</p> <p>Jamil opened a discussion on identifying other nonprofits and business who maybe able to assist with obtain more funding for RivCoWorks. Mary Jo suggested we begin creating a formal program to present to possible donors and sponsors. Leslie asked Mary Jo to send her information so she could begin crafting a program. We will create, program indicators, a budget, and a scope-of-work.</p>
Youth Coordinator	<p>Carolina thanked everyone for attending the virtual JDYCEA event. She is working on having highlights of the event created to be posted on the website. The awards and trophies will be distributed personally to the winners.</p>

Public Comments	
	None

Adjourned: 10:22



Riverside County Works 501(c)(3)
2019/2020 Annual Report

A 501(c)(3) Non-Profit Public Benefit Corporation

1325 Spruce St., Suite 400, Riverside, CA 92507 ■ T: 951.955.3053 ■ RiversideCountyWorks@rivco.org

Annual Report

Fiscal Year 2019-20

Pursuant to the Bylaws of Riverside County Works (RCW), which were adopted by the RCW Board of Directors (Board) on April 27, 2016, the Board shall cause an Annual Report to be sent to each Director within 120 days after the end of the corporation's fiscal year. The purpose of such report is to summarize the corporation's activities during the previous fiscal year.

Included in this Annual Report is an impact summary of the corporation's operations for fiscal year 2019-20; a financial summary of the corporation's activities for fiscal year 2019-20, if applicable; an annual review of RCW's Risk Management Plan.

Impact Summary

Through its programs and services, RCW executes its charitable purpose of supporting and promoting the Riverside County workforce development system. Following is a summary of the impact of RCW's programs and services during fiscal year 2019-20:

- \$58,200 in fundraising dollars pledged/raised for 2019 Jamil Dada Character of Excellence Youth Event.
- Ten \$2,500 scholarships given to selected 2019 awardees for a total of \$25,000 – Scholarships were dispersed to awardees in July 2019.
- Awarded \$25,000 Communities Helping Communities Grant.

Financial Summary

Attached hereto as **Exhibit A** are RCW's Financial Statements for Fiscal Year Ended June 30, 2020, which includes the following information:

1. The assets at of the end of fiscal year 2019-20;
2. Revenue or receipts during fiscal year 2019-20;
3. Expenses or disbursements during fiscal year 2019-20; and

Annual Statement of Transaction or Indemnification

Pursuant to California Corporations Code §§6321 and 6322, unless otherwise indicated in the Bylaws, an Annual Statement of Transaction or Indemnification shall be furnished to the RCW Board of Directors disclosing any covered transaction during the previous fiscal year involving more than fifty thousand dollars (\$50,000), or which was one of a number of covered transactions in which the same interested person had a direct or indirect material financial interest, and which transactions in the aggregate involved more than fifty thousand dollars (\$50,000).

A 501(c)(3) Non-Profit Public Benefit Corporation

1325 Spruce St., Suite 400, Riverside, CA 92507 ■ T: 951.955. 3053 ■ RiversideCountyWorks@rivco.org



RCW staff and Officers are not aware of any covered transactions during fiscal year 2019-20. Therefore, no Statement of Transaction or Indemnification is required for fiscal year 2019-20.

Risk Management

As part of RCW's Risk Management Plan, the corporation's insurance policies are assessed annually to ensure that they still meet the needs of the corporation. RCW's insurance policy was procured through the Nonprofit's Insurance Alliance of California. The insurance declaration page for coverage period March 31, 19 to March 1, 2020 is attached hereto as **Exhibit B**

The policy meets the needs of the corporation and satisfies the requirements of California Corporation's Code §§5047.5, 5238 and 5239. No changes to RCW's insurance coverage are recommended at this time.



Exhibit A

Financial Statements for Fiscal Year Ended June 30, 2020

A 501(c)(3) Non-Profit Public Benefit Corporation

1325 Spruce St., Suite 400, Riverside, CA 92507 ■ T: 951.955. 3053 ■ RiversideCountyWorks@rivco.org

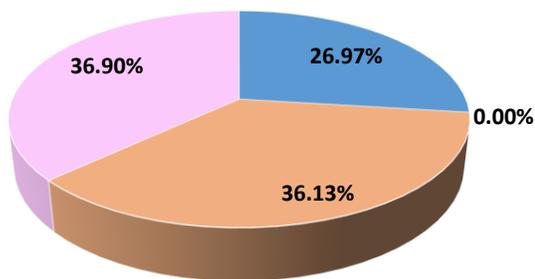


Riverside County Works
Statement of Financial Activities
 For the 12-Months Period Ended June 30, 2020

		<i>Actuals</i> <i>FY 19/20</i> <i>As of 06.30.2020</i>
Cash on Hand - Beginning Balance		89,014
Revenues		
Jamil Dada Character Excellence Youth Sponsorships		18,662
SoCal Gas (Homeless Veterans Employment Assistance Program)		-
SoCal Gas (Communities Helping Communities)		25,000
Valley-Wide Employment Expo		25,537
Total Revenues:	<i>Sch. - I</i>	<u>69,199</u>
Expenses		
Jamil Dada Character Excellence Youth Award Scholarships		25,658
Dues, Fees, Insurance: Insurance, Bank Fee, Filing		2,765
Jamil Dada Character Excellence Youth Awards Event Expense		10,979
Miscellaneous: Office Supplies, Meals & Entertainment		23
Total Expenses:	<i>Sch. - II</i>	<u>39,425</u>
Cash on Hand - Ending Balance * (UnionBank)		<u><u>118,788</u></u>

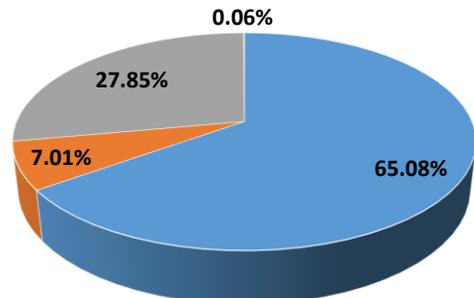
For the 12-Months Period Ended June 30, 2020

Actual Revenues



- Jamil Dada Character Excellence Youth Sponsorships
- SoCal Gas (Homeless Veterans Employment Assistance Program)
- SoCal Gas (Communities Helping Communities)
- Valley-Wide Employment Expo

Actual Expenses



- Jamil Dada Character Excellence Youth Award Scholarships
- Dues, Fees, Insurance: Insurance, Bank Fee, Filing
- Jamil Dada Character Excellence Youth Awards Event Expense
- Miscellaneous: Office Supplies, Meals & Entertainment

Schedule - I

**Riverside County Works
Detailed Revenue List**

For the 12-Months Period Ended June 30, 2020

	FY19/20
<i>Name of Sponsor</i>	<i>As of 06.30.2020</i>
Jamil Dada Character Excellence Youth Award Scholarships	
A Layne Arthur & Julie T Arthur	100.00
Board of Supervisor - 1st District	1,000.00
Board of Supervisor - 2nd District	1,500.00
California Family Life Center	1,000.00
City of Moreno Valley	1,000.00
Eventbrite, Inc	1,261.71
Lewis Management Corp.	1,000.00
Linda M Ramos & Glenn P Murguia	150.00
March Field Museum Foundation, INC	1,000.00
Riverside Community College District (Riverside County Treasurer of Riverside, California)	1,000.00
Rotary Club of Moreno Valley Inc. Truck Party Fundraising Account	150.00
SoCalGas (Sempra Energy)	2,000.00
Trammell Crow Company LLC, So Cal Dev Petty Cash	2,500.00
Vista Norte Public Charter School (Learn 4 Life)	5,000.00
Other Revenue	
Valley-Wide Employment Expo	25,537.12
SoCalGas (Sempra Energy) Communities Helping Communities	25,000.00
Grand Total	69,198.83

Schedule - II

Riverside County Works
Detailed Expenditure List

For the 12-Months Period Ended June 30, 2020

		FY19/20
<i>Expense Type</i>	<i>Name of Vendor</i>	<i>As of 06.30.2020</i>
Jamil Dada Character Excellence Youth Award Scholarships		
	Alexander Mulvaney	2,500.00
	Ana Luna-Flores	2,500.00
	Analinda Heredia	2,500.00
	Guadalupe Rodriguez	2,500.00
	Jordan Leverette	2,500.00
	Marlene Ozuna	2,500.00
	Rebecca Marie Lara	2,500.00
	Steven Serrano	2,500.00
	Tabitha Parrish	2,500.00
	Yunuen Ibarra	2,500.00
	Riverside County EDA	343.44
	Association of Fundraising Professionals	315.00
Dues, Fees, Insurance: Insurance, Bank Fee, Filing		
	AMS (Alliance Member Services) Insurance	1,608.00
	SOS SI-100 filing fee	20.00
	STATE OF CALIFORNIA DEPT OF JUSTICE	
	Attorney General's Registry of Charitable Trusts	25.00
	Bank Charges - Maintenance and Analysis Fee	1,065.49
	FTB - California Franchise Tax Board	10.00
	City of Riverside - Business Tax Certificate	14.00
	PayPal Fee	22.30
Jamil Dada Character Excellence Youth Awards Event Expenses		
	Derrel Thomas Foundation - Keynote Speaker	1,000.00
	Margarita's Grill Restaurant and Catering, LLC	4,490.15
	Mint Print Media - Retractable Banners	400.20
	Moreno Valley Conference & Recreation Center	1,387.00
	PIP Printing - Youth Awards Program	998.09
	Premier Party & Tent Rentals	372.20
	Riverside Mission Florist	1,299.57
	Sterling Productions - DJ and Lighting Services	850.00
	Others - Miscellaneous Expense	181.45
Miscellaneous: Office Supplies, Meals & Entertainment		
	Others - Miscellaneous Expense	23.23
Grand Total		\$ 39,425.12



Exhibit B

Insurance Declaration

A 501(c)(3) Non-Profit Public Benefit Corporation

1325 Spruce St., Suite 400, Riverside, CA 92507 ■ T: 951.955. 3053 ■ RiversideCountyWorks@rivco.org

DIRECTORS & OFFICERS LIABILITY POLICY DECLARATIONS

- Item 1. Named Member: Riverside County Works
 Address: 1325 Spruce St. #400
 Riverside, CA 92507
- Item 2. Policy Number: 2020-48988-DO-NPO
 Policy Period: 03/01/2020 to 03/01/2021
 (12:01 A.M. Standard time at the address stated in Item 1.)
- Item 3. Limit of Liability: \$ 1,000,000 Each Wrongful Act
 \$ 1,000,000 Annual Aggregate
- Item 4. Deductible: N/A
- Item 5. Premium: \$ 605
 (premium includes Terrorism Coverage - Certified Acts :\$5)
- Item 6. Applicable policy form(s) and Endorsement(s) effective at inception:
- | | | | | |
|-------------------|--------------------|----------------------|------------------|---------------------|
| CG 21 70 01 15, | IL 09 99 01 15, | NIAC DOEXPL 02 17, | NIAC-DODEC-NPO | NIAC-E069 DO 02 19, |
| NIAC-E3DO 01 99, | NIAC-E42 DO 09 19, | NIAC-E58 02 12, | NIAC-EDO1 08 91, | NIAC-EDO21 07 18, |
| NIAC-EDO34 01 02, | NIAC-EDO4 03 94, | NIAC-EDO7 FLAT 07 09 | | |

Producer: 03426
 NFP Property & Casualty Services, Inc.
 400 S Farrell Drive B170
 Palm Springs, CA 92262

Notice: This risk pooling contract is issued by a pooling arrangement authorized by California Corporations Code Section 5005.1. The pooling arrangement is not subject to all of the insurance laws of the State of California and is not subject to regulation by the Insurance Commissioner. Insurance guaranty funds are not available to pay claims in the event the risk pool becomes insolvent.



Authorized Company Representative
 President, NIAC

COMMERCIAL LINES COMMON POLICY DECLARATIONS

PRODUCER:

NFP Property & Casualty Services, Inc.
400 S Farrell Drive B170
Palm Springs, CA 92262

POLICY NUMBER: 2020-48988

RENEWAL OF NUMBER: 2019-48988

NAME OF INSURED AND MAILING ADDRESS:

Riverside County Works
1325 Spruce St. #400
Riverside, CA 92507

POLICY PERIOD:

FROM **03/01/2020** TO **03/01/2021**

AT 12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

BUSINESS DESCRIPTION: Support to Riverside County Dept of Public Health

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE COVERAGE AS STATED IN THIS POLICY.

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED. THESE PREMIUMS MAY BE SUBJECT TO ADJUSTMENT.

	PREMIUM
COMMERCIAL GENERAL LIABILITY COVERAGE PART - OCCURRENCE	\$650
COMMERCIAL AUTO LIABILITY COVERAGE PART	\$250
COMMERCIAL AUTO PHYSICAL DAMAGE COVERAGE PART	Not Covered
IMPROPER SEXUAL CONDUCT AND PHYSICAL ABUSE COVERAGE PART	Not Covered
SOCIAL SERVICE PROFESSIONAL COVERAGE PART	Not Covered
COMMERCIAL LIQUOR LIABILITY COVERAGE PART	INCLUDED
TERRORISM COVERAGE (Certified Acts)	\$3
TOTAL:	\$903

FORM(S) AND ENDORSEMENT(S) MADE A PART OF THIS POLICY AT TIME OF ISSUE:*

CG 00 01 04 13,	CG 00 33 04 13,	CG 20 10 04 13,	CG 20 12 04 13,	CG 20 18 04 13,	CG 20 20 11 85,	CG 20 21 07 98,
CG 20 26 04 13,	CG 20 34 04 13,	CG 20 37 04 13,	CG 21 09 06 15,	CG 21 47 12 07,	CG 21 70 01 15,	CG 21 96 03 05,
CG 22 44 04 13,	CG 24 07 01 96,	IL 00 17 11 98,	IL 00 21 09 08,	IL 02 70 12 19,	IL 09 99 01 15,	NIAC-AL 01 80,
NIAC-E089 GL 02 19,	NIAC-E078 12 18,	NIAC-E11 GL 09 19,	NIAC-E120 09 19,	NIAC-E123 09 19,	NIAC-E15 01 17,	NIAC-E22 09 19,
NIAC-E25 12 15,	NIAC-E26 11 17,	NIAC-E27 GL 02 17,	NIAC-E28 01 99,	NIAC-E29 12 09,	NIAC-E3 01 17,	NIAC-E33 GL 09 19,
NIAC-E34 09 18,	NIAC-E42 GL 09 19,	NIAC-E5 07 15,	NIAC-E56 01 17,	NIAC-E59 02 12,	NIAC-E60 07 12,	NIAC-E61 02 19,
NIAC-E67 08 17,	NIAC-E70 03 19,	NIAC-E72 01 17,	NIAC-E74 03 14,	NIAC-GL 01 80,	NIAC-LL 01 80,	NIAC-NPO-001 12 19,
NIAC-X1 06 18,	SCHEDULE BA 01 80,	SCHEDULE G 01 80,	SCHEDULE L 01 80			

*OMITS APPLICABLE FORMS AND ENDORSEMENTS IF SHOWN IN SPECIFIC COVERAGE PART / COVERAGE FORM DECLARATIONS.

COUNTERSIGNED: 01/28/2020

BY



(AUTHORIZED REPRESENTATIVE)

THESE DECLARATIONS AND THE COMMON POLICY DECLARATIONS, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

Notice: This risk pooling contract is issued by a pooling arrangement authorized by California Corporations Code Section 5005.1. The pooling arrangement is not subject to all of the insurance laws of the State of California and is not subject to regulation by the Insurance Commissioner. Insurance guaranty funds are not available to pay claims in the event the risk pool becomes insolvent.

NIAC-CO

(03426 - DB)

COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS

PRODUCER:

POLICY NUMBER: **2020-48988**

NFP Property & Casualty Services, Inc.
400 S Farrell Drive B170
Palm Springs, CA 92262

RENEWAL OF NUMBER: 2019-48988

NAME OF INSURED AND MAILING ADDRESS:

Riverside County Works
1325 Spruce St. #400
Riverside, CA 92507

POLICY PERIOD:

FROM 03/01/2020 TO 03/01/2021
AT 12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

BUSINESS DESCRIPTION: Support to Riverside County Dept of Public Health

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS
POLICY, WE AGREE WITH YOU TO PROVIDE THE COVERAGE AS STATED IN THIS POLICY.

LIMITS OF COVERAGE:

GENERAL AGGREGATE LIMIT (OTHER THAN PRODUCTS - COMPLETED OPERATIONS)	\$2,000,000
PRODUCTS - COMPLETED OPERATIONS AGGREGATE LIMIT	\$2,000,000
PERSONAL AND ADVERTISING INJURY LIMIT	\$1,000,000
EACH OCCURRENCE LIMIT	\$1,000,000
DAMAGE TO PREMISES RENTED TO YOU	\$500,000 any one premises
MEDICAL EXPENSE LIMIT	\$20,000 any one person

ADDITIONAL COVERAGES:

CLASSIFICATION(S)

SEE ATTACHED SUPPLEMENTAL DECLARATIONS SCHEDULE G

PREMIUM

\$650

FORMS AND ENDORSEMENTS APPLICABLE TO THIS POLICY ARE INCLUDED IN COMMERCIAL LINES COMMON POLICY DECLARATIONS

COUNTERSIGNED: 01/28/2020

BY



(AUTHORIZED REPRESENTATIVE)

THESE DECLARATIONS AND THE COMMON POLICY DECLARATIONS, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

NIAC-GL

**COMMERCIAL GENERAL LIABILITY
EXTENSION OF DECLARATIONS**

Schedule G

POLICY NUMBER: 2020-48988-NPO

Page 1

NAME OF INSURED: Riverside County Works

<u>PREMISES CODE/CLASS</u>	<u>*LOC</u>	<u>PREMIUM BASIS</u>	<u>RATE</u>	<u>*ADVANCED PREMIUM</u>
47366/Sales, Service or Consulting Organizations - NOC - includes products and/or completed operations	1	42,821	6.564	\$282

ADDITIONAL COVERAGES

Increased Aggregate	\$59
Additional Premium to Meet Minimum	\$309

*See Common Declarations for Total Advanced Premium and Schedule 'L' for locations.

COUNTERSIGNED: 1/28/2020

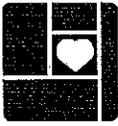
BY _____



(AUTHORIZED REPRESENTATIVE)

NIAC - SCHEDULE G - NPO

(03426)



**COMMERCIAL GENERAL LIABILITY
EXTENSION OF DECLARATIONS**

Schedule L

POLICY NUMBER: 2020-48988-NPO

Page 1

NAME OF INSURED: Riverside County Works

**PREMISES
LOC/BLDG**

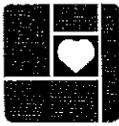
**DESIGNATED PREMISES
ADDRESS, CITY, STATE, ZIP**

**ADDITIONAL INSUREDS
AND OTHER INTERESTS**

1

1325 Spruce St #400
Riverside, CA 92507

Pamela C. Q.



COMMERCIAL LIQUOR LIABILITY COVERAGE PART DECLARATIONS

PRODUCER:

NFP Property & Casualty Services, Inc.
400 S Farrell Drive B170
Palm Springs, CA 92262

POLICY NUMBER: 2020-48988

RENEWAL OF NUMBER: 2019-48988

NAME OF INSURED AND MAILING ADDRESS:

Riverside County Works

1325 Spruce St. #400
Riverside, CA 92507

POLICY PERIOD:

FROM 3/1/2020 TO 3/1/2021

AT 12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

BUSINESS DESCRIPTION: Support to Riverside County Dept of Public Health

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE COVERAGE AS STATED IN THIS POLICY.

LIMITS OF COVERAGE:

GENERAL AGGREGATE LIMIT.....	\$ 1,000,000
EACH COMMON CAUSE LIMIT.....	\$ 1,000,000

PREMIUM:

Included

FORMS AND ENDORSEMENTS APPLICABLE TO THIS COVERAGE PART AND MADE PART OF THIS POLICY AT THE TIME OF ISSUANCE:

CG 00 33 04 13

THESE DECLARATIONS AND THE COMMON POLICY DECLARATIONS, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

Notice: This risk pooling contract is issued by a pooling arrangement authorized by California Corporations Code Section 5005.1. The pooling arrangement is not subject to all of the insurance laws of the State of California and is not subject to regulation by the Insurance Commissioner. Insurance guaranty funds are not available to pay claims in the event the risk pool becomes insolvent.

Panel C. A.

COUNTERSIGNED: 1/28/2020

BY _____

(AUTHORIZED REPRESENTATIVE)

ACCIDENT INSURANCE PROGRAM

MASTER POLICY - MHH010307

Underwritten by: QBE Insurance Corporation

Statement of Coverage

Part 1

PARTICIPATING ORGANIZATION: Riverside County Works
1325 Spruce St. #400
Riverside, CA 92507

CONTROL #: 48988

COVERAGE TERM: 03/01/2020 to 03/01/2021

SUMMARY OF BENEFITS

PLAN G

Accidental Death	\$50,000
Accidental Dismemberment Maximum	\$50,000
Accidental Paralysis	\$25,000
Aggregate Limit of Liability	\$1,000,000
Excess Accident Medical	\$500,000
Deductible	\$100

COVERED PERSONS

Participants & Volunteers

OPTIONAL COVERED ACTIVITIES

None

ANNUAL PREMIUM: \$100

Please refer to Part 2 of the Statement of Coverage for a more complete description of the benefits provided by this program, including program exclusions and limitations.

Date: 01/28/2020

ACCIDENT INSURANCE

STATEMENT OF COVERAGE

Part 2

Underwritten by: QBE Insurance Corporation

This Statement of Coverage confirms that Blanket Accidental Death, Dismemberment, Paralysis and Accident Medical Expense benefits are provided to Covered Persons volunteering, or participating, in activities that are supervised and sponsored by the Participating Organization (Organization) named in Part 1, under Policy # MHH010307, issued by QBE to: Volunteers Insurance Services® Association Alliance Member Services, Nonprofits Insurance Alliance of California, Alliance of Nonprofits for Insurance.

Covered Persons

- All designated, recorded Volunteers participating in a volunteer project through the Organization's program, if Volunteers are listed in Part 1.
- All registered Participants participating in supervised and sponsored Organization activities, if Participants are listed in Part 1.

Covered Activities

Volunteers and Participants are covered while participating in all activities which are supervised and sponsored by the Organization named in Part 1.

Accidental Death, Dismemberment & Paralysis (Plegia) Benefits

Loss of Life.....	\$50,000
Loss of any combination of two: hands, feet, eyesight, speech and hearing.....	\$50,000
Total paralysis of upper and lower limbs, both lower limbs, or upper and lower limbs on one side of the body.....	\$25,000
Loss of one hand, one foot, sight in one eye, speech or hearing.....	\$25,000
Loss of thumb and index finger of same hand.....	\$12,500
Loss of Life due to heart failure.....	\$10,000

Accident Medical Expense Benefits

Maximum Benefits for any one Covered Accident.....	Refer to Part 1
Benefit Period for any one Covered Accident.....	52 weeks
Deductible.....	Refer to Part 1
Scope of Coverage.....	Excess—pays benefits after any other Health Care Plans have paid benefits
Benefit Amount Payable.....	100% of Usual and Customary charges, up to Maximum Benefit per Covered Accident
Covered Expenses Include.....	In & Out-Patient Hospital, Ambulatory Medical Center & Emergency Room, Physician visits & surgery, diagnostic tests, nursing services and ambulance charges
Dental Expenses.....	\$1,000 maximum benefit, up to \$300 per tooth

Accidental Death, Dismemberment and Paralysis benefits: Loss of hand or foot means complete severance through or above the wrist or ankle joint. Loss of sight means the total, permanent loss of sight of the eye. The loss of sight must be irrecoverable by natural, surgical or artificial means. Loss of speech means total, permanent and irrecoverable loss of audible communication. Loss of hearing means total and permanent loss of hearing in both ears which cannot be corrected by any means. Loss of a thumb and index finger means complete severance through or above the metacarpophalangeal joints (the joints between the fingers and the hand). Severance means the complete separation and dismemberment of the part from the body. Paralysis means loss of use, without severance, of a limb. This loss must be determined by a physician to be complete and not reversible. If the same accident causes more than one of these losses, we will pay the largest amount that applies.

Exclusions and Limitations:

Coverage is not provided for any accident which is caused by or results from any of the following:

- Intentionally self-inflicted injury, suicide or any attempt thereat while sane or insane;
- commission or attempt to commit a felony or an assault; commission of or active participation in a riot or insurrection;
- bungee-cord jumping, parachuting, skydiving, parasailing, hang-gliding;
- declared or undeclared war or act of war;
- flight in, boarding or alighting from an aircraft, except as a fare-paying passenger on a regularly scheduled commercial airline;
- travel in or on any on-road and off-road motorized vehicle that does not require licensing as a motor vehicle; participation in any motorized race or contest of speed;
- an accident if the covered person is the operator of a motor vehicle and does not possess a valid motor vehicle operator's license, unless the covered person holds a valid learners permit and the covered person is participating in a driver's education program;
- sickness, disease, bodily or mental infirmity, bacterial or viral infection or medical or surgical treatment thereof, except for any bacterial infection resulting from an accidental external cut or wound or accidental ingestion of contaminated food;
- travel or activity outside the United States or Canada, unless advance written approval is provided;
- the covered person being legally intoxicated as determined according to the laws of the jurisdiction in which the covered accident occurred;
- voluntary ingestion of any narcotic, drug, poison, gas or fumes, unless prescribed or taken under the direction of a physician and taken in accordance with the prescribed dosage;
- injuries compensable under Workers' Compensation law or any similar law;
- an accident which occurs while the covered person is driving a private passenger automobile while intoxicated.
- Benefits will not be paid for any hospital stay that is not considered appropriate treatment for the condition and locality.
- Overnight Supervised and Sponsored Activities and related travel are not covered, unless agreed to in writing by the Company.
- In addition, benefits will not be paid for services or treatment rendered by any person who is employed or retained by the policyholder or living in the covered person's household or provided by a parent, sibling, spouse or child of either the covered person or the covered person's spouse, or the covered person.
- The Accidental Death, Dismemberment and Paralysis aggregate limit of liability is \$1,000,000.

Accident Medical Benefit limitations and excluded expenses:

- cosmetic surgery, except for reconstructive surgery needed as the result of a covered injury;
- any elective or routine treatment, surgery, health treatment, or examination;
- blood, blood plasma, or blood storage, except expenses by a hospital for processing or administration of blood;
- examination or prescription for initial eyeglasses, contact lenses or hearing aids;
- treatment in any Veteran's Administration, Federal, or state facility, unless there is a legal obligation to pay;
- services or treatment provided by persons who do not normally charge for their services, unless there is a legal obligation to pay;
- rest cures or custodial care;
- repair or replacement of existing dentures, partial dentures, braces or bridgework;
- personal services such as television and telephone or transportation;
- expenses payable by any automobile insurance policy without regard to fault;
- services or treatment provided by an infirmary operated by the policyholder;
- treatment of injuries that result over a period of time (such as blisters, tennis elbow, etc.), and that are a normal, foreseeable result of participation in the covered activity;

- treatment or service provided by a private duty nurse;
- treatment of hernia of any kind.
- Treatment of injury resulting from a condition that a covered person knew existed on the date of the accident, unless he received a written medical release from his physician.

Any covered expenses payable under the Accident Medical Expense benefit will be reduced by 50% if the covered person has HMO or PPO coverage and elects not to use that coverage.

Claims Procedures

1. Send the completed and signed QBE Accident Claim Form to the claims administrator as soon as you receive notice that an injury has occurred. The Organization needs to complete and sign Part I. The claimant must complete Part II and sign Part III. Include a copy of Part 1 of the Statement of Coverage with the Claim Form.
2. Since this program provides coverage for medical expenses that are in "excess" of any other Health Care Plan the claimant has, all claims must be submitted to the claimant's primary insurance carrier first. If the claimant has no other insurance, this program will act like primary coverage.
3. Itemized bills for all medical expenses, referred to as a "HCFA" from a doctor's office or a "UB92" from a hospital, must be provided to the claims administrator in order for the claim to be processed.
4. The claimant's primary insurance will send them an Explanation of Benefits (EOB) for all submitted expenses. Copies of all such EOBs must also be submitted to the claims administrator in order for claims to be processed under this program.

Claims Administrator: Health Special Risk, Inc.
4100 Medical Parkway
Carrollton, TX 75007

Toll Free Number: 1-866-408-3361
E-mail: Claims@hsri.com

Important Notice: This information is a brief description of the important benefits and features of the Blanket Accident Medical Insurance underwritten by QBE Insurance Corporation. It is not a contract. Full terms and conditions of coverage, including effective dates of coverage, benefits, limitations and exclusions are set forth in the Master Policy.