

**THE MINUTES OF THE REGULAR MEETING OF THE MAYOR AND  
CITY COUNCIL OF THE CITY OF WILLCOX, COCHISE COUNTY, AZ  
HELD ON THIS 4TH DAY OF MAY 2017**

**CALL TO ORDER** - Mayor Michael Laws called the meeting to order at 6:30 p.m.

**ROLL CALL** - City Clerk Crystal Hadfield called the roll.

**PRESENT**

Mayor Michael J. Laws  
Vice Mayor Terry Rowden  
Councilman Gerald "Sam" Lindsey  
Councilman Robert A. Irvin  
Councilman Elwood A. Johnson  
Councilman Timothy A. Bowlby  
Councilwoman Rachel D. Garza

**STAFF**

City Manager Ted Soltis  
City Attorney Ann Roberts  
Finance Director/City Clerk Crystal Hadfield

**PLEDGE OF ALLEGIANCE TO THE FLAG** - Led by Mayor Laws

**CALL TO THE PUBLIC** - None

**DECLARATION ON CONFLICT OF INTEREST** - None

**ADOPTION OF THE AGENDA**

**MOTION:** Councilmember Bowlby made a motion to adopt the agenda as presented.

**SECONDED:** Vice Mayor Rowden seconded the motion.

**MOTION CARRIED**

**APPROVE THE APRIL 20, 2017 COUNCIL MEETING MINUTES**

**MOTION:** Councilmember Irvin made a motion to approve the April 20, 2017 Council meeting minutes.

**SECONDED:** Councilmember Lindsey seconded the motion.

**MOTION CARRIED**

**PUBLIC HEARING – APPROVE LIQUOR LICENSE FOR WILLCOX CHEVRON INC. DBA WILLCOX CHEVRON  
LOCATED AT 1190 W REX ALLEN DRIVE**

**MOTION:** Councilmember Bowlby made a motion to approve the liquor license for Willcox Chevron Inc. DBA Willcox Chevron.

**SECONDED:** Councilmember Johnson seconded the motion.

**DISCUSSION:** The Public Hearing was opened at 6:33 and closed at 6:34. Councilmember Lindsey asked why Alan Crockett is listed as the agent, while Krishan Kewal is listed throughout the application as the owner. Councilmember Johnson explained that Crockett is the financial advisor. Councilmember Garza asked if Willcox Chevron is opening the front and the back of the store. It was explained that they are selling on the premises and there will not be consumption based on the series of the license.

**MOTION CARRIED**

**3<sup>RD</sup> QUARTER FINANCIAL REPORT – CRYSTAL HADFIELD**

Crystal Hadfield gave a report of the funds at third quarter and answered Council's questions.

**CITY MANAGER REPORT**

- The waste water treatment plant's pre construction meeting was held and mobilization began yesterday. The City will have groundbreaking ceremony at a later date.
- City crews have finished the street's chip seal project. City Manager Soltis gave a brief overview of streets that were completed.
- The City is going to be installing a "Welcome to Willcox" sign on Haskell Ave. Recently a grant was written to fix the trail at Keiller Park. The City made it through the first round of eliminations.
- There is currently a vacant Planning and Zoning position.
- The next meeting will be a budget work session on May 18<sup>th</sup> at 6:00 p.m.
- City Manager Soltis has been appointed for another year as Administrative Chairman for SEAGO.
- SEAGO is doing a transportation survey in the Willcox area. A presentation regarding the transportation update is forthcoming.

**THE MINUTES OF THE REGULAR MEETING OF THE MAYOR AND  
CITY COUNCIL OF THE CITY OF WILLCOX, COCHISE COUNTY, AZ  
HELD ON THIS 4TH DAY OF MAY 2017**

**COMMENTS NOT FOR DISCUSSION FROM MAYOR AND COUNCIL MEMBERS**

Councilmember Johnson thanked firefighters as it is National Firefighter Day. He gave kudos to Crystal for her efforts as Finance Director. Johnson said that he will not be here for the May 18<sup>th</sup> budget work session.

Councilmember Bowlby said the Friends of WASA banquet was a success. They raised about \$7,000. They are currently planning a golf tournament in June for WASA. Today Bowlby met the new owner of Lifestyles who mentioned that he was excited about the cleanup taking place in Willcox. The Lifestyles owner has great plans for the building.

Councilmember Garza stated that she and Mayor Laws attended Law Day on Tuesday. Garza stated that we will miss the Memorial Day goal for Keiller Park playground equipment installation; we should have it installed by the middle of June. Garza gave kudos to the City Manager and staff for the work on the streets.

Vice Mayor Rowden also complimented staff on the condition of the streets. Rowden attended the Chamber Luncheon where Scott Curtis was the speaker and he gave a presentation on Wine Country. Rod Keeling asked Rowden to share a cookbook with each of the Council members. Rowden mentioned that West Fest is this coming weekend and the FFA banquet is next Thursday. Rowden said that she would like better signage for Willcox. There were two signs and one was on someone's property. The sign that was found matches the other one and will be placed on the other end of Haskell Ave. FFA will help with the welding work. She is contacting SSVEC about solar lighting to shine on the signs.

Mayor Laws discussed the recent pursuit and thanked the police department. Laws discussed the Law Day that he and Councilmember Garza recently attended. Laws said that he saw the contractors moving in equipment for work on the waste water treatment plant.

**ADJOURN**

With no further business before the Mayor and Council, the meeting was adjourned at 7:07p.m. by Mayor Laws.

**CERTIFICATION**

I hereby certify that the foregoing minutes are a true and correct copy of the minutes of the regular meeting of the City Council of the City of Willcox held on the 4<sup>th</sup> day of May 2017. I further certify that the meeting was duly called and held, and that a quorum was present.

**Dated this 4<sup>th</sup> day of May 2017**

\_\_\_\_\_  
City Clerk Crystal L. Hadfield

**PASSED, APPROVED AND ADOPTED** this 1st day of June 2017.

\_\_\_\_\_  
Mayor Michael J. Laws

**ATTEST:**

\_\_\_\_\_  
City Clerk Crystal Hadfield

**THE MINUTES OF THE BUDGET WORK SESSION OF THE MAYOR AND  
CITY COUNCIL OF THE CITY OF WILLCOX, COCHISE COUNTY, AZ  
HELD ON THIS 18th DAY OF MAY, 2017**

**CALL TO ORDER** - Mayor Michael Laws called the meeting to order at 5:30 p.m.

**ROLL CALL** - City Clerk Crystal Hadfield called the roll.

**PRESENT**

Mayor Michael J. Laws  
Vice Mayor Terry Rowden  
Councilman Gerald "Sam" Lindsey  
Councilman Robert A. Irvin  
Councilman ~~Elwood A. Johnson~~  
Councilman Timothy A. Bowlby  
Councilwoman Rachel D. Garza

**STAFF**

City Manager Ted Soltis  
City Attorney Ann Roberts  
Finance Director/City Clerk Crystal Hadfield  
Public Safety Director Jose Rios  
Public Works Director Galovale Galovale  
Development Services Director Jeff Stoddard

**ABSENT**

Councilman Elwood A. Johnson - Excused

**FY 2017-2018 BUDGET**

The City Manager presented the draft budget to Council and answered questions. The City Manager stated that there will be some changes to the tentative budget to include a payoff of the water bonds and there were some changes to the capital expenses in the five year plan. Staff answered questions accordingly.

**ADJOURN**

Mayor Laws adjourned the meeting at 7:23 p.m.

**CERTIFICATION**

I hereby certify that the foregoing minutes are a true and correct copy of the minutes of the budget work session of the City Council of the City of Willcox held on the 18th day of May 2017. I further certify that the meeting was duly called and held, and that a quorum was present.

Dated this 18th day of May 2017

\_\_\_\_\_  
Crystal L. Hadfield, City Clerk

**PASSED, APPROVED AND ADOPTED** this 1st day of June 2017.

\_\_\_\_\_  
Michael J. Laws, Mayor

ATTEST:

\_\_\_\_\_  
Crystal L. Hadfield, City Clerk

CITY OF WILLCOX  
Request for Council Action

Agenda Item: \_\_\_\_\_  
Tab Number: \_\_\_\_\_

**Meeting Date:**

June 1, 2017

**Action:**

Resolution  
 Ordinance  
 Other

**Subject:** United Health Care  
medical insurance renewal

**To:** Mayor and City Council

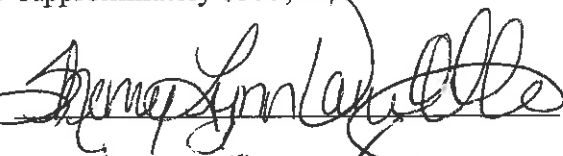
**From:** Sherry Lynn Van Allen, Human Resources

**Discussion:** The City switched to United Health Care (UHC) as a provider for our medical coverage in FY16. The initial FY18 renewal rate quoted by UHC reflected a 15% increase in premium costs over the FY17 rates. Our benefit brokers Employee Solutions Group (ESG) researched alternatives and negotiated a final rate increase of 8%. The plan provides a good range of benefits as well as an extended network of participating physicians and hospitals.

**Recommendation:** Approve continued medical insurance coverage with United Health Care for Fiscal Year 2018.

**Fiscal Impact:** Approximately \$353,461

Submitted by:



Approved by:



**UnitedHealthcare**  
**Medical Proposed Rates with Alternate Plan Designs**

**Customer Name:** CITY OF WILLCOX  
**Medical Policy:** 00737958  
**Renewal Date:** July 1, 2017

• The numbers below are on an illustrative basis. Rates are subject to Underwriting approval.

	Option 1: Current		Option 2 NEW	
	AJ4P (Balanced 100) Rx Plan: 385		AS8W (HSA) Rx Plan: 2V-HSA	
<b>Plan Name</b>				
<b>Product</b>	Choice + Insurance *		Choice + Insurance *	
<b>Option</b>	00737958		00737958	
<b>Plan Offering</b>	Single Option		Single Option	
<b>Multiple Option with:</b>	Option(s) N/A		Option(s) N/A	
<b>HRA or HSA</b>	No		HSA	
<b>Benefits*</b>	<b>Network Single/Family</b>		<b>Network Single/Family</b>	
<b>Office Copay (PCP/SPC)</b>	PCP \$20, SPC \$40		PCP N/A, SPC N/A	
<b>Hospital Copays</b>	OP N/A, IP N/A		OP N/A, IP N/A	
<b>UC/ER/Major Diag Copay</b>	UC \$75, ER \$300, Maj Diag \$250		UC N/A, ER N/A, Maj Diag N/A	
<b>Other</b>	N/A		N/A	
<b>Deductible</b>	\$5,000/\$10,000 (Emb)		\$2,700/\$5,400 (Emb)	
<b>Coinsurance</b>	100%		100%	
<b>Out-of-Pocket</b>	\$6,000/\$12,000		\$5,000/\$10,000	
<b>Pharmacy</b>	\$15/\$35/\$70/\$250; 2.5x for M.O.		\$10/35/60; 2.5x for M.O.	
	<b>Out of Network Single/Family</b>		<b>Out of Network Single/Family</b>	
<b>Deductible</b>	\$10,000/\$20,000 (Emb)		\$5,000/\$10,000 (Emb)	
<b>Coinsurance</b>	50%		50%	
<b>Out of Pocket</b>	\$30,000/\$60,000		\$10,000/\$20,000	
<b>Enrollment</b>				
<b>Employee</b>	25		25	
<b>Employee + Spouse</b>	4		4	
<b>Employee + Child(ren)</b>	15		15	
<b>Employee + Family</b>	3		3	
<b>Total</b>	47		47	
	<b>Rates (Billed)</b>		<b>Rates (Billed)</b>	
	<b>Current</b>	<b>Proposed</b>	<b>Current</b>	<b>Proposed</b>
<b>Rates</b>				
<b>Employee</b>	\$379.32	\$409.67		\$408.35
<b>Employee + Spouse</b>	\$834.50	\$901.27		\$898.37
<b>Employee + Child(ren)</b>	\$720.70	\$778.36		\$775.86
<b>Employee + Family</b>	\$1,213.82	\$1,310.94		\$1,306.72
<b>Monthly Cost</b>	\$27,273	\$29,455		\$29,360
<b>Annual Cost</b>	\$327,276	\$353,461		\$352,323
<b>Change from Current</b>		8.0%		7.7%

\*High level benefit summary. Please see your plan summary for more detailed benefit description.

The numbers above are on an illustrative basis. Rates are subject to Underwriting approval.

For markets moving to service fees, current rates (applicable for renewals only) include commission expenses. Proposed rates, for your convenience, include any applicable producer service fees. Producer service fees are not a contingency of obtaining insurance coverage but are fees agreed to between you (client) and your producer/service provider for service rendered on behalf of client.

For markets continuing to pay commissions, both the current (applicable for renewals only) and proposed rates include commissions.

## UnitedHealthcare

### Medical Quote Assumptions

Customer Name: CITY OF WILLCOX  
 Medical Policy: 00737958  
 Renewal Date: July 1, 2017

The rates quoted here are based on the following assumptions. Changes to these assumptions may result in an adjustment to rates.

#### Medical Quote Assumptions

- Rates are guaranteed for the contract period of 7/1/17 through 6/30/18.
  - Rates are based on your submitted census. UnitedHealthcare reserves the right to adjust the rates from audit date back to effective date if any of the following changes:
    - Enrollment +/- 10%
    - Average Contract Size +/- 10%
    - Area Factor +/- 7.5%
    - Age/Sex Factor +/- 10%
    - Any Material Changes
    - Cobra enrollees are more than 10% of enrollment
  - Employer contributes a minimum of 99% toward the employee only rates and 85% toward the dependent rates.
  - Requires a minimum participation level of 50%.
  - New divisions must be evaluated by UnitedHealthcare prior to their addition to the plan.
  - Renewals will be delivered 60 days prior to the anniversary date.
  - Rates and plan designs assume no changes in state or federal mandated benefits.
  - Unless otherwise stated, this offer replaces and renders all previous offers null and void.
  - Benefits Subject to Regulatory Approval
- 
- UnitedHealthcare reserves the right to adjust the rates and/or fees (i) in the event of any changes in federal, state or other applicable legislation or regulation; (ii) in the event of any changes in Plan design required by the applicable regulatory authority (i.e. mandated benefits) or by the Plan Sponsor; and (iii) as otherwise permitted in our policy.
  - This premium may include state and federal taxes and fees.
  - Premium rates and/or product forms included herein are subject to approval by regulators. If rates or product forms offered herein are subsequently modified by regulators we will immediately advise you of the change in plan design and retroactively adjust premium in subsequent billings.
  - Plan design and corresponding premium rates offered herein represent a coverage option that is consistent with your current group size (based on most recent census or survey information) and closely matches your current coverage. Additional coverage options may be available to you.
- 
- This quote includes 4.75% commissions in commissionable sites.
- 
- Agents may receive commissions and other compensation from us and these costs may be reflected in your premium or fee. Separately, you may have contracted with producers to provide services directly for your group and have agreed to pay them a 'service fee'. Since 'service fees' are not a contingency of the purchase of health insurance such fees are not part of your premium but may be included in your bill under total amount due.
- 
- UBundle program is available in select states and on select UHC platforms for cases with effective dates January 1, 2017 and later. The UBundle Program will also be available to both new and existing fully insured Key Account (non-community rated accounts with between 101-3000 eligible employees) medical and specialty business adding a specialty line of qualified UHC coverage. Groups must meet qualification requirements and are subject to prior UHC underwriting approval. The UBundle Program can result in up to a 2.5% savings in medical premium. United Healthcare retains sole and complete discretion to revise or terminate the UBundle program at any time. Sold coverage notification of medical and ancillary lines along with receipt of specialty UBundle Underwriting Acceptance Form (UAF) by the UHC Sales Representative is required prior to implementing rates. UBundle cannot be combined with any other discount program.

#### HRA/HSA Assumptions (If Applicable)

- Please refer to the vendor bank collateral for HRA/HSA account fee information.
- HRA and HSA plans may include a non-embedded deductible and out of pocket. In that instance, no individual family member's deductible or out of pocket is considered satisfied until the full family deductible or out of pocket amount has been met. Pharmacy copays will only apply after the deductible has been satisfied on HRA/HSA plans with integrated medical/pharmacy deductibles.
- Rates assume the Employer funds no more than 50% of the HSA/HRA deductible. UnitedHealthcare reserved the right to adjust rates if this assumption changes.
- HSA accounts must be paired with qualified HDHPs as determined under section 223 of the Internal Revenue Code
- For calendar years 2015/2016, the HDHP annual deductible cannot be less than \$1,300 for self-only coverage or \$2,600 for family coverage
- Medical and pharmacy expenses covered under an HSA program are not eligible for reimbursement under an FSA program
- Funds in the HSA account continue to accumulate and are fully portable to another HSA account.
- Any unused HRA funds can be rolled over to next year's HRA, but are not portable as a cash out option.
- Only medical expenses covered under the medical plan are reimbursable from the HRA.

CITY OF WILLCOX  
Request for Council Action

Agenda Item: \_\_\_\_\_  
Tab Number: \_\_\_\_\_

**Meeting Date:**

June 1, 2017

**Action:**

Resolution  
 Ordinance  
 Other

**Subject:** Planning and Zoning  
Commission Appointment –  
Mark Brinton

**To:** Mayor and City Council

**From:** Sherry Lynn Van Allen, Human Resources

**Discussion:** In accordance with Willcox Municipal Code 2.01.020.A, vacancies shall be filled by appointment by the Mayor and City Council.

Mr. Brinton meets all of the requirements to serve on this Commission. The appointment would be effective immediately terminating on June 30, 2020.

**Recommendation:** Appoint Mark Brinton to the Planning and Zoning Commission.

**Fiscal Impact:** -0 -

**Submitted by:**

  
Sherry Lynn Van Allen, Human Resources

**Approved by:**

  
Ted Soltis, City Manager

Mark D. Brinton  
447 W. Henry St.  
P.O. Box 773  
Willcox, AZ 85644

May 17, 2017

City Council Members  
Ted Soltis, City Manager  
Willcox, AZ 85643

RE: Willcox Planning & Zoning Committee

Dear Mayor Laws and City Council Members,

I am interested in being considered as an applicant for the Planning & Zoning Committee. As a business and property owner and resident within the City of Willcox, I have a vested interest in the success and achievements of the City. I also have previous experience in land development so I understand some of the advantages & difficulties related to the decisions made by the Planning & Zoning Committee.

My wife & I became owners of Sierra Lumber in Willcox over 8 years ago. We very quickly became enamored with the people and the community and have a desire to help make our community the best it can be. With this in mind, I'm stepping forward to offer my efforts as a Planning & Zoning Committee member.

Thank you for your consideration.

Sincerely,

A handwritten signature in black ink that reads "Mark D. Brinton" with a long, sweeping underline.

Mark D. Brinton  
480-215-8297  
markdbrinton@gmail.com



**CITY OF WILLCOX, COCHISE COUNTY, ARIZONA**

**RESOLUTION 2017-08**

**A RESOLUTION OF THE MAYOR AND CITY COUNCIL OF THE CITY OF WILLCOX, COCHISE COUNTY, ARIZONA, ADOPTING THE TENTATIVE BUDGET OF THE CITY OF WILLCOX FOR FISCAL YEAR 2017-2018; AUTHORIZING AND DIRECTING PUBLICATION OF STATEMENTS AND SCHEDULES OF THE TENTATIVE BUDGET; AND SETTING THE DATES FOR PUBLIC HEARINGS ON THE BUDGET AND PROPERTY TAX LEVY BEFORE ADOPTION**

**WHEREAS**, the Mayor and City Council have conducted a public budget work session to make an estimate of the amounts required to meet public expenditures for the ensuing year and an estimate of revenues from sources other than direct taxation and the amount to be raised by taxation upon real and personal property of the City of Willcox; and

**WHEREAS**, the estimated public expenses and estimated revenues shown on the accompanying schedules in the amount of **\$24,487,015 net of inter-fund allocations of \$580,000** as presented herewith, accurately reflect the proposed Tentative Budget of the City of Willcox, Cochise County, Arizona for the Fiscal Year 2017-2018; and

**WHEREAS**, the City Clerk is required to publish, the attached statements and schedules of said Tentative Budget, together with a copy of this Resolution and give Notice of Public Hearings of the City Council, for the purposes of conducting public hearings when and where any citizen may appear and be heard or submit written comments in favor of or against any proposed use within the budget or the tax levy. The proposed Budget may be examined on weekdays at the Willcox City Hall located at 101 S. Railroad Avenue, Willcox, Arizona between the hours of 8:00 a.m. and 4:00 p.m., and at the Elsie S. Hogan Community Library. It may also be viewed online at [cityofwillcox.org](http://cityofwillcox.org).

**NOW, THEREFORE, BE IT RESOLVED BY THE MAYOR AND CITY COUNCIL OF THE CITY OF WILLCOX, ARIZONA**, as follows:

**SECTION 1:** The estimates of expenses and revenues shown on the accompanying schedules in the amount of **\$24,487,015 net of inter-fund allocations of \$580,000** are hereby adopted as the Tentative Budget of the City of Willcox, Cochise County, Arizona for the Fiscal Year 2017-2018.

**SECTION 2:** The Clerk is hereby authorized and directed to publish, in the manner prescribed by law, the attached statements and schedules of said Tentative Budget, together with a copy of this Resolution and the Notice of Public Hearings on said Budget and Property Tax Levy to be held on June 15, 2017, as required by law.

**SECTION 3:** The Mayor is authorized and empowered to execute this Resolution.

**PASSED AND ADOPTED BY THE MAYOR AND CITY COUNCIL OF THE CITY OF WILLCOX, ARIZONA**, this 1<sup>st</sup> day of June, 2017.

**APPROVED/EXECUTED:**

**MICHAEL J. LAWS, Mayor**

**ATTEST:**

**APPROVED AS TO FORM:**

**CRYSTAL L. HADFIELD, City Clerk**

**ANN P. ROBERTS, City Attorney**

CITY OF WILLCOX  
Council Action Form

Agenda Item: 12  
Tab Number: 6

**Meeting Date:**

June 1, 2017

**Action:**

Resolution  
 Ordinance  
 Other

**Subject:** Railroad Avenue  
street closure for Summer  
Festival

**To:** Mayor and City Council


**From:** Galovale Galovale, P.E., Public Works Director

**Discussion:** Willcox Historic Theater Preservation, Inc. will be hosting a Summer Festival (Movie Night) on June 17, 2017 at Railroad Park. They are requesting permission to close Railroad Avenue between Stewart Street and Maley Street from 3:00 pm to 11:59 pm.

**Recommendation:** Approve street closure request for the Summer Festival.

**Fiscal Impact:** \$0.00

**Submitted by:**

  
Galovale Galovale, Public Works Director

**Approved by:**

  
Ted Soltis, City Manager



Street Closure Request Form

Willcox Historic Theater  
Name of Applicant

June 17, 2017  
Date

134 N Railroad Ave  
Address

766-3335  
Phone

Willcox Historic Theater  
Event - Event Sponsor

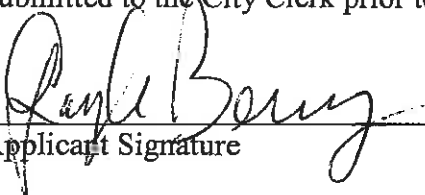
3:00 pm June 17  
Start Date - Time

11:59 pm June 17  
End Date - Time

Street(s) to be closed - Beginning and ending points

Railroad Ave - Moley St to Stewart St

The applicant understands that a certificate of liability insurance for one million dollars (\$1,000,000) naming the City of Willcox as "additionally insured" must be supplied with this application in order for the request to be fully executed and processed. Additionally, the City of Willcox requests that all adjacent property owners be notified of the intent to close the street and be offered an opportunity to make comments. Comments may be submitted to the City Clerk prior to the Council meeting or may be stated in the public meeting.

  
Applicant Signature

Mar 21, 2017  
Date

\_\_\_\_\_  
Received By

\_\_\_\_\_  
Date

Petition to Close Railroad Avenue

3:00pm June 17 2017

Start Date - Time

11:59pm June 17, 2017

End Date - Time

Willcox Historic Theater

Event - Event Sponsor

Businesses' Signature

Flying Leap:

Robert K. Surface

Friends of Marty Robbins:

Juanita Buckley

Gallery 94:

Keeling Schaefer:

Don. Parn-

Rex Allen Museum:

Michael Lull

Rodney's:

Prof. G. G.

Willcox Historic Theater:

Carol Ann  
S. S.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
4/25/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).


<b>PRODUCER</b> <b>SteelBridge Insurance Services, Inc.</b>  <b>PO Box 629</b> <b>Santa Cruz CA 95061</b>		<b>CONTACT NAME: SteelBridge Customer Service</b> <b>PHONE (A/C No, Ext): (831)425-6640</b> <b>FAX (A/C No): (888)338-7277</b> <b>E-MAIL ADDRESS: csr@steelbridgeins.com</b>															
<b>INSURED</b> <b>Willcox Historic Theater Preservation Inc</b> <b>PO Box 217</b>  <b>Willcox AZ 85644-0217</b>		<table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: <b>Great American Ins Co</b></td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: <b>Great American Ins Co</b>		INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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INSURER D:																	
INSURER E:																	
INSURER F:																	

**COVERAGES**      **CERTIFICATE NUMBER: 2016-2017 Certificates**      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b>	<input checked="" type="checkbox"/>	PAC 0331543-05	10/19/2016	10/19/2017	EACH OCCURRENCE \$ <b>1,000,000</b>
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>100,000</b>
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:					MED EXP (Any one person) \$ <b>5,000</b>
						PERSONAL & ADV INJURY \$ <b>1,000,000</b>
						GENERAL AGGREGATE \$ <b>2,000,000</b>
						PRODUCTS - COM/POP AGG \$ <b>2,000,000</b>
						\$
A	<input type="checkbox"/> <b>AUTOMOBILE LIABILITY</b>		PAC 0331543-05	10/19/2016	10/19/2017	COMBINED SINGLE LIMIT (Ea accident) \$ <b>1,000,000</b>
	<input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> HIREN AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS					BODILY INJURY (Per person) \$
						BODILY INJURY (Per accident) \$
						PROPERTY DAMAGE (Per accident) \$
						\$
	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR					EACH OCCURRENCE \$
	<input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE					AGGREGATE \$
	DED RETENTION \$					\$
	<input type="checkbox"/> <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>	<input type="checkbox"/> Y/N <input type="checkbox"/> N/A				PER STATUTE OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. EACH ACCIDENT \$
						E.L. DISEASE - EA EMPLOYEE \$
						E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
**City of Willcox Arizona is named as Additional Insured with respect to liability arising out of the operations of the named insured.**  
**Event Date : June 17th, 2017 in Railroad Park in Willcox Arizona.**

<b>CERTIFICATE HOLDER</b>		<b>CANCELLATION</b>	
<b>City of Willcox</b> <b>101 S. Railroad Ave Suite. B</b> <b>Willcox, AZ 85643</b>		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	
		AUTHORIZED REPRESENTATIVE  <b>E Leontieff/VANAGO</b>	

